

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

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

**For reporting on  
FFY18**

**Nevada**



**PART C DUE February 3, 2020**

**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 Individuals with Disabilities Education Act (IDEA), Part C, of 2004 requires states to provide a State Performance Plan/Annual Performance Report (SPP/APR) to the U.S. Office of Special Education Programs (OSEP). The SPP/APR evaluates each state's efforts to implement the requirements and purposes of Part C of the IDEA within the early intervention (EI) system for infants and toddlers with disabilities and their families. 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. During June 2019, Nevada received an OSEP determination of "Meets Requirements" following the most recently submitted Federal Fiscal Year (FFY) 2017 SPP/APR; this OSEP determination is available at: <http://dhhs.nv.gov/uploadedFiles/dhhsnv.gov/content/Programs/IDEA/2019%20-%20OSEP%20Determination%20Letter%2006-18-19%20Meets%20Requirments.pdf>

The State of Nevada's IDEA Part C FFY 2018 SPP/APR covers the timeline from July 1, 2018 through June 30, 2019. This is FFY 2018, State Fiscal Year (SFY) 2019. The following FFY 2018 SPP/APR Introduction provides an overview of Nevada's systems that are in place to ensure compliance with IDEA Part C requirements and purposes. Following the Introduction is Nevada's performance status relative to 11 SPP/APR indicators which also ensure compliance with IDEA Part C. Nevada's performance status is reported numerically and by percentage for each indicator compared to established targets, which have remained the same as the targets from FFY 2017 per stakeholder agreement on October 17, 2019 at Nevada's ICC meeting. A brief summary of the indicators is provided below:

#### 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 144 of the 150 children reviewed (96%) had all new services initiated in a timely manner. This is slight slippage over the 98.3% reported for FFY 2017. Two (2) early intervention programs received corrective action plans. The IDEA Part C Office verified timely correction of noncompliance for both programs.

#### Indicator 2: Services in Natural Environments

The State surpassed the 96% target, with 99.26% of children who received the majority of their early intervention services in natural environments. The IDEA Part C Office has verified the one (1) noncompliant program has transitioned all services to the natural environment and has demonstrated full compliance. There is slight slippage from the 99.51% performance data during FFY 2017. However, these data continue to represent a high level of achievement and are attributable to the individualization of services for children and families.

#### 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 2018 were collected using the Child Outcome Summary 7-point rating scale. Nevada is reporting complete data for 2,279 of 2,311 (99%) 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 did not meet the State's targets. The State experienced a decreased return rate for family surveys. The APR provides demographic data representativeness across race/ethnicity for return rates. Multiple factors which affected the return rate of surveys are provided.

#### 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 twenty-five less than the 412 reported for December 1, 2017. This represents 1.08% of the general population of infants in the State. Data indicates that the State exceeded the 1.00% target for FFY 2018.

#### Indicator 6: Child Find (Birth to Three)

Nevada's number of children served, ages birth through 2 years for this reporting period was 3,265 which is 9 less than the 3,274 reported for December 1, 2017. This represents 2.97% of the projected general population of infants in the State. Data indicates the State exceeded the 2.00% target for FFY

2018.

#### Indicator 7: 45-Day Timeline

Data indicates that 2,472 of all 2,486 (99.44%) initial IFSPs were compliant with the 45-day timeline requirement. While the State did not meet the target of 100% for FFY 2018, all EIS provider agencies were found to be substantially compliant and all programs have been verified as corrected.

#### Indicator 8: Early Childhood Transition

The performance target for this Indicator is 100% for all 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 met the target for one out of 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 the APR regarding verification of corrections for findings of noncompliance identified during FFY 2017.

#### 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 State System Improvement Plan (SSIP), which will be submitted by OSEP's deadline of April 2020. Nevada's FFY 2018 SPP/APR will be submitted electronically through OSEP's EMAP data system by the deadline of February 3, 2020. 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 2020 at <http://dhhs.nv.gov/Programs/IDEA/Publications/>

### 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 activities for collaboration include:

- 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 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 implementation sites in northern Nevada. This second year of the pyramid model project is expected to include additional scale up to EI programs in other regions within Nevada, and evaluation of the project at family, provider and program levels. 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.

Other ongoing collaborations include:

- 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 Part C Coordinator is a committee member for Nevada's Women, Infants and Children (WIC) Developmental Milestones Checklist project; promoting awareness and detection of developmental delays in children ages birth to 5 years;
- The Part C Office collaborates with the University of Nevada-Reno Learn the Signs Act Early program in bearing some of the financial cost to print Developmental Milestones booklets for distribution across Nevada.
- 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.

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 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

Provision and facilitation of training and technical assistance include:

- The IDEA Part C Office hosts monthly TA calls with management from all EI service provider agencies throughout Nevada. Topics are selected based on information and clarification issued by the IDEA Part C Office and those requested by participants. Informational documents and resources on evidence-based practices issued by the national TA Centers are shared with programs on a regular basis. The IDEA Part C Office also develops and issues topical TA documents to guide the system in implementing quality practices in a manner compliant with federal and state requirements. EI providers with findings of noncompliance were assisted in identifying underlying causes for the noncompliance and the IDEA Part C Office provided specific training and technical support to ensure timely correction of the noncompliance.
- 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 has also taken advantage of technical support from the OSEP funded TA Centers to work with stakeholders on system improvements and promoting quality practices.

#### **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.**

U.S. Office of Special Education Programs (OSEP)

TA Received:

- Participated in Monthly TA Calls
- Participated in regular calls with OSEP State Contact
- Webinar for SSIP Stakeholders during March 2019, with technical assistance from Nevada's national TA advisor (Margaret Gillis);
- Clarification for State-specific questions regarding statewide implementation of Part C system
- Ongoing technical assistance from NCPMI advisors
- Training from Early Childhood Personnel Center (ECPC) on Leadership Competencies, September 2019
- Part C staff attended trainings at the following conferences:
  - o Results Based Accountability Conference, April 2019
  - o National Training Institute, April 2019
  - o OSEP Leadership Conference, July 2019
  - o Infant and Toddler Coordinators Association (ITCA) Pre-Leadership Conference, July 2019
  - o Division of Early Childhood (DEC) Conference, October 2019
  - o Zero to Three Conference, October 2019

Actions Taken

- Provided information on best practices in early intervention field
  - Provided information to agency administrators regarding system of payments and maintenance of effort requirements
  - Increased communication with Department's fiscal team regarding fiscal monitoring
  - Improved budget process for application submission
- Early Childhood Technical Assistance Center (ECTA), National Center for Systemic Improvement (NCSI), and the Center for IDEA Early Childhood Data Systems (DaSy):

TA Received:

- Monthly support for reviewing the State Systemic Improvement Plan (SSIP) implementation and evaluation of progress on the SSIP
- Resources from other TA Centers and/or examples from other States
- Assisted with data collection and evaluation plan
- Provided TA documents to assist the state in implementing improvement activities

Actions Taken:

- Improved systems for tracking SSIP activities and progress
- Increased frequency of tracking status of training and TA support to providers
- Increased frequency of engagement with stakeholders
- Updated SSIP activities and evaluation plan to address inconsistencies

TA Received:

Review and feedback on Annual Performance Report

Actions Taken:

- Added additional detail to improve report or to clarify information on process for correction of noncompliance
- Completed additional data analysis to support report on performance
- Improved communication with ICC and other stakeholders

TA Received:

Facilitation of Part C Results-Based Accountability (RBA) Cross-State Learning Collaborative, until September 2019 when funding for this program was completed.

- Web-based meetings with participating states for information sharing
- Monthly calls to address issues identified as priority through the collaborative process

Actions Taken:

- Increased collaboration in the comprehensive monitoring processes of early intervention providers

### **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 has increased the 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. Ongoing improvement in the overall system of professional development for early intervention service providers is being supported through a number of initiatives:

- The IDEA Part C Office and early intervention programs have 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 and trains on credentialing requirements regarding traditional licensure with the Nevada Department of Education and alternative certification with the IDEA Part C Office. 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 presented or discussed this past year included highly qualified professionals, licensure requirements, TRAC data system training, and Individual Family Service Plan (IFSP) services and supports.
- 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's Systemic Improvement Plan (SSIP).**

Throughout the course of FFY 2018, the IDEA Part C Office presented data and other key early intervention (EI) system information relative to SPP/APR indicators, 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. 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. The ICC reviewed and provided feedback for the FFY 2018 SPP/APR on January 9, 2020.
- ICC Subcommittee meetings for Child Find, Family Advisory, and Professional Development also meet quarterly or as needed with board members from the ICC as well as community stakeholders interested in supporting EI initiatives.
- SSIP Stakeholder Meeting via webinar on March 20, 2019; stakeholders reviewed and provided feedback on the SSIP draft prior to the IDEA Part C Office submitting the SSIP in April 2019. One of Nevada's national TA advisors, Margaret Gillis, attended to provide technical assistance during the

webinar.

• 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. The SLT met monthly from January 2019 to present, in both face to face and teleconference meetings. 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 three (3) EI sites, with eventual scale up planned to occur statewide over the next two years. More information on the stakeholder engagement for the pyramid model project will be provided in the State's SSIP during April 2020.

The IDEA Part C Office is grateful for the large community of support for Nevada's EI system.

Clarification added 4/28/2020:

The previous Certification we had uploaded was in PDF file format and did not include the Accessibility Check. We have now included the same Certification in a Word document with the Accessibility Check at the end of the document reflecting no issues were found.

