# STATE OF NEVADA

# **DEPARTMENT OF HEALTH AND HUMAN SERVICES**

# PART C

# FEDERAL FISCAL YEAR 2012

# **ANNUAL PERFORMANCE REPORT**



Submitted by:

IDEA Part C Office

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# Part C State Annual Performance Report (APR) for FFY 2012

# **Overview of the Annual Performance Report Development:**

Federal Fiscal Year (FFY) 2012 is the same timeframe as State Fiscal Year (SFY) 2013. The period covered in this Annual Performance Report (APR) is July 1, 2012 through June 30, 2013.

Information to support the development of this APR has been compiled from the various components of the State's general supervision system. This includes all phases of the Part C monitoring process, the Tracking Resources and Children (TRAC) child data collection system, collection and analysis of 618 data, and tracking of complaints. The IDEA Part C General Supervision process was modified in 2009 in an attempt to have findings for all early intervention service provider programs issued in the same fiscal year as the data are generated. The data included in the FFY 2012 APR represent activities which took place within the timeframe of the report; however, there has been some overlap in fiscal years for the timeframes that findings were issued based on that data. This is reflected in each Indicator, as applicable.

Processes for program monitoring did not change for this reporting period and remain consistent with those reported since FFY 2009. Each early intervention program participated in self-assessment (SA) in the spring, which included review of child records, analysis of TRAC data, review of complaint findings and analysis of family survey responses. Each program maintained a Quality Assurance team and the Part C Office lead contact for that program provided individual support for the SA process. All programs submitted a report of the results of the SA to the Part C Office, along with supporting data. The Part C Office reviewed all components of the report, completed verification and issued letters of findings to programs, as appropriate. In order to keep the monitoring process within the fiscal year of the report, data were pulled from the first three (3) quarters of the year. Data from TRAC represenst 100% of the children for that time period and data from child record reviews represents 10% to 20% of program enrollment, depending on the size of the program. This selection is representative of the overall early intervention population. Data reflected in this APR are based on the fiscal year when the service data was generated (July 1, 2012 through June 30, 2013).

Throughout the course of FFY 2012, Nevada has presented data and other information relative to the APR and related activities to early intervention programs in all regions. Information regarding performance has also been reported to Nevada's Interagency Coordinating Council (ICC) including ICC Subcommittees, as appropriate. The Part C Lead Agency meets with all early intervention program managers and supervisors on a quarterly basis and relevant data regarding the status of performance relative to the SPP indicators is discussed when appropriate. The IDEA Part C Office personnel held internal meetings to review critical issues and status of performance for each indicator.

The final draft of each indicator of the APR was reviewed with the ICC for feedback and input prior to submission. A form for written feedback was also provided at that time. In addition, the APR was submitted to all early intervention program managers and supervisors for review and comment prior to submission. Subcommittees were formed to work on child outcomes and child find indicators of the SPP and to strategize around implementation of the activities and for data collection. IDEA Part C Office personnel participated in all of the technical assistance calls provided by OSEP related to APR development and submission. Two (2) members of the IDEA Part C Office staff attended the Western Regional Resource Center's (WRRC) technical assistance meeting in October 2013. The State contacts with the Early Childhood Technical Assistance Center (ECTAC) and the WWRC provided extensive technical support to the State in finalizing the APR. The IDEA Part C Office would like to express appreciation to everyone for their input and support for the ongoing development of this APR.

One (1) activity in Indicators 1 and Indicator 9 have been updated in the State Performance Plan (SPP) for FFY 2013 due to changes in administrative structure for the State's early intervention system. The revised SPP is being submitted along with the APR. Nevada's FFY 2012 APR and the revised SPP will be posted on the Nevada Early Intervention Services website not later than by May 1, 2014. Local report cards will be created for each early intervention service provider program and will also be posted to the website no later than June 3, 2014. The website can be located at the State of Nevada website under:

<u>http://health.nv.gov/BEIS.htm</u>. All reports are under the Publications tab. A news release will be created to report to the media on the release of the APR in June 2014 through the Department's Public Information Officer.

# Part C State Annual Performance Report (APR) for FFY 2012

Overview of the Annual Performance Report Development: See Page 1 – Introduction

# Monitoring Priority: Early Intervention Services In Natural Environments

**Indicator 1:** Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner.

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

### 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.

FFY	Measurable and Rigorous Target
FFY 2012	100%

# Actual Target Data for FFY 2012:

# 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 services are provided in a timely manner will be based on:

- A. Initiation of new services within 30 days from the date the parents provided consent for the IFSP service; or
- B. 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 service needed on an infrequent basis (ex. on a quarterly basis).

# Statewide:

Data for this indicator are compiled from program monitoring conducted in FFY 2012 (see below for more details). A total of <u>383</u> child records reviewed had new services added to the IFSP at some juncture (Initial, annual, 6 months or interim reviews) during the period being reviewed. Of these, <u>292</u> were determined to be compliant for having all new early intervention services on the IFSPs initiated in a timely manner.

Percent = (<u>292/383</u>\*100) = <u>76.24</u>%

Additional analysis of the data showed:

- o 259 (67.6%) records had all new services initiated in a timely manner; and
- o 124 (32.3%) records had at least one (1) service initiated outside the required timeline.

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Of the 124 records where at least one (1) service was not initiated in a timely manner:

o 33 (26.6%) were delayed based solely on family circumstances

# • 91 (73.4%) were delayed due to program circumstances

Nevada has chosen to include in the calculation the number of children where the only reason for delay in services was due to family circumstances. The number is included in both the numerator and the denominator. Family circumstances resulting in delay in initiation of services included:

- Family request for a specific day for beginning services beyond the timeline;
- Child or Family Illness resulting in rescheduling of appointments;
- Family cancellation or rescheduling of appointments;
- Family failed to follow-through with scheduled appointments (especially relative to Audiology evaluations); and
- Family no-showed for appointment.

For the 91 records found to be noncompliant because at least one (1) service on the IFSP was delayed due to program issues, the primary circumstance that resulted in program delays was lack of availability of personnel to assign to initiate the services in a timely manner.

# Process for Selection of Programs for Monitoring:

The IDEA Part C Office requires all early intervention service provider programs to participate in the monitoring process on an annual basis. Programs identified as having noncompliance in an indicator are issued one (1) finding for that indicator.

A total of 12 early intervention service provider programs statewide were providing comprehensive early intervention services during this reporting period. Data were gathered through child records and included all IFSP junctures (initial, annual and all reviews, including 6-month reviews and any other reviews requested by the family or the program). The timeframe covered in the review of child records was July 1, 2012 through March 31, 2013. Records to be reviewed were selected randomly and were required, at a minimum, to represent either 10% or 20% of enrollment, depending on the size of the program. It was felt this number of records was sufficient to accurately evaluate the program's performance relative to all children served by the program.

During this reporting period, two (2) programs also had focus monitoring visits.

# Result of FFY 2012 Program Monitoring

A total of six (6) new findings were issued as a result of program monitoring in FFY 2012. The results were as follows:

- Six (6) programs were found to be at 100% compliance for the reporting period no findings were issued.
- Three (3) programs were issued new findings of noncompliance in FFY 2012 based on monitoring activities conducted in FFY 2011. All three (3) programs have been verified to have timely correction of the noncompliance by the end of September 2013.
- One (1) program was issued two (2) findings of noncompliance based on focused monitoring activities; timely correction has been verified.
- One (1) program was issued a new finding of noncompliance.
- One (1) program was found to have on-going noncompliance.

Of the six (6) new findings issued as a result of program monitoring in FFY 2012, five (5) have already been verified to have been corrected in a timely manner. The verification process will be reflected in the FFY 2013 Annual Performance Report (APR).

# Complaints:

Eleven (11) individual child complaints were filed with the IDEA Part C Office relative to Indicator 1 during in FFY 2012. Three (3) families reached agreement with the program prior to the 60-day timeline for investigation and rescinded their complaint. Findings of noncompliance were issued as a

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result of investigation of the eight (8) remaining complaints. One (1) finding was also issued in FFY 2012 as a result of investigation of one (1) complaint filed in June, 2011 (FFY 2011). All complaints were investigated and reports issued within the required timelines. Findings of noncompliance based on complaint investigations were issued to three (3) early intervention service provider programs in FFY 2012 as follows:

- One (1) program was issued six (6) findings of noncompliance.
- One (1) program was issued two (2) findings of noncompliance.
- One (1) program was issued one (1) finding of noncompliance.

In total, fifteen (15) new findings of noncompliance were issued in FFY 2012 relative to timely initiation of services. One (1) program was found to have on-going noncompliance. All programs with newly identified noncompliance were notified by the IDEA Part C Office that noncompliance must be corrected as soon as possible and no later than one (1) year from the notification of the noncompliance. The programs were also required to develop a Corrective Action Plan (CAP) including activities reasonably calculated to ensure timely correction of the noncompliance.

General Supervision	# of Programs	# of New Findings	# New Findings with
Activity	Involved	FFY 2012	Verified Correction as of
	FFY 2012		Submission of the
			FFY2012 APR
Monitoring	12	6	5
Complaint Investigation	3	9	3
	Totals	15	8

# Table 1.A: New Findings Issued Relative to Indicator 1 in FFY2012

\*The correction of all findings issued in FFY 2012 will be reported in the FFY 2013 APR.

Underlying issues identified through monitoring and complaint investigations as the primary reasons for noncompliance in timely initiation of services were:

- Insufficient personnel to provide needed services due to lack of funding, especially in the State operated programs;
- The established hourly rate is not competitive for the area;
- Challenges in obtaining approval to hire through the system; therefore, once approval was obtained, applicants had often accepted positions elsewhere and were no longer available;
- Insufficient documentation of the reason (family or program circumstances) the service was delayed; therefore, responsibility defaulted to the program. Programs with verified correction in this area were found to have successfully addressed this issue; and
- Personnel cancellations due to Illness or family emergency.

# OSEP FFY 2011Response Table, July 2013:

INDICATOR 1: The State was identified as being in need of assistance for two consecutive years based on the State's FFY 2009 and FFY 2010 APRs, was advised of available technical assistance, and was required to report, with the FFY 2011 APR, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance. The State reported on the technical assistance sources from which the State concern and reported on the actions the State took as a result of that technical assistance.

The State reported that the remaining seven findings of noncompliance identified in FFY 2008, and the remaining finding of noncompliance identified in FFY 2006, were not corrected. The State reported on the actions it took to address the uncorrected noncompliance.

# REQUIRED ACTIONS

Because the State reported less than 100% compliance for FFY 2011, the State must report on the status of correction of noncompliance identified in FFY 2011 for this indicator. In addition, the State must demonstrate, in the FFY 2012 APR that the remaining seven uncorrected noncompliance findings identified in FFY 2008 were corrected. When reporting on the correction of noncompliance, the State must report, in its FFY 2012 APR, that it has verified that each early intervention service (EIS) program with findings of noncompliance identified in FFY 2011 and each EIS program or provider with remaining findings of noncompliance identified in FFY 2008: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of

updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02.<sup>4</sup> In the FFY 2012 APR, the State must describe the specific actions that were taken to verify the correction.