Although we did provide measurement tables in PDF file format previously and had also included the Accessibility Check for these, for clarification we have combined the tables into one Word document this time, with the Accessibility Check at the end of the document reflecting no issues were found.

The SSIP/Indicator C-11 has been updated to now reflect the FFY 2019 target. Also included in the SSIP for this Clarification were additional wording to explain stakeholder engagement for target setting, and Alt Text wording to describe graphs which were previously marked as decorative for the Accessibility Check. Finally, the SSIP has an updated 508 Compliance verification screenshot of the Accessibility Check submitted for Clarification.

#### **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 2017 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 2017 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 2017 APR in 2019, is available.**

Nevada's FFY 2018 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, 2020. Additionally, FFY 2018 Report Cards for each of the early intervention service provider programs in the State will be posted on the same website. A news release will be created to report to the media on the release of the FFY 2018 SPP/APR not later than June 1, 2020 through the DHHS Public Information Officer.

#### **Intro - Prior FFY Required Actions**

None

#### **Response to actions required in FFY 2017 SPP/APR**

#### **Intro - OSEP Response**

The State did not provide verification that the attachments it included in its FFY 2018 SPP/APR submission are in compliance with Section 508 of the Rehabilitation Act of 1973, as amended (Section 508), as required by Section 508 and noted in the FFY 2018 SPP/APR User Guides and technical webinar.

The State did not, as required by the measurement table, provide a target for FFY 2019 for Indicator C-11/State Systemic Improvement Plan (SSIP).

#### **Intro - Required Actions**

# Indicator 1: Timely Provision of Services

## Instructions and Measurement

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

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

### Data Source

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

### Measurement

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

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

### Instructions

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

Targets must be 100%.

Describe the results of the calculations and compare the results to the target. Describe the method used to collect these data and if data are from the State's monitoring, describe the procedures used to collect these data. States report in both the numerator and denominator under Indicator 1 on the number of children for whom the State ensured the timely initiation of new services identified on the IFSP. Include the timely initiation of new early intervention services from both initial IFSPs and subsequent IFSPs. Provide actual numbers used in the calculation.

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

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

Provide detailed information about the timely correction of noncompliance as noted in the Office of Special Education Programs' (OSEP's) response table for the previous SPP/APR. If the State did not ensure timely correction of the previous noncompliance, provide information on the extent to which noncompliance was subsequently corrected (more than one year after identification). In addition, provide information regarding the nature of any continuing noncompliance, methods to ensure correction, and any enforcement actions that were taken.

If the State reported less than 100% compliance for the previous reporting period (e.g., for the FFY 2018 SPP/APR, the data for FFY 2017), 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

<b>Baseline</b>	2005	61.90%			
<b>FFY</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>
Target	100%	100%	100%	100%	100%
Data	96.04%	97.57%	91.80%	97.93%	98.31%

### Targets

<b>FFY</b>	<b>2018</b>	<b>2019</b>
Target	100%	100%

### FFY 2018 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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
133	150	98.31%	100%	96.00%	Did Not Meet Target	Slippage

### Provide reasons for slippage, if applicable

In FFY17 there were two (2) programs out of compliance. This number remained the same in FFY 18, two (2) programs were in non-compliance for this indicator. However, the number with identified non-compliance increased by four (4) child records. Although these child records were out of compliance it was verified that services were initiated, although late. Clarification added 4/28/2020: The reason for this slippage included, as stated by the programs, provider and program scheduling which were inadequate to meet timelines. The IDEA Part C Office provided Technical Assistance to the programs to mitigate any such recurring issue.

**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.**

Clarification added 4/28/2020: Upon issuing a finding, the NV IDEA Part C team conducts follow-up monitoring and collection of data to ensure that the requirements are being met. For indicator 1, we do not use our database for this process but instead conduct child record reviews on-site. Once a finding is issued, we verify correction by reviewing another set of records to ensure that the process is corrected. We also review each individual case that had compliance to verify they received their services although late. The data pulled demonstrated 100% compliance with regulatory requirements. These programs demonstrated 100% compliance and therefore we closed out the finding.

Nevada's process for monitoring EIS provider programs for compliance with the requirements of the IDEA was revised in FFY 2015. In FFY 2018, the Part C Office completed comprehensive on-site monitoring of six (6) EIS programs relative to this indicator. This was the end of a two-year cycle which includes an on-site review of all twelve (12) programs statewide. 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 are 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 2018 monitoring was all activity between July 1, 2018 and March 31, 2019. 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. Comprehensive Monitoring- A total of six (6) EIS programs were monitored for timely initiation of IFSP services in FFY 2018 and included a review of 187 records. Of the records reviewed, 150 had new services added at some juncture during the period covered for the review (July 1, 2018 through March 31, 2019). A total of 133 records had all new services initiated within the required timeline. Eleven (11) 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 144 of the 150 children reviewed (96%) had all new services initiated in a timely manner. This is slight slippage from the 98.3% reported for FFY 2017. Two (2) EIS Programs were issued findings of noncompliance relative to Indicator 1 based on the FFY 2018 monitoring. Findings were as follows: \* One (1) program was compliant with timely initiation of IFSP services for 26 of 28 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. \* One (1) program was compliant for timely initiation of IFSP services for 33 of 37 children (89%). 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. Full correction has been demonstrated and verified. The program was issued a letter of correction on October 22, 2019.

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

XXX

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

XXX

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

**Correction of Findings of Noncompliance Identified in FFY 2017**

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 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) new findings of noncompliance were issued as a result of general supervision activities in FFY 2017. 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 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 children 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. Based on the new data collected, it was verified that both programs had timely correction.

To verify systemic correction a quarterly report was generated from the TRAC data system in order to audit timely services 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 (i.e., submittal of supporting documentation for initiation of services for the two (2) records with identified non-compliance). These 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 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.

**FFY 2017 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

XXX

**Correction of Findings of Noncompliance Identified Prior to FFY 2017**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

**Findings of Noncompliance Verified as Corrected**

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

XXX

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

XXX

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

**Actions taken if noncompliance not corrected**

XXX

**Findings of Noncompliance Verified as Corrected**

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

XXX

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

XXX

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

**Actions taken if noncompliance not corrected**

XXX

**Findings of Noncompliance Verified as Corrected**

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

XXX

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

XXX

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

**Actions taken if noncompliance not corrected**

XXX

**1 - Prior FFY Required Actions**

None

**Response to actions required in FFY 2017 SPP/APR**

**1 - OSEP Response**

Although the State's FFY 2018 data represent slippage from the FFY 2017 data and the State did not meet its FFY 2018 target for this indicator, the State did not, as required, provide an explanation of slippage.

The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified in FFY 2017 because it did not report

that it verified correction of those findings, consistent with the requirements in OSEP Memo 09-02. Specifically, the State did not report that that it verified that each EIS program or provider with noncompliance identified in FFY 2017 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.

The State did not provide the reasons for delay, as required by the measurement table.

## **1 - Required Actions**

## Indicator 2: Services in Natural Environments

### Instructions and Measurement

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

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

**Data Source**

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

**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	2005	98.50%			
FFY	2013	2014	2015	2016	2017
Target>=	96.00%	96.00%	96.00%	96.00%	96.00%
Data	99.72%	98.86%	99.62%	98.64%	99.51%

### Targets

FFY	2018	2019
Target>=	96.00%	96.00%

### Targets: Description of Stakeholder Input

XXX

Clarification added 4/28/2020 for Stakeholder engagement: Stakeholders were provided an opportunity to comment on targets as follows:

On October 17, 2019 the IDEA Part C Office facilitated the quarterly meeting for the Interagency Coordinating Council (ICC). The ICC is comprised of individuals representing the following: parent representatives who have or have recently had children enrolled in early intervention services, public and private early intervention programs, institutions of higher education, Part B 619, Inter-tribal council, Health Care Policy and Finances/Medicaid, parent advocacy and legal advocacy groups for individuals with disabilities, military early childhood community, and the Governor's Council for Individuals with Disabilities.

Following Open Meeting Law, the agenda topic to review APR targets was scheduled prior to the 10/17/2019 meeting with the agenda provided to all members prior as well. APR targets were discussed during the meeting with stakeholders having the opportunity to comment and ask questions during the meeting, as well as following the meeting via email or phone call to the Part C Office by December 1, 2019. The ICC agreed that the targets would remain the same for the APR until the board could perform strategic planning, likely to occur over the course of 1 to 2 quarterly meetings during 2020 in order to decide the targets for the next 5 years. The next quarterly ICC meeting was held on 1/9/2020, and included the minutes from the 10/17/2019 meeting which documented the stakeholder engagement re: discussion of the targets and the board's decision to keep the targets the same; these minutes were reviewed and approved by the board on 1/9/2020.

The targets for this indicator were established through FFY 2018 and were presented to the State ICC for review and comment in this reporting year. No changes were proposed; therefore, the targets were to be maintained at the level previously established. Nevada has met the target for this indicator every year.

### Prepopulated Data

Source	Date	Description	Data
SY 2018-19 Child Count/Educational Environment Data Groups	07/10/2019	Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	3,242
SY 2018-19 Child Count/Educational Environment Data Groups	07/10/2019	Total number of infants and toddlers with IFSPs	3,265

### FFY 2018 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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
3,242	3,265	99.51%	96.00%	99.30%	Met Target	No Slippage

**Provide reasons for slippage, if applicable**

XXX

**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, 2018 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, 2018 to determine whether children enrolled in each program received the majority of their services in settings considered natural environment. One (1) program was issued a finding is this indicator, based on their performance of providing services to 79 of 87 (91%) children and families in the natural environment. These eight (8) children did not have appropriate justification for services outside of the natural environment. The IDEA Part C Office has verified the program has transitioned all services to the natural environment and demonstrated full compliance. A letter of correction was issued on 10/22/19.

Clarification added 4/28/2020: The NV IDEA Part C Office verified that each EIS program with noncompliance is (1) correctly implementing the specific regulatory requirements (achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring; and (2) has corrected each individual case of noncompliance. Upon issuing a finding, the NV IDEA Part C team conducts follow-up monitoring and collection of data to ensure that the requirements are being met. For indicator 1, we do not use our database for this process but instead conduct child record reviews on-site. Once a finding is issued, we verify correction by reviewing another set of records to ensure that the process is corrected. We also review each individual case that had compliance to verify they received their services although late. The data pulled demonstrated 100% compliance with regulatory requirements. This program demonstrated 100% compliance and therefore we closed out the finding with a letter of correction, which we use to reflect resolution has occurred, as mentioned above.

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 (99.26%) is slightly lower than 99.51% reported in FFY 2017. However, 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

**Response to actions required in FFY 2017 SPP/APR**

**2 - OSEP Response**

The State provided a target for FFY 2019 for this indicator, but OSEP cannot accept that target because the State did not indicate that stakeholders were provided an opportunity to comment on the targets.

OSEP notes that the State reported that one program was issued a finding under this indicator because "8 children did not have appropriate justification for services outside of the natural environment". The State did not demonstrate that the EIS program corrected the finding of noncompliance identified because it did not report that it verified correction of those findings, consistent with the requirements in OSEP Memo 09-02. Specifically, the State did not report that that it verified that each EIS program or provider with noncompliance identified: (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.

**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

XXX

Clarification added 4/28/2020 for Stakeholder engagement: Stakeholders were provided an opportunity to comment on targets as follows:

On October 17, 2019 the IDEA Part C Office facilitated the quarterly meeting for the Interagency Coordinating Council (ICC). The ICC is comprised of individuals representing the following: parent representatives who have or have recently had children enrolled in early intervention services, public and private early intervention programs, institutions of higher education, Part B 619, Inter-tribal council, Health Care Policy and Finances/Medicaid, parent advocacy and legal advocacy groups for individuals with disabilities, military early childhood community, and the Governor's Council for Individuals with Disabilities.

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#### Historical Data

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

#### Targets

FFY	2018	2019
Target A1>=	67.90%	67.90%
Target A2>=	40.14%	40.14%
Target B1>=	71.96%	71.96%
Target B2>=	38.44%	38.44%
Target C1>=	66.28%	66.28%
Target C2>=	41.90%	41.90%

#### FFY 2018 SPP/APR Data

Number of infants and toddlers with IFSPs assessed

2,279

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

	Number of children	Percentage of Total
a. Infants and toddlers who did not improve functioning	13	0.57%

	Number of children	Percentage of Total
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	675	29.62%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	714	31.33%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	613	26.90%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	264	11.58%

	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 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	1,327	2,015	65.87%	67.90%	65.86%	Did Not Meet 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	877	2,279	42.86%	40.14%	38.48%	Did Not Meet Target	Slippage

**Provide reasons for A1 slippage, if applicable**

XXX

**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 2018 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. 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. This EI program serves a high number of children who are made eligible under the social-emotional eligibility criteria.

A hypothesis was made by stakeholder groups: there would be slippage in this outcome for infants and toddlers during the upcoming reporting years before improvements are demonstrated. This slippage can be attributed to the increased awareness and knowledge and skills of service providers showing an increased comfort level with identifying social-emotional concerns in infants and toddlers. With increased awareness comes more accurate child outcomes ratings which may result in a slight variation in ratings prepared prior to targeted training. Improved knowledge and skills for EI professionals has an overall impact on infants' and toddlers' overall health and development. All of these contributing factors led to slippage in this outcome area.

Although there were 74 children with more complete progress data compared to last year, NV also had one less program that progress data are being reported on due to the termination of an EI program in March 2018. A higher representation of children with progress data are being reported statewide compared to last year. However, of the twelve (12) EI programs with reported progress data, more than 58% of the programs' progress data declined in Outcome A2.

As a result of slippage, the meaningful difference calculator developed by the Early Childhood Outcome (ECO) Center was used to determine if the States performance in this outcome truly had a meaningful difference compared to the State target. The results of these data identified there was not a statistically significant difference in the State's performance compared to the target.

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

	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	15	0.66%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	554	24.31%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	912	40.02%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	712	31.24%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	86	3.77%

	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 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	1,624	2,193	76.30%	71.96%	74.05%	Met Target	No Slippage
B2. The percent of infants and toddlers who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	798	2,279	39.59%	38.44%	35.02%	Did Not Meet Target	Slippage

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

XXX

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

Nevada demonstrated slippage and did not meet the target for Outcome B2. In order to determine the root cause leading to this slippage, analysis of FFY 2017 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. 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.

Although there were 74 children with more complete progress data compared to last year, NV also had one less program for which progress data are being reported on due to the termination of an EI program in March 2018. A higher representation of children with progress data are being reported statewide compared to last year. However, of the twelve (12) EI programs with reported progress data, more than 65% of the programs' progress data declined in Outcome B2.

As a result of slippage, the meaningful difference calculator developed by the Early Childhood Outcome (ECO) Center was used to determine if the States performance in this outcome truly had a meaningful difference compared to the State target. The results of these data identified there was not a statistically significant difference in the State's performance compared to the target.

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

	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	11	0.48%
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	576	25.27%
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	748	32.82%
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	771	33.83%
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	173	7.59%

	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 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	1,519	2,106	74.12%	66.28%	72.13%	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	944	2,279	47.71%	41.90%	41.42%	Did Not Meet Target	Slippage

**Provide reasons for C1 slippage, if applicable**

XXX

**Provide reasons for C2 slippage, if applicable**

Nevada demonstrated slippage and did not meet the target for Outcome C2. In order to determine the root cause leading to this slippage, analysis of FFY 2018 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. 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.

Although there were 74 children with more complete progress data compared to last year, NV also had one less program for which progress data are being reported on due to the termination of an EI program in March 2018. A higher representation of children with progress data are being reported statewide compared to last year. However, of the twelve (12) EI programs with reported progress data, 75% of the programs' progress data declined in Outcome C2.

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. The results of these data identified there was not a statistically significant difference in the State's performance compared to the target.

**Will your separate report be just the at-risk infants and toddlers or aggregated performance data on all of the infants and toddlers it serves under Part C?**

XXX

**Historical Data**

	Baseline	FFY	2013	2014	2015	2016	2017
A1	XXX	Target>=	XXX	XXX	XXX	XXX	XXX
A1	XXX	Data	XXX	XXX	XXX	XXX	XXX
A1 AR	XXX	Target>=	XXX	XXX	XXX	XXX	XXX
A1 AR	XXX	Data	XXX	XXX	XXX	XXX	XXX
A2	XXX	Target>=	XXX	XXX	XXX	XXX	XXX
A2	XXX	Data	XXX	XXX	XXX	XXX	XXX
A2 AR	XXX	Target>=	XXX	XXX	XXX	XXX	XXX
A2 AR	XXX	Data	XXX	XXX	XXX	XXX	XXX
B1	XXX	Target>=	XXX	XXX	XXX	XXX	XXX
B1	XXX	Data	XXX	XXX	XXX	XXX	XXX
B1 AR	XXX	Target>=	XXX	XXX	XXX	XXX	XXX
B1 AR	XXX	Data	XXX	XXX	XXX	XXX	XXX
B2	XXX	Target>=	XXX	XXX	XXX	XXX	XXX
B2	XXX	Data	XXX	XXX	XXX	XXX	XXX
B2 AR	XXX	Target>=	XXX	XXX	XXX	XXX	XXX
B2 AR	XXX	Data	XXX	XXX	XXX	XXX	XXX
C1	XXX	Target>=	XXX	XXX	XXX	XXX	XXX
C1	XXX	Data	XXX	XXX	XXX	XXX	XXX
C1 AR	XXX	Target>=	XXX	XXX	XXX	XXX	XXX
C1 AR	XXX	Data	XXX	XXX	XXX	XXX	XXX

<b>C2</b>	XXX	Target>=	XXX	XXX	XXX	XXX	XXX
<b>C2</b>	XXX	Data	XXX	XXX	XXX	XXX	XXX
<b>C2 AR</b>	XXX	Target>=	XXX	XXX	XXX	XXX	XXX
<b>C2 AR</b>	XXX	Data	XXX	XXX	XXX	XXX	XXX

**Targets**

<b>FFY</b>	<b>2018</b>	<b>2019</b>
Target A1 >=	XXX	XXX
A1 AR	XXX	
Target A2 >=	XXX	XXX
A2 AR	XXX	XXX
Target B1 >=	XXX	XXX
B1 AR	XXX	XXX
Target B2 >=	XXX	XXX
B2 AR	XXX	XXX
Target C1 >=	XXX	XXX
C1 AR	XXX	XXX
Target C2 >=	XXX	XXX
C2 AR	XXX	XXX