# Correction of Noncompliance:

The following summary table has been updated to reflect data on correction of noncompliance for this indicator between FFY 2008 and FFY 2012.

FFY	Number of New Findings of Noncompliance Related to Indicator 1	Number of Findings for which Correction was Verified within One Year	Number of Findings for which Correction was Subsequently Verified (Date)	Number of Findings of Noncompliance Remaining	
FFY 2005	1	0	1 (January 2011)	0	
* FFY 2006	2	1	1 (Revised - See 2006 status)	0	
FFY 2007	6	5	1 (January 2010)	0	
*FFY 2008 (Amended)	15	6	1 (December 2010)	8	
FFY 2009	3	2	1 October 2011	0	
FFY 2010	2	2	0	0	
FFY 2011	5	2	2	1	
FFY 2012	15	Correction will be reported in the FFY 2013 APR			

Table 1.D: Identification and Correction of Noncomp	liance for EEV 2000 EEV 2012

# Timely Correction of Noncompliance Identified in FFY 2011:

In total, five (5) new findings of noncompliance were issued in FFY 2011 relative to timely initiation of services as a result of complaint investigations (four (4) as a result of a systems complaint and one (1) as a result of an individual child complaint). No new findings were issued as a result of program monitoring in FFY 2011; however, one (1) program was found to have on-going noncompliance.

Status of Correction of Findings Based on Complaint Investigations:

# A. Systems Complaint:

Four (4) programs were each issued a new finding relative to this indicator as a result of investigation of a complaint filed by the Nevada Disability Advocacy and Law Center (NDALC) in October 2011. Findings were issued in February 2012.

# Individual Child Correction for the System Complaint:

It was verified through child record reviews and ongoing reporting that services were initiated for all children represented in the complaint, though late, unless the child was no longer in the jurisdiction of the early intervention program. Therefore, individual child correction has been verified for all children.

# Systemic Correction for the System Complaint:

The IDEA Part C Office was able to verify through the review of new data that four (4) early intervention programs were implementing requirements for this indicator for all children enrolled. One (1) program was determined to have on-going noncompliance. Verification of corrections are as follows:

• Two (2) programs demonstrated timely correction; one (1) program was verified to have correction based on new data reviewed through the monitoring process in June 2012 and one

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(1) program was verified to have correction based on new data gathered through an on-site verification visit in December 2012.

- One (1) program was verified to have subsequent correction based on new data gathered through the FFY 2012 monitoring process. The program was notified of full correction in September 2013.
- One (1) program has not been able to demonstrate it is meeting requirements for all children; therefore, noncompliance is ongoing.

B. Status of Correction of Findings Based on Individual Child Complaint:

One (1) program was issued one (1) new finding for this indicator based on the investigation of an individual child complaint. Individual child correction was verified as services were initiated, though late. The program was not able to demonstrate timely correction but subsequent correction was verified based on new data gathered through the FFY 2012 monitoring process. The program was notified of full correction in September 2013.

General Supervision	# of	# of New	# Findings	# Findings	# Findings with
Activity	Programs	Findings	with Timely	with	Ongoing
	Involved	Issued in	Correction	Subsequent	Noncompliance
		FFY2011		Correction	
Monitoring	9	0	NA	NA	NA
Complaint Investigation	4	5	2	2	1
	Totals	5	2	2	1

### Table 1.B: Correction of Noncompliance Identified in FFY 2011

# Timely Correction of Findings of Noncompliance Identified in FFY 2008

Nevada reported a total of 14 findings of noncompliance issued for this indicator in FFY 2008. This is being amended to 15 as of the issuance of this APR (see section below on correction of noncompliance for FFY 2006). Seven (7) findings have been verified as corrected as reported in the previous APR. As of submission of this APR, the State has not been able to verify correction of noncompliance relative to the following findings:

# FFY 2008 Findings Issued as a Result of Program Monitoring:

One (1) finding of noncompliance was issued based program monitoring.

# FFY 2008 Findings From Complaints:

Seven (7) findings of noncompliance relative to this indicator are as follows:

- One (1) administrative complaint filed by Nevada Disability Advocacy Law Center (NDALC); and
- Six (6) individual child complaints within one (1) early intervention service provider program.

# Individual Child Correction:

The IDEA Part C Office has verified services for all individual children involved in both monitoring and complaints were initiated, though late. Therefore, correction of the noncompliance for individual children has been achieved.

Correctly Implementing 34 CFR §§303.340(c), 303.342(e), and 303.344(f)(1):

As of the submission of this APR, the remaining noncompliance from FFY 2008 (for all findings) is specific to one (1) early intervention program. The program has demonstrated progress but has not been able to demonstrate it is fully implementing this requirement for all children enrolled. It has been verified the issues impacting the program's ability to correct the noncompliance were linked to broader systemic issues at the state level.

# Underlying Causes of Noncompliance:

The primary issues underlying the on-going noncompliance for this program continues to be identified as:

- Insufficient personnel capacity to serve the number of children being referred and the number determined eligible for early intervention services due to the State fiscal crisis.
- Specific personnel shortages and budget containment for Speech Language Pathologists, Occupational Therapists, Physical Therapists, Instructional Aides, and Feeding and Vision services.
- Lack of competitive salaries for professional therapists.
- Decrease in workforce capacity for existing personnel due to the state mandated furloughs for all employees.

Specific Actions Taken by the Programs to Address the Noncompliance:

- Maintained provider agreements with private agencies providing therapy services to expand availability of resources.
- Actively working on provider agreements with additional community providers for provision of needed services.
- Program personnel have been sent to specialized training for provision of Vision services as this was an area of need.
- Contracted services out to the other early intervention providers through a fee for services.
- A monthly tracking system has been implemented to make staff aware of timelines approaching for needed services.
- Additional hours have been offered to contract personnel to assist with eliminating children on the wait list for services.
- Approval has been obtained to hire additional developmental specialists to provide special instruction services.
- A 101 training course is provided to all new staff within the first week of hire. This is provided in conjunction with the mentor program allowing staff a more intense level of training. Therefore, new staff can carry a caseload sooner.

# Specific Actions Taken by the State to Address the Noncompliance:

In the 2013 session, the Legislature approved a total of 32 new positions to be assigned to the State program in the southern region. The program received an overall budget increase of approximately 88% for SFY 2014 over the total budget for SFY 2013.

# Enforcement:

- 1. A focused monitoring was conducted by the IDEA Part C Office in August 2013. New data gathered during this process showed the program has made progress since their SFY 2012 self-assessment increasing the level of compliance from 35 to 66 percent.
- 2. The program is required to continue to review, update and implement the activities from the CAP and verify the correction of any individual child records found to be noncompliant during the ongoing review process. A list of children with identified noncompliance must be maintained by the program and submitted to the IDEA Part C Office until it can be verified all services have been initiated for each individual child.
- 3. The program is required to submit quarterly progress reports including the status of correction for individual children (including supporting documentation), and updates on the status of activities specified in the CAP.
- 4. Desk audits are conducted by the IDEA Part C Office on a monthly basis through the Tracking Resources and Children (TRAC) data system reports on the number of children enrolled in the program who are past the timeline for service initiation specified in the IFSP in order to monitor the program's progress.
- 5. On-site verification continues to be conducted by the IDEA Part C Office, as needed, to ensure progress.

# Timely Correction of Findings of Noncompliance Identified in FFY 2006

Nevada received a technical assistance visit from the OSEP Contact in September 2013 to support the State in identifying and implementing strategies to address long-term noncompliance for this indicator. During this visit, clarification was provided that the State was not required to implement the two-pronged approach to correction of noncompliance prior to the issuance of the 09-02 memo by OSEP on October 17, 2008. Nevada has reported on-going noncompliance for one (1) finding for one (1) program from FFY 2006 in previous APRs. Since it was verified that child correction had occurred for the children involved in the 2006 finding, Nevada is reporting the finding for FFY 2006 as corrected as of the submission of this APR. A review of historical monitoring records shows a letter was issued to the program in November 2008 with data identifying noncompliance in this indicator. FFY 2008 data is being amended to include this as a new finding for the program as of that date.

# Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 2012:

Nevada continues to demonstrate steady progress in performance relative to this indicator as reflected in the table below.

Federal Fiscal Year	Total Number of Children	Number of Children Compliant for Timely	% Compliant	Improvement
(FFY) FFY 2012	Represented in Data	Initiation of IFSP Services 292	760/	4%
FFY 2012	383 324	292	76% 72%	4% 15%
FFY 2010	343	195	57%	

# Table 1.C: Longitudinal Performance Relative to Indicator 1

Improvement Activities Reviewed to Ensure Continued Progress Toward Meeting Compliance for Timely Services:

- (SPP Activity 8) The Lead Agency will develop and implement a plan for the reorganization of Nevada's system of early intervention services within the Lead Agency. A single line of authority for all components of the early intervention system will be created through the Aging and Disability Services Division (ADSD). This will include integration of the direct service component into ADSD, rather than having system oversight and service delivery components operate through separate Divisions. Director's Office, Nevada Department of Health and Human Services (DHHS), July 1, 2013 – June 30, 2014. This activity is being modified.
  - In June 2013, the Nevada Legislature, through a budgetary decision, relocated the IDEA Part C Office to the Director's Office in DHHS. OSEP has indicated that, for accountability purposes relative to maintaining a comprehensive system of early intervention services, general supervision, and reporting, the IDEA Part C Office is recognized as the lead agency in Nevada.
- (SPP Activity 4) Program managers will monitor child data on a quarterly basis to ensure services are being implemented in a timely manner for all children with an initial IFSP and for any subsequent services added to an IFSP. Program Managers and IDEA Part C staff, 2006-2012. This activity is ongoing.
  - The IDEA Part C Office continues to compile and submit a report to each program on a monthly basis reflecting the number of children per program waiting beyond required timelines for any service on their IFSP. This information is also presented at meetings of the Department Heads, to the State Interagency Coordinating Council (ICC) and the State Legislative Interim Finance Committee (IFC). At this time, the basic design of the data report is limited in its ability to reflect the reasons why services are delayed and

further manual analysis is required. The IDEA Part C Office is exploring ways to refine the reports to have them be more informative in this area.

Impact:

- There is increased awareness, both in the public and the government arenas, regarding the issues relative to this indicator. More stakeholders are tracking the State's progress for this indicator.
- 3. (SPP Activity 5) Create partnerships with community providers to provide services to children when Nevada Early Intervention Services (NEIS) does not have a provider available to implement the services on the IFSP. Regional Program Managers, 2005-2012. **This activity is ongoing.** 
  - Early intervention service provider programs continue to implement procedures for utilizing independent discipline specific resources through community-based providers, when services would otherwise be delayed due to the lack of availability on the caseload of an internal provider. The majority of early intervention service provider agencies operate some version of this option for families, most often when third party billing for services is an option. Implementation of these procedures is based on parent agreement when third-party payment is an option.
- (SPP Activity 6) Develop budget requests for future legislative sessions which document the need for additional personnel if data indicates regions cannot maintain timely service delivery. The Nevada State Health Division (NSHD) in conjunction with the ADSD, IDEA Part C Office, 2008-2014. This activity is ongoing.
  - The IDEA Part C Office assisted the NSHD/ADSD, as requested, in compiling data to support budget preparation for the 2013 Legislative session. Feedback is also provided to the Office of the Director of Health and Human Services regarding budget and services provision via data reports.

# Impact:

The Nevada legislature increased the total budget for early intervention services in the State for the next biennium by 14.9 percent in year one (1) and 11.77 percent in year two (2). The legislature also relocated the IDEA Part C Office to the Director's Office in the Department of Health and Human Services (DHHS) to ensure autonomy in the implementation of the general supervision and oversight of the early intervention service system.

- 5. (SPP Activity 7) Conduct on-site focused monitoring activities with early intervention programs that have on-going noncompliance, demonstrate a low level of performance, and/or when significant slippage is identified to determine the root causes of poor performance and failure to achieve timely correction of noncompliance. The IDEA Part C Office, 2010-2012. This activity is ongoing.
  - This activity was implemented on a limited basis in FFY 2012 due to limited personnel resources within the IDEA Part C Office. Verification visits were conducted with programs to track progress on correction of noncompliance and additional desk audits were conducted to further analyze data from the TRAC Data System.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2013 [If applicable]

SPP Activity # 8 for this indicator has been modified as follows:

Effective July 1, 2013, the IDEA Part C Office was transferred from the Aging and Disabilities Services Division (ADSD) to the Director's Office of the Nevada Department of Health and Human Services (DHHS). In accordance with guidance provided by the U.S. Office of Special Education

Programs (OSEP) in September 2013, DHHS has established a single line of authority for all components of the early intervention system through the Director's Office for DHHS, IDEA Part C Office. The IDEA Part C Office, as lead agency for the statewide comprehensive system of early intervention services, through the Director's Office, will maintain oversight and general supervision of the system of services and fulfill all requirements for federal and state reporting relative to the early intervention system. Responsible Party: Director's Office, DHHS/IDEA Part C Office, July 1, 2013 – June 30, 2015.

Nevada is continuing all other ongoing activities relative to this indicator as written; no changes are being made for proposed targets, improvement activities, timelines or resources for the remaining activities for this indicator at this time.

# Part C State Annual Performance Report (APR) for FFY 2012

Overview of the Annual Performance Report Development: See Page 1

# Monitoring Priority: Early Intervention Services In Natural Environments

**Indicator 2:** Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings.

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

**Measurement:** 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)

FFY	Measurable and Rigorous Target
2012	96% of children received services in the home or community-based settings

# Actual Target Data for 2012:

The following data are provided using the Tracking Resources and Children (TRAC) child data collection system as collected for **618 data on December 1, 2012.** 

Statewide: **2,553** children had an Individual Family Service Plan (IFSP) on December 1, 2012, of which 2,404 (94.16%) received their primary services in the home or community based settings.

Nevada's performance in FFY 2012 of **94.16%** did not meet the target of 96% established in the State Performance Plan (SPP) for the provision of services in natural environments.

# Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that Occurred for FFY 2012:

As reflected in Table 2.A., prior to FFY 2011, Nevada has traditionally maintained a lengthy history of providing a high percentage of early intervention services in settings identified as natural environments of the child and family. Nevada's performance of 94% in FFY 2012 represents a 1% progress from the 93% reported for FFY 2011. The underlying cause for the slippage, based on data gathered through program monitoring and complaint investigations was:

- Programs providing early intervention services in settings not consistent with IDEA criteria for natural environments;
- Failure to provide appropriate justifications when provision of services occurred in settings other than those identified as natural environments for the individual child and family; and
- In order to expedite initiation of services when no provider was available within the program, private providers were utilized (plans to transition the child to a natural environment were not indicated).

In the past, Nevada's early intervention programs were issued findings based on the settings data associated with the annual December 1 child count. In FFY 2012, the IDEA Part C Office determined the data, as reflected in the 618 Settings Data Report, are not sufficient for determination of compliance with requirements for individual children. The reasons for concluding this data is not sufficient for determination of compliance are as follows:

- The data elements reflected are for federal reporting purposes and is based solely on settings.
- The required criteria for the report is based on determining where the "majority" of a child's service is provided; this does not meet the standard for compliance for the individual child without further analysis.
- There is no editing of the data as reported to account for justifications, evaluations or services that require a specific setting and/or equipment.

In FFY 2013, determinations of program compliance status will be based on data gathered through child record reviews to ensure all of the issues identified above are taken in to account. In FFY 2012, a total of twelve (12) programs were monitored under this indicator utilizing data reported in the December 1, 2012 child count. When programs do not meet the state target, the IDEA Part C Office utilizes this as a trigger to verify individual decisions made about service settings outside of the child and family's natural environment. The State's criteria for issuing a finding to early intervention service providers for this indicator is based on the lack of appropriate justification for providing services in settings that do not meet IDEA requirements for natural environments. Program performance was reflected in monitoring response letters issued by the IDEA Part C Office. The status of individual programs performance as reflected in the December 1 child count was as follows:

- Eight (8) programs met or exceeded the state target of 96%;
- Four (4) programs did not meet the State target. Of these programs:
  - two (2) had on-going noncompliance [one (1) from FFY 2010; one (1) from FFY 2009]; and
  - two (2) provided 95% of services in settings considered natural environments for infants and toddlers and their families.

# FFY 2012 Findings:

In FFY 2012, no new findings were issued for this indicator. However, follow-up verification is scheduled for FFY 2013.

Program	FFY 2008	FFY 2009	FFY 2010	FFY 2011	FFY 2012
Statewide	99.7%	99.5%	98%	93%	94%

This data compares statewide performance percentages from FFY 2008 to FFY 2012 in providing the majority of services in natural environments.

# Correction of Noncompliance Identified in FFY 2011

Ten (10) findings of noncompliance were issued to four (4) programs in FFY 2011 based on complaint investigations and program monitoring.

# Individual Child Correction:

The IDEA Part C Office verified that children for whom noncompliance was identified were transitioned to settings appropriate to the child and family or the children were no longer under the jurisdiction of the program involved.

# Correctly implementing 34 CFR §§303.344(d)(1)(B):

New data was gathered and correction verified for two (2) programs as follows:

Program #1: Timely correction of three (3) findings and subsequent correction of three (3) findings per on-site verification – 2/15/2013

Program #2: Subsequent correction of two (2) findings per the annual monitoring process – 9/27/13

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- Program #3: Nevada has not been able to verify correction of one (1) finding of noncompliance as of the submission of this report; however, the program has made progress.
- Program #4: Nevada has not been able to verify correction of one (1) finding of noncompliance as of the submission of this report; however, the program has made progress.

The underlying issues determined to have contributed to the persistent noncompliance in this indicator are:

- A directive from the Nevada State Health Division (NSHD) to state programs to provide clinic based services as a cost-containment strategy;
- Turn-over in program personnel;
- Ongoing need for buy-in by some individual personnel within the program; and
- Use of individual/agency contractors who did not provide services in the natural environment in order to expedite services and prevent children from waiting for service initiation.

Actions taken to ensure correction of the non-compliance:

- Reversal of the NSHD directive to programs; programs were required to follow IDEA requirements;
- Conducted focused monitoring of provider agencies;
- Training for program therapy personnel by the IDEA Part C Office; and
- On-site verification visits to monitor progress.

# Correction of Noncompliance Identified in FFY 2010

One (1) program was originally issued a finding relative to this indicator in FFY 2010 based on a performance level of 95% for services provided to Part C eligible children and families. This program traditionally maintained a high level of performance in this indicator. The program was identified as having on-going noncompliance by the IDEA Part C Office as a result of going through another selfassessment process in the Spring of 2012. The data for the program's performance at this time was at 91%, which showed the program had a 4% slippage from the previous year. This triggered the IDEA Part C Office to determine if appropriate justifications were provided for services not provided in settings that would meet IDEA requirements. Again, appropriate justifications for provisions of services were not provided. In FFY 2012, the program went through another self-assessment process where the data for the December 1 child count was utilized to determine program performance in their settings data. Based on this data, the program demonstrated a performance level of 90%, which is a 1% slippage from the previous year. In previous years, the December 1 child count was used to determine program compliance for this indicator. During this reporting fiscal year (FFY 2012), the IDEA Part C Office determined the settings data report is not sufficient for determination of compliance with requirements for individual children. In the future, determinations of program compliance will be based on data gathered through child record reviews. In August 2013, the IDEA Part C Office conducted a focused monitoring to determine if appropriate justifications were provided for services not provided in settings that would meet IDEA requirements. There were 27 records reviewed during this process, 23 records were relevant to this indicator. Of the 23 records, 20 (87%) had all services in the natural environment. Again, appropriate justifications for provision of services were not provided.

# Correction of Noncompliance Identified in FFY 2009

One (1) program was originally issued a finding relative to this indicator in FFY 2009 based on a performance level of 63% for services provided to Part C eligible children and families. Appropriate justifications were not provided when services were provided in settings that do not meet IDEA requirements for natural environments. The program went through the self-assessment process again in the Spring of 2011. At that time, the data showed the program had made progress (performance was at 70%) but had not achieved full correction. During FFY 2011, the program's performance was tracked on a monthly basis for a six (6) month period. During this timeframe, the performance ranged from 52% to 77%. In FFY 2012, the program went through another self-assessment process where the data for the December 1 child count was utilized to determine program performance in their

settings data. Based on this data, the program demonstrated a performance level of 68%. The IDEA Part C Office completed a desk audit of all active child records. Based on this review, the program has demonstrated significant progress. Of the 99 relevant records, 90 (91%) records indicated all services were provided in settings meeting IDEA requirements for natural environments.

# Individual Child Correction:

Data is maintained on children identified through the monitoring process as not having services provided in their natural environment and not having appropriate justification for the current setting for services. Programs were required to reconvene IFSP teams to review the settings where services were being delivered and, if there was no appropriate justification for providing service in alternative settings, they were required to transition the child's services into a setting identified as appropriate to the child and family unless the child was no longer enrolled in the program. Corrections for individual children are verified by the IDEA Part C Office.

# Correctly implementing 34 CFR §§303.344(d), 303.13(a)(8), 303.26, and 303.126:

As of the submission of this Annual Performance Report (APR), the programs with noncompliance in this indicator from FFY 2010 and FFY 2009 have not been able to demonstrate they are fully implementing this requirement for all children enrolled.