**FFY 2018 SPP/APR Data**

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

XXX

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

<b>Not including at-risk infants and toddlers</b>	<b>Number of children</b>	<b>Percentage of Total</b>
a. Infants and toddlers who did not improve functioning	XXX	XXX
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	XXX	XXX
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	XXX	XXX
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	XXX	XXX
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	XXX	XXX

<b>Just at-risk infants and toddlers/All infants and toddlers</b>	<b>Number of children</b>	<b>Percentage of Total</b>
a. Infants and toddlers who did not improve functioning	XXX	XXX
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	XXX	XXX
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	XXX	XXX
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	XXX	XXX
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	XXX	XXX

Not including at-risk infants and toddlers	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 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	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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	XXX	XXX	XXX	XXX	XXX	XXX	XXX

Provide reasons for A1 slippage, if applicable

XXX

Provide reasons for A2 slippage, if applicable

XXX

Just at-risk infants and toddlers/All infants and toddlers	Numerator	Denominator	FFY 2017 Data	FFY 2018 Target	FFY 2018 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	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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	XXX	XXX	XXX	XXX	XXX	XXX	XXX

Provide reasons for A1 AR/ALL slippage, if applicable

XXX

Provide reasons for A2 AR/ALL slippage, if applicable

XXX

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

Not including at-risk infants and toddlers	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	XXX	XXX
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	XXX	XXX
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	XXX	XXX
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	XXX	XXX
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	XXX	XXX

Just at-risk infants and toddlers/All infants and toddlers	Number of Children	Percentage of Total
a. Infants and toddlers who did not improve functioning	XXX	XXX
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	XXX	XXX
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	XXX	XXX

<b>Just at-risk infants and toddlers/All infants and toddlers</b>	<b>Number of Children</b>	<b>Percentage of Total</b>
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	XXX	XXX
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	XXX	XXX

<b>Not including at-risk infants and toddlers</b>	<b>Numerator</b>	<b>Denominator</b>	<b>FFY 2017 Data</b>	<b>FFY 2018 Target</b>	<b>FFY 2018 Data</b>	<b>Status</b>	<b>Slippage</b>
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	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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	XXX	XXX	XXX	XXX	XXX	XXX	XXX

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

XXX

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

XXX

<b>Just at-risk infants and toddlers/All infants and toddlers</b>	<b>Numerator</b>	<b>Denominator</b>	<b>FFY 2017 Data</b>	<b>FFY 2018 Target</b>	<b>FFY 2018 Data</b>	<b>Status</b>	<b>Slippage</b>
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	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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	XXX	XXX	XXX	XXX	XXX	XXX	XXX

**Provide reasons for B1 AR/ALL slippage, if applicable**

XXX

**Provide reasons for B2 AR/ALL slippage, if applicable**

XXX

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

<b>Not including at-risk infants and toddlers</b>	<b>Number of Children</b>	<b>Percentage of Total</b>
a. Infants and toddlers who did not improve functioning	XXX	XXX
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	XXX	XXX
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	XXX	XXX
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	XXX	XXX
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	XXX	XXX

<b>Just at-risk infants and toddlers/All infants and toddlers</b>	<b>Number of Children</b>	<b>Percentage of Total</b>
a. Infants and toddlers who did not improve functioning	XXX	XXX
b. Infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	XXX	XXX
c. Infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it	XXX	XXX
d. Infants and toddlers who improved functioning to reach a level comparable to same-aged peers	XXX	XXX
e. Infants and toddlers who maintained functioning at a level comparable to same-aged peers	XXX	XXX

<b>Not including at-risk infants and toddlers</b>	<b>Numerator</b>	<b>Denominator</b>	<b>FFY 2017 Data</b>	<b>FFY 2018 Target</b>	<b>FFY 2018 Data</b>	<b>Status</b>	<b>Slippage</b>
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	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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	XXX	XXX	XXX	XXX	XXX	XXX	XXX

**Provide reasons for C1 slippage, if applicable**

XXX

**Provide reasons for C2 slippage, if applicable**

XXX

<b>Just at-risk infants and toddlers/All infants and toddlers</b>	<b>Numerator</b>	<b>Denominator</b>	<b>FFY 2017 Data</b>	<b>FFY 2018 Target</b>	<b>FFY 2018 Data</b>	<b>Status</b>	<b>Slippage</b>
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	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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	XXX	XXX	XXX	XXX	XXX	XXX	XXX

**Provide reasons for C1 AR/ALL slippage, if applicable**

XXX

**Provide reasons for C2 AR/ALL slippage, if applicable**

XXX

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

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	2,311
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.	922

	<b>Yes / No</b>
Was sampling used?	NO

	Yes / No
Has your previously-approved sampling plan changed?	
If the plan has changed, please provide sampling plan.	

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

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

YES

**Provide the criteria for defining “comparable to same-aged peers.”**

**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 2018 were collected using the Child Outcome Summary Form (COSF) 7-point rating scale. Nevada is reporting complete data for 2,279 of 2,311 (99%) 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. Nevada is reporting progress data for 74 additional infants and toddlers in FFY 2018, even with the termination of an EI program in March 2018. Analysis of data for FFY 2018 indicates 32 infants and toddlers were not accounted for (based on the number of children who received six (6) months of service prior to exiting). This also leads to the demonstration of significant progress in the representation of the state's data.

Progress data for 32 children in services for six (6) months or longer was not able to be reported due to the following reasons:

- \* Entry data was submitted but the EIS program reported the child did not receive intervention for the entire six (6) month timeframe due to loss of contact with families.
- \* Entry data was submitted for the child; however, exit data was not submitted by the program due to a lack of internal tracking processes.
- \* Exit data was submitted for the child; however, entry data had not been submitted. Therefore, progress could not be determined.

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

### 3 - Prior FFY Required Actions

None

**Response to actions required in FFY 2017 SPP/APR**

### 3 - OSEP Response

The State provided targets for FFY 2019 for this indicator, but OSEP cannot accept those targets because the State did not indicate that stakeholders were provided an opportunity to comment on the targets.

### 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

	Baseline	FFY	2013	2014	2015	2016	2017
A	2006	Target >=	95.00%	95.50%	96.00%	96.50%	97.00%
A	94.29%	Data	95.83%	97.20%	94.37%	98.05%	97.16%
B	2006	Target >=	94.00%	94.50%	95.00%	95.50%	96.00%
B	91.32%	Data	96.44%	93.48%	93.86%	94.81%	96.02%
C	2006	Target >=	92.00%	92.50%	93.00%	93.50%	94.00%
C	91.00%	Data	98.82%	96.90%	94.64%	97.09%	95.74%

### Targets

FFY	2018	2019
Target A >=	97.50%	97.50%
Target B >=	96.50%	96.50%
Target C >=	94.50%	94.50%

### Targets: Description of Stakeholder Input

XXX

Clarification added 4/28/2020 for Stakeholder engagement: Stakeholders were provided an opportunity to comment on targets as follows:

On October 17, 2019 the IDEA Part C Office facilitated the quarterly meeting for the Interagency Coordinating Council (ICC). The ICC is comprised of individuals representing the following: parent representatives who have or have recently had children enrolled in early intervention services, public and private early intervention programs, institutions of higher education, Part B 619, Inter-tribal council, Health Care Policy and Finances/Medicaid, parent

advocacy and legal advocacy groups for individuals with disabilities, military early childhood community, and the Governor's Council for Individuals with Disabilities.

Following Open Meeting Law, the agenda topic to review APR targets was scheduled prior to the 10/17/2019 meeting with the agenda provided to all members prior as well. APR targets were discussed during the meeting with stakeholders having the opportunity to comment and ask questions during the meeting, as well as following the meeting via email or phone call to the Part C Office by December 1, 2019. The ICC agreed that the targets would remain the same for the APR until the board could perform strategic planning, likely to occur over the course of 1 to 2 quarterly meetings during 2020 in order to decide the targets for the next 5 years. The next quarterly ICC meeting was held on 1/9/2020, and included the minutes from the 10/17/2019 meeting which documented the stakeholder engagement re: discussion of the targets and the board's decision to keep the targets the same; these minutes were reviewed and approved by the board on 1/9/2020.

Nevada's Family Outcomes Survey instrument was designed to meet federal requirements; however, it is also designed to provide opportunity for families to give feedback on the effectiveness of the early intervention system in responding to the needs of their family. The survey instrument was developed by a task force that included family members and representatives from the Nevada Disability Advocacy and Law Center (NDALC), Nevada Parents Educating Parents (Nevada PEP), The Nevada Center for Excellence in Disabilities (NCED), Nevada's IDEA Part C Office, NEIS programs, Early Childhood Special Education, faculty from the University of Nevada, Reno (UNR), and Mental Health Services. The original survey was developed in 2006. At the request of the IDEA Part C office and the Nevada Early Intervention Interagency Coordinating Council (ICC), revisions were made in 2008, 2009 and in 2017. A stakeholder workgroup was convened in February 2017 to begin a review and revision of the survey instrument. Technical support for the 2017 revision of the survey instrument was provided through the National Center for System Improvement (NCSI) and was implemented in March 2018 to conduct the State's 2018 Annual Family Outcomes Survey. The revised survey was changed from 20 close ended questions to 17. The same survey instrument was used for the 2018 Nevada's Family Outcomes Survey.