# Actions Taken by the IDEA Part C Office to Address Correction of the Noncompliance Identified in Two Programs in FFY 2009 and FFY 2010:

- Training was provided for one (1) program's agency personnel. All program personnel were required to participate in monthly trainings provided by the IDEA Part C Office that covered the full scope of IDEA requirements related to the provision of early intervention services. The same training was presented twice each month to better accommodate the scheduling of services with families and children.
- Both programs were required to review and update the activities in their Corrective Action Plan (CAP) in conjunction with their IDEA Part C Office contact and establish quarterly performance targets for FFY 2011 and FFY 2012.
- Both programs were required to submit quarterly reports on progress toward reaching targets included in the CAP.
- Both programs were required to ensure all service locations on the IFSP and in the TRAC data system are accurately reflecting where the service(s) are being providing.
- One (1) program will be required to fax each justification page to the IDEA Part C Office after a
  new service has been added to the IFSP if services have been determined to be provided in a
  setting not considered a natural environment.

Improvement activities particularly relevant to this reporting period include the following:

- (SPP Activity 5) Development of Community Partnerships. This activity is ongoing. The activities below reflect some of the partnerships created to provide opportunities for children to receive early intervention in settings, other than the home, that meet the IDEA definition of natural environments.
  - Early intervention programs have maintained their developmental groups throughout the Southern region. These groups are located at various locations in the community. This allows families to participate in a group within their local community, promotes developing relationships with other families, and to model interventions through play and promote social skills. New developmental groups are being developed through Memorandums of Understanding (MOU) with other appropriate community programs.
  - Some early intervention service provider programs throughout the state operate child care centers where opportunities for receiving interventions within the centers are offered. This allows the children enrolled in early intervention services an opportunity to play with typically developing peers. Qualified early intervention personnel assist during

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the playgroup sessions to demonstrate embedding intervention strategies in the play environment.

- The Northwest region continued the Explore and Learn Playgroups with Family to Family Connection, local community agencies including gymnastic programs, the Wee Read times at the library, and a local apartment complex. The Northeast and Northwest regions have a partnership with Early Head Start and provide services within that agency. The Northeast region maintains a strong collaborative relationship with Early Head Start and is collaborating with a new Migrant Head Start program as well.
- The Northwest region has contracts with child care centers and home child care programs as early intervention partners and serves children within those programs as part of the natural environment.
  - New Playgroups have been developed within partnerships. There are a total of 17 playgroups available to families.
  - The collaboration with Early Head Start through an expansion grant application to co-locate with early intervention continues with playgroups.
  - The Early Intervention Partners Project continues to offer services supporting up to 25 children in child care centers in Reno, Carson, and Rural areas.
- American Indian Population— the Northwest program is building a collaborative relationship with Indian Health Services with the local Native American tribes in order to serve more children.

# Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2013.

Nevada is continuing all ongoing activities as written; no changes are being made for proposed targets, improvement activities, timelines or resources for this indicator at this time.

# Part C State Annual Performance Report (APR) for FFY 2012

Overview of the Annual Performance Report Development: See Page 1 – Introduction

# Monitoring Priority: Early Intervention Services in Natural Environment

Indicator 3: 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)

# 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 or exited early intervention below age expectations in each Outcome, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.

#### **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 (c) plus # of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in progress category (c) 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.

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FFY	Measurable and Rigorous Targets	
	Outcome A:	
2012	Summary Statement 1: 68.6%	
	Summary Statement 2: 40.5%	
	Outcome B:	
	Summary Statement 1: 70.0%	
	Summary Statement 2: 37.4%	
	Outcome C:	
	Summary Statement 1: 71.4%	
	Summary Statement 2: 41.3%	

# Actual Target Data for FFY 2012

Summary Statement	Actual FFY 2011 (% of Children)	Actual FFY 2012 (% of Children)	Targets FFY 2012 (% of Children)
<ol> <li>Outcome A: Positive social-emotional skills (include</li> <li>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 exited the program. <i>Formula:</i> c+d/a+b+c+d</li> </ol>	ling social relat 67.5%	ionships) 65.9%	68.6%
<ol> <li>The percent of children who were functioning within age expectations in Outcome A by the time they exited the program. Formula: d+e/a+b+c+d+e</li> </ol>	41.2%	43.1%	40.5%
Outcome B: Acquisition and use of knowledge and communication and early literacy)	skills (includin	g early languag	je/
<b>1.</b> 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 exited the program. <i>Formula:</i> $c+d/a+b+c+d$	71.8%	71.7%	70.0%
<ol> <li>The percent of children who were functioning within age expectations in Outcome B by the time they exited the program. Formula: d+e/a+b+c+d+e</li> </ol>	37.8%	37.4%	37.4%
Outcome C: Use of appropriate behaviors to meet t	their needs		
<ol> <li>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 exited the program. <i>Formula:</i> c+d/a+b+c+d</li> </ol>	72.9%	70.9%	71.4%
<ol> <li>The percent of children who were functioning within age expectations in Outcome C by the time they exited the program. Formula: d+e/a+b+c+d+e</li> </ol>	44.4%	45.9%	41.3%

# Progress Data for Part C Children FFY 2011

A. Positive social-emotional skills (including social relationships):	Number of children	% of children
a. Percent of children who did not improve functioning	15	1.1%
<ul> <li>b. Percent of children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers</li> </ul>	410	29.0%
c. Percent of children who improved functioning to a level nearer to same-aged peers but did not reach it	380	26.9%
d. Percent of children who improved functioning to reach a level comparable to same-aged peers	440	31.1%
e. Percent of children who maintained functioning at a level comparable to same-aged peers	169	12.0%
Total	1414	100%
B. Acquisition and use of knowledge and skills (including early language/communication):	Number of children	% of children
a. Percent of children who did not improve functioning	13	0.9%
<ul> <li>b. Percent of children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers</li> </ul>	360	25.5%
c. Percent of children who improved functioning to a level nearer to same-aged peers but did not reach it	512	36.2%
<ul> <li>d. Percent of children who improved functioning to reach a level comparable to same-aged peers</li> </ul>	432	30.6%
e. Percent of children who maintained functioning at a level comparable to same-aged peers	97	6.9%
Total	1414	100%
C. Use of appropriate behaviors to meet their needs:	Number of children	% of children
a. Percent of children who did not improve functioning	13	0.9%
<ul> <li>b. Percent of children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers</li> </ul>	362	25.6%
c. Percent of children who improved functioning to a level nearer to same-aged peers but did not reach it	390	27.6%
<ul> <li>d. Percent of children who improved functioning to reach a level comparable to same-aged peers</li> </ul>	523	37.0%
e. Percent of children who maintained functioning at a level comparable to same-aged peers	126	8.9%
Total	1414	100%

# Discussion of Improvement Activities <u>and</u> Explanation of Slippage, if the State did not meet its target that occurred for FFY 2012:

The data collected for infants and toddlers who received six (6) months or longer of early intervention services for FFY 2012-2013 were collected using the Child Outcome Summary Form (COSF) 7-point rating scale. In FFY 2012, one (1) new agency entered into agreement with the State to provide early intervention services. This brings the total number of early intervention programs in Nevada to (12)

twelve. Progress data was reported by all twelve (12) programs for FFY 2012. Nevada is reporting complete data for 1,414 of 1,455 (97%) of infants and toddlers who exited services with a program length of six (6) months or longer. In FFY 2011, Nevada reported 91% of progress data for infants and toddlers who received services for six (6) months or longer which represents a 6% increase compared to FFY 2012. Analysis of data for FFY 2012 indicates 41 infants and toddlers were not accounted for this fiscal year (based on the number of children who received six (6) months of service prior to exiting) compared to 130 last fiscal year. This representation demonstrates a significant increase from the previous year. Nevada has not been able to report 100% of progress data for all children in services for six (6) months or longer due to the following reasons:

- Entry data was submitted but the child did not receive intervention for the entire six (6) months timeframe due to loss of contact with families.
- Entry data was submitted for the child; however, exit data was not submitted 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.

# Progress and Slippage Relative to Summary Statements

Comparing FFY 2011 actual summary statement data to FFY 2012 actual summary statement data shows the following:

- There was slippage from the previous reporting period in four (4) of the six (6) summary statements across all three (3) Outcomes, which ranged from .1%-2%.
- Progress was demonstrated in two (2) of the six (6) summary statements, which ranged from 0.9% 1.5%.
- Nevada met four (4) of the six (6) established targets targets not met were Outcome A, summary statement one (1) and Outcome C, summary statement one (1). Last year, Nevada met five (5) of the six (6) targets.

Along with the challenge of high staff turnover and the growing number of agencies entering into agreement with the State to provide early intervention services, local programs have set a high priority on training new staff on the use of the child outcome process. Another high priority training area is in the area of age-appropriate development in order to appropriately compare Part C eligible children to typically developing peers. This has and continues to be an area of difficulty. Nevada is continuing to implement activities which put a greater emphasis on quality assurance for system improvements at the local program level in an effort to identify any areas of concern when there is suspect data to ensure internal validity and reliability.

Nevada is continuing to strive for a higher percentage of data for measuring infants and toddlers progress after receiving early intervention services. Based on the decisions made to effectively improve Nevada's data collection system related to this indicator, the State's current protocols will continue to be reviewed and improved in areas that focus on ensuring all children who received services for six (6) months or longer are having an entry and exit COSF completed. Although Nevada does not have 100% representation of all infants and toddlers in services for six (6) months or longer, the number of children with progress data has significantly increased from year to year.

# State Performance Plan Activity Update:

- (SPP Activity 10) To improve the quality and accuracy of data, Nevada's Advisory Child Outcome Task Force reviews random samples of completed COSF forms to identify possible errors in the data submitted, as well as to identify reoccurring trends which leads to insufficient information being provided to support ratings. This activity is ongoing.
  - Nevada's Advisory Child Outcome Task Force continues to meet on a quarterly basis to review decisions made to date and make modifications as needed. During this time, the group also does quality assurance spot checks on random samples of completed COSF's submitted by each region. This activity also ensures if there are trends reoccurring, staff are trained appropriately.

- 2. (SPP Activity 3) To assist programs with ensuring children entering early intervention services have data entered at both entry and exit, Crystal Reports have been created by the IDEA Part C Office Data Manager. This information is sent to the early intervention programs on a quarterly basis to assist them with keeping track of required entries and exits. This activity is ongoing. The following reports are being generated:
  - Children entering services who will have a program length of six (6) months or longer;
  - Third (3) birthdays of children who have received services for six (6) months or longer; and
  - Exit reports for children who exited the program and have received services for six (6) months or longer.
- 3. (SPP Activity 4) For children who leave early intervention services unexpectedly, a protocol was developed to ensure the most current assessment information is utilized for determining outcome status regardless of when the child exits. **This activity is ongoing.** 
  - Implementing this protocol and the use of the HAWAII allows early intervention providers to track progress data on a continuous basis and on all children even if they exit prior to their third (3) birthday.
- 4. (SPP Activity 5) Local early intervention programs have established an internal system for cross checking COSF forms to ensure internal validity and reliability of the data. This activity is ongoing.
  - Periodically service providers will have quality assurance reviews by their supervisors to evaluate the appropriateness and accuracy of scoring on the curriculum based assessment, since this is the tool most widely used in determining the rating on the COSF.
- 5. (SPP Activity 9) Early intervention program personnel who are familiar with the HAWAII continue to train all new staff on the administration of the HAWAII. **This activity is ongoing.** 
  - All new personnel who enter the early intervention system are properly trained on the administration and calculation of the assessment tool for the purposes of eligibility, documentation of child's strengths and needs, and progress towards achieving child outcomes.
  - If a child has received six (6) months of intervention and the program loses contact with the family, the IFSP team will complete an exit COSF. The rating is based on the child's chronological age, utilizing the most current evaluation/assessment information, progress notes, observations, etc. to determine an appropriate rating.
- 6. (SPP Activity 18) Training in the area of typical development is being implemented at the local program level to ensure quality child outcome ratings. **This activity is ongoing.** 
  - Local early intervention providers have implemented on-going training with staff in the area of age appropriate development and measuring Part C eligible children against typically developing peers.

# Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012

Nevada is continuing all ongoing activities as written; no changes are being made for proposed targets, improvement activities, timelines or resources for this indicator at this time.

# Part C State Annual Performance Report (APR) for FFY 2012

Overview of the Annual Performance Report Development: See Page 1 – Introduction

# Monitoring Priority: Early Intervention Services In Natural Environments

**Indicator 4:** 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)

### **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.

FFY	Measurable and Rigorous Target
FFY 2012	A. Know their rights – 95% B. Effectively communicate their children's needs – 94% C. Help their children develop and learn – 92%

# Actual Target Data for FFY 2012:

Data for this indicator is generated through the annual IDEA Part C Family Survey. For the FFY 2012 (SFY 2013) reporting period, **surveys were sent to a total of 1,563 families** all of who were active on the date of the data pull and enrolled in early intervention services for at least six (6) months. Since the survey is sent to all families enrolled who meet the 6-months criteria on the date of the data pull, the group is representative of the population served. A total of **297 surveys were returned** for a return rate of **19%.** The results are as follows:

# A. Know Their Rights

Statewide: This data is based on responses to Question 5 on the SFY 2013 Annual Family Survey which states, "Early Intervention helps me know and understand my parent rights."

The total number of families responding to Question 5 was 296. Of those responding, 289 (98%) reported they agree that early intervention had helped their family know their rights under the IDEA. 213 respondents indicated they Strongly Agree and 76 indicated they Agree. Nevada's performance in FFY 2012 of 98% exceeded the state target of 95%. **289/296 = 98%.** 

# B. Effectively Communicate Their Children's Needs

Statewide: This data is based on responses to Question 15 on the SFY 2013 Annual Family Survey which states, "Early Intervention helps me effectively communicate my child's needs."

The total number of families responding to Question 15 was 297. Of those responding, 280 (94%) reported early intervention services were effective in communicating their child's needs. Of the 297 total responses, 180 chose Strongly Agree and 100 chose Agree. Nevada's performance in FFY 2012 meets the State target of 94% for this reporting period. **280/297 = 94%.** 

# C. Help Their Children Develop and Learn

Statewide: This data is based on responses to Question 2 of the SFY 2013 Annual Family Survey which states, "My Early Intervention providers show me how I can help my child develop and learn."

The total number of families responding to Question 2 was 297. Of those responding, 288 (97%) reported they agree early intervention service providers show them how to help their child develop and learn. Of the 297 responses, 198 chose Strongly Agree and 90 chose Agree. Nevada's performance in FFY 2012 of 97% exceeded the state target of 92%.

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288/297 = 97%.
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# Survey Process:

Nevada's Annual Family Survey for FFY 2012 was conducted through agreement with the Nevada Center for Excellence in Disabilities (NCED) at the University of Nevada, Reno (UNR). The survey was developed by a stakeholder workgroup and consists of twenty questions using the five point Likert scale and one open-ended question to obtain input from families regarding their participation in early intervention services. In addition to responding to the survey questions, families are also encouraged to provide individual comments. Families have the option of not answering questions if they are not applicable. For FFY 2012, the survey was sent to all families, along with a postage-paid return envelope, who had a child enrolled in early intervention services for a period of six (6) months or more as of the date the mailing list is generated from the Tracking Resources and Children (TRAC) child data collection system. All surveys were sent in both English and Spanish.

# Rate of Return:

A copy of the survey was sent to the families twice during the survey period one month apart. The percent of return increased from 16.5% to 19% after the second mailing. The return rate of 19% for FFY 2012 is less than desired but is an increase from the 16.5% reported in FFY 2011. It is summarized that increasing the length of time allotted for families to respond may be helpful.

Survey results were analyzed on a statewide basis but were also disaggregated by each early intervention program in the State. All personally identifiable information specific to the family or any individual service provider is redacted prior to public reporting. The published survey results include parent comments and are distributed to all early intervention programs for review of performance and parent comments. As a result, programs may discuss issues with direct service personnel to ensure parent's concerns are being addressed. This data supports individual programs in program planning and improvement. In addition, the complete survey report will be posted on Nevada's website and disseminated to the Nevada Interagency Coordinating Council (ICC), regional programs, Aging and Disability Services Division (ADSD) and the Department of Health and Human Services (DHHS).

Responses to the family survey are analyzed to assess the representativeness of the response group. Responses from most race/ethnicity groups are consistent with the percent of the sample

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population. There is a slightly higher response rate from families identifying themselves as "White" and a slightly lower rate of return from families identifying themselves as "Hispanic/Latino". The data is reflected in Table 4.A.

Two or More Races Native Hawaiian or Other Pacific Islander	133 15	8% 1%	<u>17</u> 5	6% 2%
American Indian or Alaska Native	5	.32%	1	.34%
Asian	47	3%	9	3%
Black or African American	141	9%	24	8%
Hispanic/Latino	593	38%	90	30%
White	629	40%	151	51%
Race Ethnicity	Total Distributed	% of Total	Total # Returned	% of Total

Table 4.A. Race/Ethnicity Breakdown for Surveys Distributed/Returned for FFY 2012/SFY 2013

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 2012:

Outcomes	FFY 2011	FFY 2011	FFY 2012	FFY 2012
	Target	Performance	Target	Performance
A. Know their rights	94%	96%	95%	98%
B. Effectively communicate their children's needs	93%	91%	94%	94%
C. Help their children develop and learn	91%	93%	92%	97%

The state met or exceeded all targets for this indicator for the SFY 2012 reporting period. There was also progress in performance in all three measurement areas. Therefore, all State Improvement Plan (SPP) improvement activities for this indicator are not being reviewed at this time.

# State Performance Plan Activity Update

- 1. (SPP Activity 6) Analyze the data from the survey, and develop strategies to increase return rate from under-represented populations, to ensure it is representative of the state population including race/ethnicity, geographic region, and age population. **This activity is ongoing.** 
  - Though the survey responses were positive, the averaged return rate of 19% for this reporting period is small. A meeting of the survey workgroup has been held to discuss possible changes to format/questions or methodology for the 2015 survey process to encourage an increase in the return rate. A variety of options for future distribution of the survey are being reviewed including increasing the lead time for notification of personnel, families and other stakeholders of the upcoming survey to increase public awareness. Other suggestions include use of an on-line survey, developing awareness flyers, follow-up/reminder cards, possible incentives, and how to follow-up with programs that may have low return rates to support their efforts to encourage families to complete and turn in the survey. At least one survey question is currently being discussed for a possible future change to its wording for improved clarification.

# Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2013 [If applicable]

Nevada is continuing all ongoing activities as written; no changes are being made for proposed targets, improvement activities, timelines or resources for this indicator at this time.

# Part C State Annual Performance Report (APR) for FFY 2012

Overview of the Annual Performance Report Development: See Page 1 – Introduction

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

**Indicator 5:** Percent of infants and toddlers birth to 1 with IFSPs compared to national data.

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

# Measurement:

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

FFY	Measurable and Rigorous Target
FFY 2012	.9%

# Actual Target Data for FFY 2012:

The following data are generated through the Tracking Resources and Children (TRAC) data system as collected and reported for 618 data on December 1, 2012.

Statewide: On December 1, 2012, a total of 388 infants statewide, ages birth to one (1) year, had an Individualized Family Service Plan (IFSP). This number divided by the U.S. Office of Special Education Programs (OSEP) projection of 35,877 for the State's total population of infants, birth to age one (1) for 2012 indicates 1.08% of the infant population had an IFSP.
 (388/35,877 = 1.08%)

Nevada exceeded the established State Performance Plan (SPP) target of .9% of the projected birthto-one year population served, the national target of 1% and the national average of 1.06% for FFY 2012. Both the projected general population and the percent served are slightly lower than reported in FFY 2011. The State ranked 25<sup>th</sup> in 2012 for the percent of population served compared to the 50 states and the District of Columbia and Puerto Rico. This is higher than the State's ranking of 23<sup>rd</sup> in FFY 2011.

Table 5 A OSEP	General Population	n Estimates for Nevada	Infants Ares	Birth to One (1) Year
TADIE S.A. USEF	General Fupulation	I ESIIMALES IUI MEVAUA	mants, Ages	Difficitio Offe (1) Tear

Federal Fiscal Year	Population Estimate	Change in Population (+/-)
2006	37,901	+3,715
2007	40,917	+3,016
2008	40,346	-571
2009	40,286	- 60
2010	36,505	* -3,781
2011	36,675	+ 170
2012	35,877	- 798

Table 5.A. reflects OSEP's projections for the State's total population of infants ages birth to one (1) year and the change in the population estimates from 2006 through 2012. This table shows there

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was a decrease in the projected population of infants, ages birth to one (1) year in the State for FFY 2012 compared to the projected number for FFY 2011.

Federal Fiscal Year	# Infants with IFSP	Change in # w/IFSP	% Population Serve
2006	255	+93	.67%
2007	372	+ 117	.91%
2008	263	-109	.65%
2009	253	-10	.63%
2010	372	+ 119	1.02%
2011	423	+51	1.15%
2012	388	-35	1.08

Table 5.B. Infants Ages Birth to 1 Year with IFSP on December 01

Table 5.B. reflects the number of infants reported as having an IFSP on December 1 of each year from 2006 through 2012, the changes in the number of children with IFSPs from year to year, and the percent of the population served (i.e., with an IFSP) on December 1 of each year. This table shows there was a decrease in the number of infants, ages birth to one (1) year, reported in the December 1, 2012 Child Count compared to the December 1, 2011 count.

# Discussion of Improvement Activities <u>and Explanation</u> of Slippage, if the State did not meet its target that occurred for FFY 2012:

The State had slippage in the number (-35) and percent (-0.07%) served in this reporting period. However, there was a significant reduction in the projected number of infants, age birth to one (1) year during the same period. Further analysis will be completed to determine whether the fluctuation in population was the primary reason for the slippage or if there were other factors involved.