**FFY 2018 SPP/APR Data**

The number of families to whom surveys were distributed	1,710
Number of respondent families participating in Part C	253
A1. Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights	245
A2. Number of responses to the question of whether early intervention services have helped the family know their rights	253
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	241
B2. Number of responses to the question of whether early intervention services have helped the family effectively communicate their children's needs	253
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	235
C2. Number of responses to the question of whether early intervention services have helped the family help their children develop and learn	253

	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights (A1 divided by A2)	97.16%	97.50%	96.84%	Did Not Meet Target	No Slippage
B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs (B1 divided by B2)	96.02%	96.50%	95.26%	Did Not Meet Target	No Slippage
C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn (C1 divided by C2)	95.74%	94.50%	92.89%	Did Not Meet Target	Slippage

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

XXX

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

XXX

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

Multiple factors affected the return rate of 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. Invalid addresses in system of record (65) reduced the impact/distribution of the survey (3.7%). The Part C Office is looking 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. Additionally, the Part C Office will be implementing a review

process within the central office to correct invalid address returned mail in the system. One program did not have any Family Outcomes Surveys returned at all.

	Yes / No
Was sampling used?	NO
If yes, has your previously-approved sampling plan changed?	
If the plan has changed, please provide the sampling plan.	

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

	Yes / No
Was a collection tool used?	YES
If yes, is it a new or revised collection tool?	NO
If your collection tool has changed, upload it here	XXX
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.**

Due to a central office error thirty (30) surveys were returned that could not be matched back to the race ethnicity or regional data. These thirty (30) surveys represent 11.9% of the total two hundred and fifty-three (253) surveys completed and returned. There will be a change in the survey instrument for FFY 19 which will eliminate the need for unique survey codes to associate with system of record child demographic data for each returned survey. However, the Part C Office understands the risk taken regarding instances where families may decide to not include their race/ethnicity, region or program on the tool. The family outcomes survey will include a description of why and how representativeness is collected and its importance to the IDEA Part C and Early Intervention system of services. The online survey instrument will require families to include race/ethnicity and region before survey completion. The benefits and risks of having families complete an anonymous survey will be discussed in depth with the state's national technical assistance advisors. The tool for FFY19 will be uploaded with the FFY20 APR.

**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.**

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 months and was receiving early intervention services from one of the state or community early intervention programs as of January 19, 2019. A total of 1,775 children met this criterion, and these families were sent a survey for each child in the home enrolled in early intervention services. On March 1, 2019, the survey was mailed to all eligible families. A cover letter accompanied each survey, as well as a postage-paid return envelope. A child specific survey code was provided to each family to ensure one survey was completed per child. The cover letter informed families their survey would be returned to the IDEA Part C Office and all responses would remain confidential. Families were also provided the option to complete their survey on-line through SurveyMonkey. If a family had provided their email address and it was entered into the TRAC data system, they were also emailed a copy of the cover letter and survey. Families were asked to answer the survey questions and return them by April 22, 2019. 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.

After the initial mailing a total of 65 surveys were returned by USPS to the Part C Office because of invalid mailing addresses. The addresses used for label creation matched the addresses in the TRAC system for these families. The 65 addresses are not included in the final count because these households never received a survey. Therefore, the final total for distribution of the survey was 1,710. A follow-up reminder was sent to families who had not responded the second week of April 2019 asking them to complete the survey and offered the option to contact the IDEA Part C Office for another copy of the survey, to submit their survey via email or to complete their survey via SurveyMonkey. The final total of unduplicated survey responses was two hundred fifty-three (253). One hundred and eighty-nine (189) surveys were received by mail and sixty-four (64) responded via SurveyMonkey. This is a return rate of 14.8% which is a decrease of less than 4% from last year.

Table 1 provides a breakdown of the distribution of surveys and responses received by Race/Ethnicity per federal categories. The data compare the percentages of the statewide survey distribution and response for each race/ethnicity as well as the rate of return for each category. The percent of statewide responses were slightly higher than the percentages for distribution in the White, Asian and Two or More Races categories. The remaining categories were slightly lower in percent of responses compared to distribution percentages. It has not been determined whether the differences are statistically significant.

The percent of statewide responses received for each region was consistent with the percent distributed for each region (see Table 2). The rate of survey return by region was also relatively consistent with the statewide rate of return with the exception of the northeast region. The northeast region was much higher than the statewide response.

The southern and northwest regions were slightly lower than the statewide response. Compared to last year, these two regions report a decrease rather than increase and conversely the northeast region reports an increase rather than decrease. The regional differences of responses between where the two largest populations reside and the region where the smallest population reside could be related to the decrease of responses this year as compared to last.

The results of the FFY 2018/SFY 2019 Survey are as follows:

Know Their Rights

Statewide: This data are based on responses to Question 13 of the SFY 2019 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, 96.8% (245/253) of the families responding to the 2019 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 did not meet the State's target of 97.5% for this reporting period and remains consistent compared to the 2018 survey. There were 5 families indicating they were undecided regarding this question.

#### Effectively Communicate Their Children's Needs

Statewide: This data are based on responses to Question 6 of the SFY 2019 Annual Family Survey regarding the impact of participating in early intervention services on helping them to support their child's development, 95.2% (241/253) 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 1% compared to the 2018 survey. A total of 6 families indicated they were undecided regarding this question.

#### Help Their Children Develop and Learn

Statewide: These data are based on responses to Question 14 of the SFY 2019 Annual Family Survey which states, "My Early Intervention providers have supported me in knowing how to help my child develop and learn", 92.8% (235/253) responded favorably. Performance for this statement did not meet the State target of 94.5% and is considerably lower than the 96% reported on the same question in the 2018 survey.

The rate of survey return by region was relatively consistent with the statewide rate of return with the exception of the northeast region was much higher than the statewide response. The southern and northwest regions were slightly lower than the statewide response. Compared to last year, these two regions report a decrease rather than increase and conversely the northeast reports an increase rather than decrease. The differences could be related to the lack of responses this year as compared to last.

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

## 4 - Prior FFY Required Actions

In the FFY 2018 SPP/APR, the State must report whether its FFY 2018 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 2017 SPP/APR**

## 4 - OSEP Response

The State provided targets for FFY 2019 for this indicator, but OSEP cannot accept those targets because the State did not indicate that stakeholders were provided an opportunity to comment on the targets.

## 4 - Required Actions

## 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 (EMAPS)) 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	2005	0.47%			
FFY	2013	2014	2015	2016	2017
Target >=	0.95%	1.00%	1.00%	1.00%	1.00%
Data	0.80%	1.12%	1.24%	1.11%	1.13%

### Targets

FFY	2018	2019
Target >=	1.00%	1.08%

### Targets: Description of Stakeholder Input

XXX

Clarification added 4/28/2020 for Stakeholder engagement: Stakeholders were provided an opportunity to comment on targets as follows:

On October 17, 2019 the IDEA Part C Office facilitated the quarterly meeting for the Interagency Coordinating Council (ICC). The ICC is comprised of individuals representing the following: parent representatives who have or have recently had children enrolled in early intervention services, public and private early intervention programs, institutions of higher education, Part B 619, Inter-tribal council, Health Care Policy and Finances/Medicaid, parent advocacy and legal advocacy groups for individuals with disabilities, military early childhood community, and the Governor's Council for Individuals with Disabilities.

Following Open Meeting Law, the agenda topic to review APR targets was scheduled prior to the 10/17/2019 meeting with the agenda provided to all members prior as well. APR targets were discussed during the meeting with stakeholders having the opportunity to comment and ask questions during the meeting, as well as following the meeting via email or phone call to the Part C Office by December 1, 2019. The ICC agreed that the targets would remain the same for the APR until the board could perform strategic planning, likely to occur over the course of 1 to 2 quarterly meetings during 2020 in order to decide the targets for the next 5 years. The next quarterly ICC meeting was held on 1/9/2020, and included the minutes from the 10/17/2019 meeting which documented the stakeholder engagement re: discussion of the targets and the board's decision to keep the targets the same; these minutes were reviewed and approved by the board on 1/9/2020.

Nevada has met the target for this indicator every year.

### Prepopulated Data

Source	Date	Description	Data
SY 2018-19 Child Count/Educational Environment Data Groups	07/10/2019	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	06/20/2019	Population of infants and toddlers birth to 1	35,781

### FFY 2018 SPP/APR Data

Number of infants and toddlers birth to 1 with IFSPs	Population of infants and toddlers birth to 1	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
387	35,781	1.13%	1.00%	1.08%	Met Target	No Slippage

Provide reasons for slippage, if applicable

XXX

**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, 2018. 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 twenty-five less than the 412 reported for December 1, 2017. This represents 1.08% of the general population of infants in the State.

Nevada's performance is slightly below the national percent of 1.25% and ranked 32nd in percent of population served when compared to the U.S. and outlying areas. Although this indicator does not meet the criteria for slippage, the Part C Staff are continuing 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 has recently begun utilizing the Child Find Self-Assessment (CFSA) developed by OSEP, ECTA and DaSY to strengthen our efforts in reaching all of the eligible children across the state of Nevada.  
Prior FFY Required Actions

**5 - Prior FFY Required Actions**

None

**Response to actions required in FFY 2017 SPP/APR**

**5 - OSEP Response**

The State provided a target for FFY 2019 for this indicator, but OSEP cannot accept that target because the State did not indicate that stakeholders were provided an opportunity to comment on the targets.

**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 (EMAPS)) 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	2005	1.36%			
FFY	2013	2014	2015	2016	2017
Target >=	2.00%	2.00%	2.00%	2.00%	2.00%
Data	2.38%	2.78%	2.99%	2.98%	2.95%

#### Targets

FFY	2018	2019
Target >=	2.00%	2.46%

#### Targets: Description of Stakeholder Input

XXX

Clarification added 4/28/2020 for Stakeholder engagement: Stakeholders were provided an opportunity to comment on targets as follows:

On October 17, 2019 the IDEA Part C Office facilitated the quarterly meeting for the Interagency Coordinating Council (ICC). The ICC is comprised of individuals representing the following: parent representatives who have or have recently had children enrolled in early intervention services, public and private early intervention programs, institutions of higher education, Part B 619, Inter-tribal council, Health Care Policy and Finances/Medicaid, parent advocacy and legal advocacy groups for individuals with disabilities, military early childhood community, and the Governor's Council for Individuals with Disabilities.

Following Open Meeting Law, the agenda topic to review APR targets was scheduled prior to the 10/17/2019 meeting with the agenda provided to all members prior as well. APR targets were discussed during the meeting with stakeholders having the opportunity to comment and ask questions during the meeting, as well as following the meeting via email or phone call to the Part C Office by December 1, 2019. The ICC agreed that the targets would remain the same for the APR until the board could perform strategic planning, likely to occur over the course of 1 to 2 quarterly meetings during 2020 in order to decide the targets for the next 5 years. The next quarterly ICC meeting was held on 1/9/2020, and included the minutes from the 10/17/2019 meeting which documented the stakeholder engagement re: discussion of the targets and the board's decision to keep the targets the same; these minutes were reviewed and approved by the board on 1/9/2020.

Nevada has met the target for this indicator every year.

#### Prepopulated Data

Source	Date	Description	Data
SY 2018-19 Child Count/Educational Environment Data Groups	07/10/2019	Number of infants and toddlers birth to 3 with IFSPs	3,265
Annual State Resident Population Estimates for 6 Race Groups (5 Race Alone Groups and Two or More Races) by Age, Sex, and Hispanic Origin	06/20/2019	Population of infants and toddlers birth to 3	110,055

#### FFY 2018 SPP/APR Data

Number of infants and toddlers birth to 3 with IFSPs	Population of infants and toddlers birth to 3	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
3,265	110,055	2.95%	2.00%	2.97%	Met Target	No Slippage

#### Provide reasons for slippage, if applicable

XXX

#### Compare your results to the national data

The percent of the overall birth through age three general population receiving early intervention services in Nevada, based on the December 1, 2018 Child Count, is below the national average of 3.48% as published in the 2018 Part C Child Count and Settings (Table 4) rankings dated November 1, 2019. Nevada ranked 35th when compared to the U.S. and outlying areas. There are few states with comparable birth to three population (18-19 child count). Nevada's Birth to 3 population was 110,055. States with similar population numbers for birth to three range between 0.85% to 4.94%. Connecticut 4.94%, Kansas 4.75%, Mississippi 1.95%, Arkansas 0.85%, each of these states has a reported birth to 3 population within 3,000 of Nevada's. The US and Outlying territories averaged 3.48%. Nevada's FFY 2018 data are within 0.51% of the national average.

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, 2018. This is a point-in-time count.

Nevada's number of children served, ages birth through 2 years for this reporting period was 3,265 which is 9 less than the 3,274 reported for December 1, 2017. This represents 2.97% of the projected general population of infants in the State.

Cumulative data for this reporting period show a total of 6,509 children, ages birth through two, were served over the course of the reporting period. There was a decline of 314 less children served in early intervention during this FFY.

Although this indicator does not meet the criteria for slippage, the Part C Staff are continuing 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.

The Part C office is overwriting the U.S. Census Annual State Resident Population Estimates with the 2018-19 Child Count and Settings spreadsheet provided on the GRADS site.

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

The targets established for this Indicator through FFY 2018 were presented to State ICC for review and comment during this reporting year. No changes were proposed; therefore, the targets are maintained at the level previously established. Given the state's performance history, it is felt by the stakeholders that the targets are appropriate.

The ICC Child Find Subcommittee meets quarterly and is comprised of stakeholders from the State of Nevada higher education system, NV Department of Education representation, State of Nevada early intervention/early childhood community partner representatives, the Nevada Parents Encouraging Parents (PEP) organization, and other ICC members.

The ICC Child Find Subcommittee has recently begun utilizing the Child Find Self-Assessment (CFSA) developed by OSEP, ECTA and DaSY to strengthen our efforts in reaching all eligible children across the state of Nevada.

### **6 - Prior FFY Required Actions**

None

**Response to actions required in FFY 2017 SPP/APR**

### **6 - OSEP Response**

The State provided a target for FFY 2019 for this indicator, but OSEP cannot accept that target because the State did not indicate that stakeholders were provided an opportunity to comment on the targets.

### **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 2018 SPP/APR, the data for FFY 2017), 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	2005	67.10%			
FFY	2013	2014	2015	2016	2017
Target	100%	100%	100%	100%	100%
Data	99.83%	99.83%	99.38%	99.88%	99.76%

### Targets

FFY	2018	2019
Target	100%	100%

### FFY 2018 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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
2,222	2,486	99.76%	100%	99.44%	Did Not Meet Target	No Slippage

Provide reasons for slippage, if applicable

XXX

### 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.

250

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

State database

Describe the method used to select EIS programs for monitoring.

XXX

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

The Part C Office audits the TRAC data collection system quarterly for this data. The annual monitoring uses the first three quarters of data for all early intervention programs in this indicator. The fourth quarter of data are audited for verification of correction. These data are reflective of all children entering the early intervention programs from referral to the development of the initial IFSP. 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 their programs. The data for this report is based on the final data for the FFY 2018 reporting period. The reporting period for the collection of data are July 1, 2018 through June 30, 2019.

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

These data include 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, 2018 through June 30, 2019 and are therefore representative of the total population served. 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 2018 reporting period.

The data show:

A total of 2,486 children required an initial evaluation/assessment and an initial IFSP meeting convened during the reporting period.

There were 2,472 children who had their initial IFSP meeting conducted within 45 days from the date they were referred to the early intervention system. This number includes the 250 children whose development of the initial IFSP was delayed due to family circumstances. The remaining fourteen (14) children had an initial IFSP meeting convened beyond the 45-day timeline but the delay was verified to be due to program circumstances. Therefore, 2,472 of all 2,486 (99.44%) initial IFSPs were compliant with the 45-day timeline requirement.

Family circumstances documented as reasons for delay in meeting the 45-day timeline for convening the initial IFSP included:

Family cancellation of appointments

Child hospitalized or ill

Parent not available to schedule the appointment within the 45-day timeline (work schedule, vacation, relocating, etc.)

Parent had personal or medical emergency and was not available for appointments

**Monitoring EIS Provider Programs for Compliance with 45-Day Requirements**

A total of twelve (12) EIS provider agencies were active in the State during this reporting period. Monitoring of these programs for this indicator was conducted through a desk audit of data from the TRAC system. The Part C Data Manager generates reports for each provider agency on a quarterly basis and each program is required to complete any needed data clean-up at this time. Due to the IDEA Part C Office annual monitoring schedule, compiled data for the first three (3) quarters of the fiscal year are utilized for annual program monitoring purposes. Each program's performance/compliance status is based on the compiled data for the first three (3) quarters of the fiscal year. A finding of noncompliance was issued to any program whose performance was less than 100%. A second verification of the agency's data accuracy is conducted through a random review of child records for the programs included in the comprehensive monitoring process for the reporting period. For agencies 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 utilized to verify correction of the noncompliance if performance is at 100%.

**Results of FFY 2018 Monitoring**

Twelve (12) EIS programs were monitored through the TRAC data system for compliance with 45-day timeline requirements in FFY 2018. Five (5) EIS programs were found to be at 100% compliance.

Six (6) EIS programs were issued a new finding of noncompliance for this indicator based on data for the first three quarters of the reporting period. All six (6) programs had performance of 95% or above, which is considered substantially compliant. One (1) EIS program had a new finding, however, the program had their contract canceled.

Timely correction of system issues could not be verified for this program as the result of the termination of the program's contract. Subsequent to this program's closure, the Part C Office identified that all children with noncompliance in this indicator had exited early intervention services, therefore, no further verification is required, consistent with OSEP memo 09-02. The five (5) remaining programs have been verified to have timely correction based on performance of 100% in the fourth quarter of the reporting year.

**Clarification added 4/28/2020: Fourth Quarter Data**

While this information is not required to be provided in this year's APR, the NV IDEA Part C Office is separating the following information as a tickler for the development of next year's APR: We issued 5 letters of correction. The 6th program was the program which was mentioned to have been terminated. Correction could not be verified because their service agreement was terminated on 9/8/2019, less than 3 months from the issuance of the finding and prior to the finalization of our 4th quarter data. The five (5) remaining programs have been verified to have timely correction based on performance of 100% in the fourth quarter of the reporting year.

While the State did not meet the target of 100% for FFY 2018, all EIS provider agencies were found to be substantially compliant and all programs have been verified as corrected.

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

One (1) program had 122 of 127 (96%) child records that met the 45-day timeline, however, this program's contract has been terminated and the program is no longer providing early intervention services.