The State exceeded all targets for this reporting period and for the past two (2) reporting periods. Therefore, it is presumed the activities being implemented are appropriate and are supporting an effective child find system. Improvement activities for this indicator will not be reviewed for this reporting period.

# Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2013 [If applicable]

Nevada is continuing all ongoing activities as written; no changes are being made for proposed targets, improvement activities, timelines or resources for this indicator at this time.

# Part C State Annual Performance Report (APR) for FFY 2012

Overview of the Annual Performance Report Development: See Page 1 – Introduction

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

**Indicator 6:** Percent of infants and toddlers birth to 3 with IFSPs compared to national data.

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

### Measurement:

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

FFY	Measurable and Rigorous Target
FFY 2012	2%

# Actual Target Data for FFY 2012:

The following data are generated through the Tracking Resources and Children (TRAC) data system as collected and reported for 618 data on **December 1, 2012**.

Statewide: On December 1, 2012 a total of 2,553 infants and toddlers in Nevada, ages birth to three (3) years, had an active Individualized Family Service Plan (IFSP). This number divided by the U.S. Office of Special Education Programs (OSEP) estimate of 108,460 (Table C1-9) for the State's general population of infants and toddlers, birth to age 3, indicates that 2.35% of the population was represented in the December 1, 2012 count. (2,553/108,460 = 2.35%)

Based on the December 1, 2012 data, the State met the established State Performance Plan (SPP) target and the national target of 2%. The state was slightly below the national average of 2.77% percent for the birth to three (3) year old population served in this reporting period. Nevada ranked 34<sup>th</sup> in 2012 for the percent of population served compared to the 50 states and the District of Columbia and Puerto Rico.

Nevada demonstrated improvement in this indicator for the FFY 2012 reporting period. The number of eligible infants and toddlers, age birth to three (3) years, with an IFSP on December 1, 2012 increased by 11 (0.04%) in FFY 2012. As reflected in Table 6.A., the State, again, had a slight reduction in overall population for this age group for this reporting period. However, the number of infants and toddlers with disabilities with an IFSP on December 1, 2012 continued to increase as reflected in Table 6.B. The majority of the increase was in the northern regions of the State and, while further verification is needed, it is felt the increase may be linked to increased outreach efforts by early intervention programs in the region.

Table 6.A. OSEP General Po	pulation Estimates. Infants and	Toddlers Ages Birth to Three (3)

Year	# General Population	+/- Change From Previous Year
2006	111,945	+8.028
2007	119,218	+7,273

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2008	121,331	+2,113
2009	122,929	+ 1,598
2010	111,905	-11,024
2011	109,973	-1,932
2012	108,460	-1,513

Table 6.A. provides data on Nevada's population growth for infants and toddlers, age birth to three (3) years, from FFY 2006 to FFY 2012 as indicated by general population estimates released annually by OSEP.

### Table 6.B. Infants and Toddlers Ages Birth to 3 with IFSP on December 01

Year	# Infants with IFSP	+/-	% Population Served
		Number w/IFSP	
2006	1,520	+103	1.36%
2007	1,986	+ 466	1.67%
2008	2,052	+66	1.69%
2009	1,892	-160	1.54%
2010	2,344	+452	2.09%
2011	2,544	+ 200	2.31%
2012	2,553	+11	2.35%

Table 6.B. reflects the statewide trend in the number and percent of infants and toddlers, age birth to Three (3) years, with an IFSP on December 1 from 2006 thru 2012.

# Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 2012:

Given the State exceeded all targets for this reporting period and has demonstrated consistent improvement in this indicator for FFY 2010 through FFY 2012, it is presumed the activities being implemented are appropriate and are supporting an effective child find system. Improvement activities for this indicator will not be reviewed for this reporting period. The IDEA Part C Office and the ICC Child Find Committee continue to track performance for this indicator on a quarterly basis to ensure the State Child Find System continues to function in an effective manner.

# Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012 [*If applicable*]

Nevada is continuing all ongoing activities as written; no changes are being made for proposed targets, improvement activities, timelines or resources for this indicator at this time.

# Part C State Annual Performance Report (APR) for FFY 2012

Overview of the Annual Performance Report Development: See Page 1 – Introduction

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

**Indicator 7:** 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)

# Measurement:

Percent = [(# of eligible infants and toddlers with IFSPs for whom an initial evaluation and initial assessment and an initial IFSP meeting was 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.

FFY	Measurable and Rigorous Target
FFY 2012	100%

# Actual Target Data for FFY 2012:

The performance data for this indicator are taken from the Tracking Resources and Children (TRAC) child data collection system and represent the period of July 1 through March 31, 2013. Because this data includes all children with an initial evaluation, initial assessment and an initial IFSP meeting conducted during the timeframe, it is determined to be representative of the all children served. Data for this reporting period shows 1,625 children were referred to the program and were eligible for an initial evaluation and initial assessment and an initial IFSP meeting during the first three (3) quarters of FFY 2012. Of these:

- 1,553 children had the initial IFSP meeting conducted within 45 days from referral;
- 63 children did not have their IFSP developed within 45 days from referral due to family exceptions; and
- 1,616 initial IFSPs were compliant with the 45-day timeline.
- Percent = (1,616/1,625)\*100 = 99.45%

Documented family circumstances for not meeting the 45-day timeline included the following:

- Family cancelled appointments;
- Child was hospitalized or ill;
- Parent could not schedule the appointment within 45 days; and
- Parent had a personal or medical emergency and was not available for appointments.

The initial evaluation/assessment and IFSP for nine (9) children was not compliant with the required 45-day timeline for conducting eligibility determination and initial IFSP from the date of referral to the Part C system. These delays were a result of cancellations by a member of the multidisciplinary team due to illness and/or family emergency situations. Typically, in these situations, programs had a

substitute fill in but, in some cases, other personnel were already scheduled for other appointments and no one was available. Therefore, the meeting (either evaluation/assessment or the IFSP meeting) had to be rescheduled and the timeline was not met.

### Selection of Programs for Monitoring:

All early intervention service (EIS) provider programs in the State are required to participate in the Part C monitoring process annually. As part of each early intervention program's annual self-assessment process, performance is evaluated utilizing data from the TRAC data system for the specified period.

While verification of TRAC data is conducted on at least a quarterly basis by the IDEA Part C Office Data Manager, the monitoring process also includes a second level of verification during child record reviews. Each program was required to submit their self-assessment report to the IDEA Part C Office no later than May 31, 2013. The IDEA Part C Office conducted review and verification of the data submitted in the report and issued findings, as appropriate.

### Result of FFY 2012 Monitoring

A total of twelve (12) programs were monitored for compliance with 45-day timeline requirements in FFY 2012. Findings of noncompliance were issued in FFY 2012 as follows:

- Nine (9) programs were found to be at 100% compliance based on the FFY 2012 monitoring process; no new findings were issued.
- One (1) program was issued a new finding of noncompliance for this indicator based on FFY 2012 monitoring.
- One (1) program did not meet requirements for this indicator based on FFY 2012 monitoring data; however, the finding was not issued until the FFY 2013 reporting period.
- One (1) program was found to have on-going noncompliance from FFY 2010. This finding was subsequently corrected and the correction notice was sent to the program on January 9, 2014.

Findings Issued In FFY 2012 Based on Data Gathered Through FFY 2011 Monitoring

• Two (2) programs were issued findings in FFY 2012 based on the SFY 2011 monitoring process. Both programs were verified to have timely correction. This correction data will be reported in the FFY 2013 Annual Performance Report (APR).

A total of three (3) findings were issued in FFY 2012 based on program monitoring. Two (2) have been verified to have timely correction as of the submission of this report and one (1) is still in the timeline for correction. This correction data will be reported in the FFY 2013 APR. No complaints were filed relative to this indicator in FFY 2012; therefore, no findings were issued based on complaints.

# OSEP July 2012 Response Table:

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, 2011-June 30, 2012), and the State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

#### **REQUIRED ACTIONS**

Because the State reported less than 100% compliance for FFY 2011, the State must report on the status of correction of noncompliance identified in FFY 2011 for this indicator. When reporting on the correction of noncompliance, the State must report, in its FFY 2012 APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2011 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2012 APR, the State must describe the specific actions that were taken to verify the correction.

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### Correction of Noncompliance from FFY 2011:

No new findings of compliance were issued for Indicator 7 in FFY 2011. As indicated above, two (2) findings were issued in FFY 2012 based on data from FFY 2011.

### Correction of Noncompliance from FFY 2010:

In the FFY 2011 APR, Nevada reported one (1) program with on-going noncompliance from FFY 2010. New data was reviewed for the last two (2) quarters of FFY 2012 and the program was found to be at 100% compliance. A notice of subsequent correction was issued to the program on January 9, 2014.

Verification of Individual Child Correction:

• Individual child correction was verified for all children as new data reviewed showed an IFSP was developed for all children, though late.

Verification That Program is Correctly Implementing 34 CFR §§303.321(e)(2), 303.322(e)(1),and 303.342(a).

• The new data pulled from the TRAC data system for the last two (2) quarters showed 146 of 146 (100%) of new IFSPs developed were compliant with the 45-day timeline.

# Discussion of Improvement Activities <u>and Explanation</u> of Slippage, if the State did not meet its target that occurred for FFY 2012:

Nevada had demonstrated consistent progress for this indicator from FFY 2009 (69%) through FFY 2012 (99.45%). Progress was demonstrated for this reporting period from 99.40% reported for FFY 2011 to 99.45% for FFY 2012.

#### Table 7.A. Longitudinal Statewide Data on 45-day Timeline

Percent of Evaluations and IFSPs Compliant	FFY 2009	FFY 2010	FFY 2011	FFY 2012
with Completion Within 45-Days From Referral	69%	94%	99.40%	99.45%

Table 7.A. reflects the State's longitudinal performance relative to the 45-day timeline requirements.

Nevada has also demonstrated progress through correction of noncompliance. Two (2) of three (3) findings of noncompliance issued in this reporting period have already been verified to have been corrected in a timely manner. The State has also verified subsequent correction of the one (1) finding of noncompliance on going from FFY 2010.

# State Performance Plan Activity Review and Update:

- 1. (SPP Activity 5.) Explore the use of centralized evaluation teams to expedite eligibility determination and IFSP development, 2006, Program Managers. *This activity is ongoing.* 
  - Each of the EIS programs in the three (3) regions of the State has developed a team process for determining eligibility. For some programs, personnel are designated as part of a core team and have standard weekly assignments for conducting Multidisciplinary and Scheduling Teams (MDTs). The State operated programs have moved to an electronic scheduling system. This has created more internal efficiency for assigning staff to MDTs and to reassign staff if someone is out sick or on vacation versus cancelling the MDT meeting. The scheduling system also allows for greater flexibility in scheduling other families when appointments are cancelled.
  - EIS programs have developed internal processes and schedules for addressing issues related to compliance in this indicator. The programs with well established internal quality assurance teams have been very successful in improving documentation of circumstances resulting in delays in meeting the 45-day timeline.