**Correction of Findings of Noncompliance Identified in FFY 2017**

Findings of Noncompliance Identified	Findings of Noncompliance Verified as Corrected Within One Year	Findings of Noncompliance Subsequently Corrected	Findings Not Yet Verified as Corrected
3	2	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 twelve (12) EIS provider agencies were active in the State during this reporting period. Monitoring of these programs for this indicator was conducted through desk audit of data from the TRAC data system. The Part C TRAC Manager generates reports for each provider agency on a quarterly basis and each program is required to complete any needed data clean-up at this time. Due to the IDEA Part C Office annual monitoring schedule, compiled data for the first three (3) quarters of the fiscal year are utilized for annual program monitoring purposes. Each program's performance/compliance status is based on the compiled data for the first three (3) quarters of the fiscal year. 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. Agencies are 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 agencies 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 utilized to verify correction of the noncompliance once performance is at 100%.

Clarification added 4/28/2020:

When noncompliance is found, a finding is issued and that is the data we provide to programs in their June 30th response letter. Sometimes, the process occurs very quickly, and correction can occur by the 4th quarter. Programs have a year to correct noncompliance but 4th quarter data is not required to be reported for the correction until next year. The NV IDEA Part C Office provides this information as a tickler for developing next year's APR.

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

A second verification of the agency's data are conducted through a TRAC desk audit of child records for all programs with a finding in this indicator for the reporting period in order to verify each individual child correction.

Clarification added 4/28/2020: The NV IDEA Part C Office verified that each EIS program with noncompliance is (1) correctly implementing the specific regulatory requirements (achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring and/or desk audit; and (2) has corrected each individual case of noncompliance. Upon issuing a finding, the NV IDEA Part C team conducts follow-up monitoring and collection of data to ensure that the requirements are being met. For indicator 7, we used our database for this process. As mentioned above, 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 to reflect resolution or close out of the identified noncompliance.

**FFY 2017 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

XXX

**Correction of Findings of Noncompliance Identified Prior to FFY 2017**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

**Findings of Noncompliance Verified as Corrected**

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

XXX

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

XXX

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

**Actions taken if noncompliance not corrected**

XXX

**Findings of Noncompliance Verified as Corrected**

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

XXX

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

XXX

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

**Actions taken if noncompliance not corrected**

XXX

**Findings of Noncompliance Verified as Corrected**

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

XXX

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

XXX

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

**Actions taken if noncompliance not corrected**

XXX

**7 - Prior FFY Required Actions**

None

**Response to actions required in FFY 2017 SPP/APR**

**7 - OSEP Response**

OSEP cannot determine if the FFY 2018 data for this indicator are valid and reliable based on the State's description of how it is collecting its monitoring data. Specifically, the State reported that "the annual monitoring uses the first three quarters of data for all early intervention programs in this indicator. The fourth quarter of data are audited for verification of correction." Therefore, it is unclear what data the State is using to report under this indicator.

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, 2018-June 30, 2019). The State did not, as required by the Part C Indicator Measurement Table, describe how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified in FFY 2017 because it did not report that it verified correction of those findings, consistent with the requirements in OSEP Memo 09-02. Specifically, the State did not report that that it verified that each EIS program or provider with noncompliance identified in FFY 2017 has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider.

**7 - Required Actions**

## 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 2018 SPP/APR, the data for FFY 2017), 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	2005	85.71%			
FFY	2013	2014	2015	2016	2017
Target	100%	100%	100%	100%	100%
Data	98.92%	99.49%	94.85%	95.10%	97.98%

**Targets**

FFY	2018	2019
Target	100%	100%

**FFY 2018 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

If no, please explain.

Number of children exiting Part C who have an IFSP with transition steps and services	Number of toddlers with disabilities exiting Part C	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
81	83	97.98%	100%	97.59%	Did Not Meet Target	No Slippage

**Provide reasons for slippage, if applicable**

XXX

**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 2018, 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 are representative of all children across the state for each year of the cycle. The timeframe covered for the FFY 2018 monitoring covered the period of July 1, 2018 and March 31, 2019 and the data included all activity during that period for the children reviewed. 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). There were no late transition plans due to exceptional family circumstances in the selection of records reviewed in FFY 2018. 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.

Four (4) of the six (6) programs monitored for this indicator were found to be compliant for including timely and comprehensive plans in each child's IFSP. Two (2) programs were found to have noncompliance as follows:

One (1) program had a compliance performance of 17 of 18 (94%) records compliant in FFY 2018. The Part C Office verified correction on October 22, 2019.

One (1) program had a compliance performance of 90% (9 of 10). Correction for this program will be reported in FFY 2019.

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

XXX

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

XXX

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

The timeframe covered for the FFY 2018 monitoring covered the period of July 1, 2018 and March 31, 2019. Verification of correction is done using the fourth quarter data.

Data for this indicator are taken from Program monitoring for the first three quarters of the reporting period (July 1, 2018 – March 30, 2019). There were 81 of 83 (98%) applicable child records reviewed to evaluate the timeliness and completeness of transition plans included in the child's IFSP that met the requirements of this indicator. Because the data are gathered through monitoring for this indicator, 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 are reflected for Indicator 8.A.

Clarification added 4/28/2020:

When noncompliance is found, a finding is issued and that is the data we provide to programs in their June 30th response letter. Sometimes, the

process occurs very quickly, and correction can occur by the 4th quarter. Programs have a year to correct noncompliance but 4th quarter data is not required to be reported for the correction until next year. The NV IDEA Part C Office provides this information as a tickler for developing next year's APR.

**Correction of Findings of Noncompliance Identified in FFY 2017**

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

**FFY 2017 Findings of Noncompliance Verified as Corrected**

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

Clarification added 4/28/2020: The NV IDEA Part C Office verified that each EIS program with noncompliance is (1) correctly implementing the specific regulatory requirements (achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring and/or desk audit; and (2) has corrected each individual case of noncompliance. Upon issuing a finding, the NV IDEA Part C team conducts follow-up monitoring and collection of data to ensure that the requirements are being met. For indicator 8A, we used desk audit for this process. As mentioned above, 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 to reflect resolution or close out of the identified noncompliance. One (1) program had a compliance performance of 17 of 18 (94%) records compliant in FFY 2018. The Part C Office verified correction on October 22, 2019. One (1) program had a compliance performance of 90% (9 of 10). Correction for this program will be reported in FFY 2019 as the program is still in their year of correction and have until June 28, 2020 to correct. A new set of records will need to be reviewed and verified onsite or through desk audit.

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

**FFY 2017 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

XXX

**Correction of Findings of Noncompliance Identified Prior to FFY 2017**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

**Findings of Noncompliance Verified as Corrected**

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

XXX

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

XXX

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

**Actions taken if noncompliance not corrected**

XXX

**Findings of Noncompliance Verified as Corrected**

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

XXX

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

XXX

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

**Actions taken if noncompliance not corrected**

XXX

**Findings of Noncompliance Verified as Corrected**

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

XXX

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

XXX

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

**Actions taken if noncompliance not corrected**

XXX

**8A - Prior FFY Required Actions**

None

**Response to actions required in FFY 2017 SPP/APR**

**8A - OSEP Response**

OSEP cannot determine if the FFY 2018 data for this indicator is valid and reliable based on the State's description of how is collecting its monitoring data. Specifically, the State reported that "the annual monitoring uses the first three quarters of data for all early intervention programs in this indicator. The fourth quarter of data are audited for verification of correction." Therefore, it is unclear what data the State is using to report under this indicator.

The State did not demonstrate that the EIS program or provider corrected the findings of noncompliance identified in FFY 2017 because it did not report that it verified correction of those findings, consistent with the requirements in OSEP Memo 09-02. Specifically, the State did not report that that it verified that each EIS program or provider with noncompliance identified in FFY 2017: (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.

**8A - Required Actions**

## 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:

- 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;
- 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
- 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

- 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.
- 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.
- 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 2018 SPP/APR, the data for FFY 2017), 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	2005	100.00%			
FFY	2013	2014	2015	2016	2017
Target	100%	100%	100%	100%	100%
Data	100.00%	100.00%	100.00%	100.00%	100.00%

**Targets**

FFY	2018	2019
Target	100%	100%

**FFY 2018 SPP/APR Data**

Data include notification to both the SEA and LEA

YES

If no, please explain.

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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
1,274	1,274	100.00%	100%	100.00%	Met Target	No Slippage

Provide reasons for slippage, if applicable

XXX

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 2018 (2018-2019) 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. The IDEA Part C Office issued monthly notifications to the pertinent LEA and to the SEA. The process is verified at multiple levels to ensure appropriate notification has been sent for all children. For this reporting period, there were 1,274 children who were potentially eligible for Part B services. Appropriate notification was issued for all (100%) of these children. Children who were referred less than 45 days prior to their third (3rd) birthday are not included in this calculation.

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.

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

NO

If yes, is the policy on file with the Department? (yes/no)

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

State database

Describe the method used to select EIS programs for monitoring.

XXX

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, 2018 to June 30, 2019.

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

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. This data are sent to both the SEA and the LEA on a monthly basis. The State of Nevada verifies monthly the number of Part B potentially eligible children exiting Part C against the notifications sent to LEAs and SEAs for all children.