- Programs have improved processes for inputting clearer documentation in the TRAC database regarding contact with families and staff to help eliminate scheduling errors as well as proper coding for exceptions.
- New policies and procedures have been developed and implemented in the Nevada Early Intervention Services (NEIS) South program for MDTs. This has assisted in meeting compliance requirements relative to the 45-day timeline. These policies and procedures continue to be implemented to ensure improvement and compliance.
- NEIS Northwest modified the program intake form by adding a section to reflect the date that must be met to ensure compliance with the 45-day timeline. A Crystal Report is run monthly, identifying children whose timeline is at 30 days and the process is not yet completed. Supervisors contact the service coordinators to ensure the timeline is on track to be completed timely.
- (SPP Activity 6.) Consider use of incentives to reward programs that consistently meet the 45-day timeline from referral to IFSP development, 2007-2012 Program Managers – *This activity is ongoing.*
  - Given the current State economic issues, EIS programs are limited in their abilities to
    provide broad-based incentives. However, most EIS programs have developed internal
    processes for recognition of performance of both individuals and teams. The IDEA Part C
    Office and individual programs provide a variety of program acknowledgements through
    newsletters, Fast Notes from program managers, and recognition at weekly and quarterly
    management meetings in an effort to recognize the hard work of all staff related to
    correction of noncompliance. Program's correction of noncompliance is also reported to
    the State Interagency Coordinating Council (ICC).

# Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012-13

Nevada is continuing all ongoing activities as written for this indicator; no changes are being made for proposed targets, improvement activities, timelines or resources for this indicator at this time.

# Part C State Annual Performance Report (APR) for FFY 2012

Overview of the Annual Performance Report Development: See Page 1 – Introduction

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

- **Indicator 8:** 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)

# **Measurement:**

- A. Percent = [(# of children exiting Part C who have an IFSP with transition steps and services) divided by the (# of children exiting Part C)] times 100.
- B. Percent = [(# of children exiting Part C and potentially eligible for Part B where notification to the LEA occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100.
- C. Percent = [(# of children exiting Part C and potentially eligible for Part B where the transition conference occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100.

Account for untimely transition conferences, including reasons for delay.

FFY	Measurable and Rigorous Target
FFY 2012	100%

# Actual Target Data for FFY 2012

# A. Individual Family Service Plans (IFSP) with transition steps and services.

Statewide: The compliance percentage for this indicator was derived from data gathered through child records as part of the monitoring and general supervision process. Individual plans are reviewed for timeliness and to verify inclusion of appropriate steps and service. Data was gathered from twelve (12) early intervention programs across the State. Of the 165 records reviewed for children exiting Part C, 163 exited with appropriate transition plans within the required timeline and included all the required components.

State

Two (2) programs had one (1) child record not meeting the requirements of this indicator for 98.79% compliance in this indicator.

# Percent = 163/165 x 100 = 98.79%

# B. Notification to the Local Education Agency (LEA), if child potentially eligible for Part B

Statewide: The compliance percentage for this indicator was derived using the Tracking Resources and Children (TRAC) child data collection system. In completing the 618 data for Table 3, Report on Infants and Toddlers Exiting Part C Programs, Nevada used the categories under Program Completion for FFY 2012 (2012-2013) to calculate the number of children exiting Part C and potentially eligible for Part B (Nevada defined potentially eligible as all Part C eligible children since Nevada has a restrictive eligibility definition). There were 1,508 children who were potentially eligible for Part B services and will shortly turn three (3) years of age and 1,501 children exiting Part C Office. The IDEA Part C Office verified the remaining seven (7) children had been notified at the local program level, which resulted in 100% compliance. 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.

# Percent = 1,508/1,508 x 100 = 100%.

# C. Transition conference, if child potentially eligible for Part B

- Statewide: Final data for this indicator was compiled from the TRAC data system. The first three (3) quarters of data were compiled from program monitoring and is being reported based on this data. For the first three (3) quarters of FFY 2012, the total unduplicated number of children exiting Part C that required a transition conference with the LEA was 801. Of the 801,
  - 749 had the transition conference conducted in a timely manner;
  - 30 were late due to family circumstances; and
  - 22 were late due to program circumstances.

As a result, the total number of transition conferences compliant with requirements for this reporting period is 779 (749 timely conferences plus 30 conferences late due to family exceptions). This calculation does not include children referred to the early intervention system less than 90 days prior to their third birthday.

# Percent = 779/801 x 100 = 97.25%

Documented family circumstances resulting in conferences not conducted less than 90 days prior to the child's third birthday included:

- Parent/child had a medical emergency or was ill;
- Family cancelled scheduled meeting and was unable to reschedule within timeline;
- Parent not available to schedule the appointment within required timeline; or
- Family declined transition conference.

# State Performance FFY 2012

#### 8.A.

The IDEA Part C Office implemented a monitoring process requiring all established early intervention programs to complete an annual self-assessment. Twelve (12) programs completed the monitoring process in FFY 2012. The compliance percentage for this indicator was derived from data gathered through child records as part of the monitoring and general supervision process. Program self-assessment reports were submitted by each program no later than May 31, 2013. This allowed the IDEA Part C Office time to verify data reflected in the report and issue findings to programs within the fiscal year reflected in the data being reported. This provides a more current reflection of program performance and more timely intervention in areas that may be problematic for the program.

# Findings Issued Based on Program Monitoring FFY 2012

New findings issued in FFY 2012 based on program monitoring were as follows:

- Ten (10) programs were found to be at 100% compliance based on the FFY 2012 monitoring process; no new findings were issued;
- One (1) program was issued a new finding of noncompliance on June 27, 2013;
- One (1) program did not meet requirements for this indicator based on FFY 2012 monitoring data; however, the finding was not issued until the FFY 2013 reporting period (August 23, 2013). Data for this program is included in the calculation for 8.A.

# Findings Issued In FFY 2012 Based on Data Gathered Through FFY 2011 Monitoring

Two (2) programs were issued findings in FFY 2012 (September 11 and September 28, 2012) based on the SFY 2011 monitoring process. Both programs have been verified to have timely correction. This correction data will be reported in Indicator 9 in the FFY 2013 Annual Performance Report (APR).

# Findings Issued In FFY 2012 as a Result of Complaint Investigation

One (1) finding of noncompliance was issued to one (1) early intervention program in FFY 2012. The complaint was filed with the IDEA Part C Office in June 2012 (FFY 2011). The report of findings was issued in July 2012 (FFY 2012). Timely correction of this finding has been verified. Individual child correction was verified as the transition process was completed. New data compiled through the FFY 2012 monitoring process showed the program to be at 100% compliance for transition plans. The correction will be reported in Indicator 9 in the FFY 2013 APR.

In summary, a total of four (4) findings were issued in FFY 2012 for Indicator 8.A. Three (3) were based on program monitoring and one (1) as a result of complaint investigation. Three (3) findings have been verified to have timely correction as of submission of this report and one (1) is still in the timeline for correction.

# Individual Child Correction:

Individual child correction was not possible for these children. All had exited Part C services and were, therefore, no longer in the jurisdiction of the program.

<u>Correctly Implementing 34 CFR §§303.148(b)(4) and 303.344(h) and 20 U.S.C. 1436(a)(3) and (d)(8).</u> In verifying programs are correctly implementing requirements for 8.A., the IDEA Part C Office reviews new data through the annual monitoring process.

# 8.B.

Data from the TRAC data system was used to implement procedures for notifications to the State Education Agency (SEA) and Local Education Agencies (LEA) to monitor performance in 8.B. In completing the 618 data for Table 3, Report on Infants and Toddlers Exiting Part C Programs, Nevada used the categories under Program Completion for FFY 2012 (2012-2013) to calculate the number of children exiting Part C and potentially eligible for Part B. Notification lists were pulled from the database and sent to the SEA and LEAs on a monthly basis from July 1, 2012 through June 30, 2013. The State maintained performance of 100% in this reporting period.

# 8.C.

Compliance with Indicator 8.C. was monitored through the TRAC data system. Data reported for the FFY 2012 reporting period represents the first three (3) quarters of the fiscal year (July 2012–March 2013). Since the data utilized for this area was pulled from the data system and included all children having a transition conference within the data period, the data is representative of all children to whom this indicator is applicable in the reporting period. Data for FFY 2012 shows the State's performance at 97.25%.

## Findings Issued Based on Program Monitoring FFY 2012

New findings issued in FFY 2012 for 8.C. based on program monitoring were as follows:

- Seven (7) programs were found to be at 100% compliance based on the FFY 2012 monitoring process; no new findings were issued.
- Three (3) programs were each issued a new finding of noncompliance in June 2013.
- Two (2) programs did not meet requirements for this indicator based on FFY 2012 monitoring data; however, the findings were not issued until the FFY 2013 reporting period. Data for these programs are included in the calculation for 8.C.

Findings Issued In FFY 2012 Based on Data Gathered Through FFY 2011 Monitoring

• Two (2) programs were issued findings in FFY 2012 (September 11 and August 13, 2012) based on the SFY 2011 monitoring process. Both programs have been verified to have timely correction.

A total of five (5) findings were issued in FFY 2012 for Indicator 8.C. based on program monitoring. Two (2) have been verified to have timely correction as of the submission of this report. The remaining three (3) are still in the timeline for correction.

### Individual Child Correction:

The IDEA Part C Office verified through TRAC data reports all children had a transition conference conducted, though late.

<u>Correctly Implementing 34 CFR §303.148(b)(2)(i) (as modified by IDEA section 637(a)(9)(A)(ii)(II)</u>) In verifying programs are correctly implementing requirements for 8.C., the IDEA Part C Office reviews new data through the TRAC data system on a quarterly basis.

State

Discussion of Improvement Activities <u>and Explanation</u> of Slippage, if the State did not meet its target that occurred for FFY 2012:

# 8A. Progress and Slippage FFY 2012

The State's compliance percentage showed improvement from 95% in FFY 2011 to 98% in FFY 2012. Two (2) findings issued in FFY 2012 as a result of the FFY 2011 monitoring process have been verified to have timely correction. The IDEA Part C Office has provided training and technical assistance to programs in order to ensure timely correction regarding comprehensive transition planning for eligible children and their families.

# Correction of Findings of Noncompliance From FFY2011:

OSEP FFY 2011Response Table, July 2013:

The State revised the improvement activities for FFY 2012 for this indicator and OSEP accepts those revisions.

# **REQUIRED ACTIONS**

Because the State reported less than 100% compliance for FFY 2011, the State must report on the status of correction of noncompliance identified in FFY 2011 for this indicator. When reporting on the correction of noncompliance, the State must report, in its FFY 2012 APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2011 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2012 APR, the State must describe the specific actions that were taken to verify the correction.

No findings were issued for Indicator 8.A. in FFY 2011. Findings from the FFY 2011 monitoring process were issued in the FFY 2012 reporting period. Both findings issued in FFY 2012 as a result of FFY 2011 monitoring have been verified to have timely correction (see section on State Performance Data for FFY 2012). Correction of these findings will be reported in Indicator 9 in the FFY 2013 APR.