Provide additional information about this indicator (optional)

**Correction of Findings of Noncompliance Identified in FFY 2017**

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

**FFY 2017 Findings of Noncompliance Verified as Corrected**

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

XXX

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

XXX

**FFY 2017 Findings of Noncompliance Not Yet Verified as Corrected**

Actions taken if noncompliance not corrected

XXX

**Correction of Findings of Noncompliance Identified Prior to FFY 2017**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected

**Findings of Noncompliance Verified as Corrected**

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

XXX

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

XXX

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

Actions taken if noncompliance not corrected

XXX

**Findings of Noncompliance Verified as Corrected**

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

XXX

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

XXX

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

Actions taken if noncompliance not corrected

XXX

**Findings of Noncompliance Verified as Corrected**

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

XXX

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

XXX

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

Actions taken if noncompliance not corrected

XXX

**8B - Prior FFY Required Actions**

None

Response to actions required in FFY 2017 SPP/APR

**8B - OSEP Response**

**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 2018 SPP/APR, the data for FFY 2017), 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	2005	71.40%			
FFY	2013	2014	2015	2016	2017
Target	100%	100%	100%	100%	100%
Data	99.08%	98.87%	98.74%	97.94%	98.51%

**Targets**

FFY	2018	2019
Target	100%	100%

**FFY 2018 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

If no, please explain.

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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
1,197	1,274	98.51%	100%	97.49%	Did Not Meet Target	Slippage

**Provide reasons for slippage, if applicable**

State of Nevada Department of Education implemented new transition process for children exiting Part C and determining eligibility for Part B services. This new process requires additional training for Part C providers, as well as additional meetings for families. Clarification added 4/28/2020: The reason for this slippage included, as stated by the programs, provider and program scheduling which was inadequate to meet timelines. The IDEA Part C Office provided Technical Assistance to the programs to mitigate any such recurring issue.

**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.

0

**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.

45

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

State database

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

XXX

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

Data include all children exiting early intervention services and potentially eligible for Part B between July 1, 2018 to June 30, 2019.

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

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.

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

**Correction of Findings of Noncompliance Identified in FFY 2017**

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 2017 Findings of Noncompliance Verified as Corrected**

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

Data reports for all EI programs for this indicator are generated on a quarterly basis from the Tracking Resources and Children (TRAC) data system. 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***

Clarification added 4/28/2020, delineating between new findings and previous ongoing noncompliance:

FFY 2017 New findings: Five (5) programs were issued new findings of noncompliance. Letters of correction were issued for all five (5) programs that had verified correction.

**FFY 2017 Findings of Noncompliance Not Yet Verified as Corrected**

**Actions taken if noncompliance not corrected**

XXX

**Correction of Findings of Noncompliance Identified Prior to FFY 2017**

Year Findings of Noncompliance Were Identified	Findings of Noncompliance Not Yet Verified as Corrected as of FFY 2017 APR	Findings of Noncompliance Verified as Corrected	Findings Not Yet Verified as Corrected
FFY 2016	1	1	0

**FFY 2016**

**Findings of Noncompliance Verified as Corrected**

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

One program had an ongoing finding of non compliance and it was verified as meeting compliance during their comprehensive monitoring on 6/20/19.

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

Fourteen (14) individual child records did not meet the requirements of this indicator. The Part C Office continued to monitor the program using TRAC and found correction that requirements were met during the comprehensive monitoring. Data reports for all EI programs for this indicator are generated on a quarterly basis from the Tracking Resources and Children (TRAC) data system. 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.

One (1) program had not yet corrected noncompliance from FFY 2016. This one (1) program has subsequently corrected noncompliance and a letter of notification was sent June 20, 2019.

**FFY 2016**

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

**Actions taken if noncompliance not corrected**

XXX

**Findings of Noncompliance Verified as Corrected**

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

XXX

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

XXX

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

**Actions taken if noncompliance not corrected**

XXX

**Findings of Noncompliance Verified as Corrected**

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

XXX

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

XXX

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

**Actions taken if noncompliance not corrected**

XXX

**8C - Prior FFY Required Actions**

None

**Response to actions required in FFY 2017 SPP/APR**

## **8C - OSEP Response**

Although the State's FFY 2018 data represent slippage from the FFY 2017 data and the State did not meet its FFY 2018 target for this indicator, the State did not, as required, provide an explanation of slippage.

The State did not provide the reasons for delay, as required by the measurement table.

In the State's narrative regarding the "FFY 2017 Findings of Noncompliance Verified as Corrected" the State noted that seven programs were issued new findings of noncompliance and one program had ongoing noncompliance (stemming from FFY 2016) for this indicator during this reporting year. Additionally, in the State's narrative regarding the "FFY 2017 Findings of Noncompliance Verified as Corrected" the State noted that one program had an ongoing finding of noncompliance and it was verified as meeting compliance during their comprehensive monitoring on 6/20/19. Further, in the table on the "Correction of Findings of Noncompliance Identified in FFY 2017" the State noted that 5 of 5 findings of noncompliance issued in FFY 2017 were corrected. However, in the State's explanation of systemic and individual correction, the State indicated that seven programs were issued new findings of noncompliance and one program had ongoing noncompliance (stemming from FFY 2016) for this indicator during this reporting year.

Because of these inconsistencies, OSEP is unclear how many findings the State identified in FFY 2017 and how many findings of noncompliance identified in FFY 2017, or carried over from FFY 2016, were verified as corrected. Additionally, OSEP can not determine whether, consistent with OSEP Memo 09-02, the State verified that each EIS program or provider with noncompliance identified in FFY 2017 and FFY 2016: (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.

## **8C - Required Actions**

## 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 ED Facts Metadata and Process System (EMAPS)).

#### 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

Provide an explanation of why it is not applicable below.

#### 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

Provide an explanation below.

#### Prepopulated Data

Source	Date	Description	Data
SY 2018-19 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/11/2019	3.1 Number of resolution sessions	0
SY 2018-19 EMAPS IDEA Part C Dispute Resolution Survey; Section C: Due Process Complaints	11/11/2019	3.1(a) Number resolution sessions resolved through settlement agreements	0

#### Targets: Description of Stakeholder Input

XXX

#### Historical Data

Baseline					
FFY	2013	2014	2015	2016	2017
Target>=					
Data					

#### Targets

FFY	2018	2019
Target>=	0.00%	0.00%

#### FFY 2018 SPP/APR Data

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
0	0		0.00%		N/A	N/A

**Targets**

FFY	2018 (low)	2018 (high)	2019 (low)	2019 (high)
Target	XXX	XXX	XXX	XXX

**FFY 2018 SPP/APR Data**

3.1(a) Number resolutions sessions resolved through settlement agreements	3.1 Number of resolutions sessions	FFY 2017 Data	FFY 2018 Target (low)	FFY 2018 Target (high)	FFY 2018 Data	Status	Slippage
XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

**Provide reasons for slippage, if applicable**

XXX

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

**9 - Prior FFY Required Actions**

None

**Response to actions required in FFY 2017 SPP/APR**

**9 - OSEP Response**

The State reported fewer than ten resolution sessions held in FFY 2018. 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 (EMAPS)).

#### Measurement

Percent =  $((2.1(a)(i) + 2.1(b)(i)) \text{ divided by } 2.1) \text{ times } 100$ .

#### 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

#### Provide an explanation below

#### Prepopulated Data

Source	Date	Description	Data
SY 2018-19 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/11/2019	2.1 Mediations held	0
SY 2018-19 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/11/2019	2.1.a.i Mediations agreements related to due process complaints	0
SY 2018-19 EMAPS IDEA Part C Dispute Resolution Survey; Section B: Mediation Requests	11/11/2019	2.1.b.i Mediations agreements not related to due process complaints	0

#### Targets: Description of Stakeholder Input

XXX

#### Historical Data

Baseline	2005	0.00%			
FFY	2013	2014	2015	2016	2017
Target>=					
Data					

#### Targets

FFY	2018	2019
Target>=	0.00%	0.00%

#### FFY 2018 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 2017 Data	FFY 2018 Target	FFY 2018 Data	Status	Slippage
0	0	0		0.00%		N/A	N/A

#### Targets

<b>FFY</b>	2018 (low)	2018 (high)	2019 (low)	2019 (high)
Target	XXX	XXX	XXX	XXX

**FFY 2018 SPP/APR Data**

<b>2.1.a.i Mediation agreements related to due process complaints</b>	<b>2.1.b.i Mediation agreements not related to due process complaints</b>	<b>2.1 Number of mediations held</b>	<b>FFY 2017 Data</b>	<b>FFY 2018 Target (low)</b>	<b>FFY 2018 Target (high)</b>	<b>FFY 2018 Data</b>	<b>Status</b>	<b>Slippage</b>
XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

**Provide reasons for slippage, if applicable**

XXX

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

**10 - Prior FFY Required Actions**

None

**Response to actions required in FFY 2017 SPP/APR**

**10 - OSEP Response**

The State reported fewer than ten mediations held in FFY 2018. The State is not required to provide targets until any fiscal year in which ten or more mediations were held.

**10 - Required Actions**

## **Certification**

### **Instructions**

Choose the appropriate selection and complete all the certification information fields. Then click the "Submit" button to submit your APR.

### **Certify**

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

### **Select the certifier's role**

Designated Lead Agency Director

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

### **Name:**

Lori Ann Malina-Lovell, DrPH

### **Title:**

Clinical Program Planner I / Part C Coordinator

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### **Submitted on:**

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