FFY	Number of Findings of Noncompliance Related to Indicator 8.A	Number of Findings for which Correction was Verified within One Year	Number of Findings for which Correction was Subsequently Verified (Date)	Number of Findings of Noncompliance Remaining
FFY 2008	3	2	1	0
FFY 2009	2	2	0	0
FFY 2010	0	NA	NA	0
FFY 2011	*0	NA	NA	0
FFY 2012	4	3	Remaining findings are still in timelin for correction; Corrections will be reported in FFY 2013 APR	

 Table 8.A. Longitudinal Findings and Correction of Noncompliance

\* Findings from FFY 2011 monitoring were not issued until the FFY 2012 monitoring period.

# 8.B. Progress and Slippage – FFY 2012

Nevada maintained performance at 100% compliance from FFY 2011 to FFY 2012. The State continues to provide notification required under Indicator 8.B. to the SEA and LEA from the State level. Notification lists were pulled from the database and sent to the SEA and LEAs on a monthly basis July 1, 2012 through June 30, 2013. Since data are issued by the IDEA Part C Office utilizing the TRAC database, this is not a compliance requirement for local early intervention service

State

providers. Nevada used exit categories under Program Completion for FFY 2012 (2012-2013) to calculate the number of children exiting Part C and potentially eligible for Part B.

The IDEA Part C Office Data Manager verifies through the TRAC data system every child has had notification submitted. This includes cross-walking exit data from the TRAC data system with the list of all children included on the notification lists. For any child not included on the notification list, it is verified notification has been sent to the LEA by the local early intervention service provider program.

FFY	Number of Findings of Noncompliance Related to Indicator 8.B.	Number of Findings for which Correction was Verified within One Year	Number of Findings for which Correction was Subsequently Verified (Date)	Number of Findings of Noncompliance Remaining	
FFY 2008	0		NA		
FFY 2009	0		NA		
FFY 2010	0	NA			
FFY 2011	0	NA			
FFY 2012	0	NA			

Table 8.B. Longitudinal Findings and Correction for Noncompliance

### 8.C. Progress and Slippage - FFY 2012

Nevada demonstrated improvement in this indicator in FFY 2012 with a performance of 97.25%. This is an improvement over the 96% reported for FFY 2011. The number of programs monitored in FFY 2012 also increased from nine (9) to twelve (12). Of the nine (9) programs involved in monitoring in FFY 2011, two (2) did not meet requirements based on data compiled during the monitoring process. However, findings were not issued until the FFY 2012 reporting period. Both programs were verified to have timely correction as of the submission of this report.

### Correction of Noncompliance identified in FFY 2011

OSEP FFY 2011Response Table, July 2013:

The State revised the improvement activities for FFY 2012 for this indicator and OSEP accepts those revisions.

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, 2011-June 30, 2012), and the State described how the time period in which the data were collected accurately reflects data for infants and toddlers with IFSPs for the full reporting period.

# **REQUIRED ACTIONS**

Because the State reported less than 100% compliance for FFY 2011, the State must report on the status of correction of noncompliance identified in FFY 2011 for this indicator. When reporting on the correction of noncompliance, the State must report, in its FFY 2012 APR, that it has verified that each EIS program or provider with noncompliance identified in FFY 2011 for this indicator: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2012 APR, the State must describe the specific actions that were taken to verify the correction.

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No findings were issued for Indicator 8.C. in FFY 2011. Findings from the FFY 2011 monitoring process were issued in the FFY 2012 reporting period. Both findings issued in FFY 2012 as a result of FFY 2011 monitoring have been verified to have timely correction (see section on State Performance Data for FFY 2012). Correction of these findings will be reported in Indicator 9 in the FFY 2013 APR.

FFY	Number of Findings of Noncompliance Related to Indicator 8.C	Number of Findings for which Correction was Verified within One Year	Number of Findings for which Correction was Subsequently Verified (Date)	Number of Findings of Noncompliance Remaining
FFY 2008	0		NA	
FFY 2009	3	3	0	0
FFY 2010	3	2	1	0
FFY 2011	0	NA	NA	0
FFY 2012	5	2	for correction; reported in	ngs are still in timeline Corrections will be FFY 2013 APR

Table 8.C. Findings and Correction of Noncompliance

\* Findings from FFY 2011 monitoring were not issued until the FFY 2012 monitoring period.

# Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2011:

- (SPP Activity 11.) The IDEA Part C Office continues to implement a process to notify the LEAs on a monthly basis of all children potentially eligible for Part B. In addition, the local early intervention programs notify the LEAs on a per child basis during the transition process from Part C to Part B so children missed in the Part C statewide report are captured at the local program level with parental consent. This activity is ongoing.
  - The IDEA Part C Office Data Manager pulled data of children exiting who are potentially eligible for Part B services monthly, including the previous three (3) months and the following nine (9) month time period. This overlap was created to ensure the LEA receives notification for all children even those who may have been late referrals and only in the program for a short period of time.
  - The local early intervention programs support families in transitioning to the LEAs on a per child basis during the transition process from Part C to Part B. Any children who may be missed in the Part C statewide report are captured at the local program.
  - New providers have also developed policies and procedures to ensure local school districts are notified of potentially eligible children. The Northwest and Northeast regions have developed a tickler system; a list of children who will be transitioning from early intervention two (2) months before the required 90 days.
- 2. (SPP Activity 7.) Regularly scheduled meetings are held between local programs and the local school district representatives to ensure timely transition and data sharing. This activity is ongoing.
  - Early intervention programs in the Southern region continue to meet quarterly with school district staff and transition liaisons to ensure timely transition meetings. This improvement has been attributed to the diligent efforts of the early intervention programs to notify Clark County School District (CCSD) of children who will potentially be transitioning to the LEA six (6) to seven (7) months prior to the child's third (3rd) birthday.
  - Additional training from CCSD was provided to early intervention staff in the Southern region to familiarize them with the Part B requirements for transition.
  - In the Northwest region, supervisors from the early intervention programs meet with the school district representatives two (2) times per month to ensure timely transition.

- (SPP Activity 13) The IDEA Part C Office and the Nevada Department of Education collaboratively updated the existing Memorandum of Understanding (MOU), which will serve as a model for local early intervention programs and school districts. Part C Coordinator and 619 Coordinator, FFY 2009-2013.
  - Early Intervention Program Managers, LEA Special Education Administration and/or Early Childhood Special Education personnel for rural counties met to develop specific written procedures to support the MOUs developed and further ensure timely transition in the rural areas.
  - A collaborative transition training module was developed between the IDEA Part C Office and the 619 Coordinator and will be provided to early intervention programs and individual school district staff.

# Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2012 – 2013

Nevada is continuing all ongoing activities for this indicator as written; no changes are being made for proposed targets, improvement activities, timelines or resources for this indicator at this time.

# Part C State Annual Performance Report (APR) for FFY 2012

Overview of the Annual Performance Report Development: See Page 1 – Introduction

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

**Indicator 9:** General supervision system (including monitoring, complaints, hearings, etc.) identifies and corrects noncompliance as soon as possible but in no case later than one year from identification.

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

#### **Measurement:**

Percent of noncompliance corrected within one year of identification:

- a. # of findings of noncompliance.
- b. # of corrections completed as soon as possible but in no case later than one year from identification.

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

States are required to use the "Indicator C9 Worksheet" to report data for this indicator (see Attachment 1).

FFY	Measurable and Rigorous Target
FFY 2012	100%

### Actual Target Data for FFY 2012:

20 new findings of noncompliance were made in FFY 2011.

**<u>8</u>** corrections were verified to be completed as soon as possible but in no case later than one year from identification.

### Percent = 8 divided by 20 x100 or 40%

Table 9.A. Timely Correction of FFY 2011 Findings of Noncompliance (corrected within one (1) year from identification of the noncompliance):

<ol> <li>Number of findings of noncompliance the State made during FFY 2011 (the period from July 1, 2011, through June 30, 2012) (Sum of Column (a) on the Indicator C 9 Worksheet)</li> </ol>	20
2. Number of findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS programs of the finding) (Sum of Column (b) on the Indicator C 9 Worksheet)	8
3. Number of findings <u>not</u> verified as corrected within one year [(1) minus (2)]	12

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	INDICATOR C-	9 WORKSHEI	ET	
Indicator/Indicator Clusters	General Supervision System Components	# of EISPs Issued Findings in FFY 2011 (7/1/11 to 6/30/12)	(a) # of Findings of noncompliance identified in FFY 2011 (7/1/11 to 6/30/12)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
1. Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a	Monitoring Activities: Self- Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
timely manner	Dispute Resolution: Complaints, Hearings	4	5	2
2. Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the	Monitoring Activities: Self- Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	1	1	1
home or community-based settings	Dispute Resolution: Complaints, Hearings	4	9	2
3. Percent of infants and toddlers with IFSPs who demonstrate improved outcomes	Monitoring Activities: Self- Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0
4. Percent of families participating in Part C who report that early intervention services have helped the	Monitoring Activities: Self- Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
family	Dispute Resolution: Complaints, Hearings	0	0	0
5. Percent of infants and toddlers birth to 1 with IFSPs	Monitoring Activities: Self- Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
6. Percent of infants and toddlers birth to 3 with IFSPs	Dispute Resolution: Complaints, Hearings	0	0	0
7. Percent of eligible infants and toddlers with IFSPs for whom an initial evaluation and initial assessment and an	Monitoring Activities: Self- Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
initial IFSP meeting were conducted within Part C's 45- day timeline.	Dispute Resolution: Complaints, Hearings	0	0	0

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Indicator/Indicator Clusters	General Supervision System Components	# of EISPs Issued Findings in FFY 2010 (7/1/10 to 6/30/11)	(a) # of Findings of noncompliance identified in FFY 2010 (7/1/10 to 6/30/11)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
8. Percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:	Monitoring Activities: Self- Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
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:	Dispute Resolution: Complaints, Hearings	0	0	0
8. Percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the lead agency has:	Monitoring Activities: Self- Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	NA	NA	NA
B. Notified (consistent with any opt-out policy adopted by the State) the SEA and the LEA where the child resides at least 90 days prior to the toddler's third birthday for toddlers potentially eligible for Part B preschool services; and	Dispute Resolution: Complaints, Hearings	0	0	0
8. Percentage of toddlers with disabilities exiting Part C with timely transition planning for whom the Lead Agency has:	Monitoring Activities: Self- Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
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.	Dispute Resolution: Complaints, Hearings	0	0	0
Procedural Safeguards	Monitoring Activities: Self- Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings Dispute Resolution: Complaints, Hearings	3	5	3
Sum the numbers day	vn Column a and Column b		20	8
		4	zu v column (a) sum) times 100	0 //0%

Percent of noncompliance corrected within one year of identification = (column (b) sum divided by column (a) sum) times 100

# FFY 2011 Selection of Programs for Monitoring

The IDEA Part C Office requires all early intervention service provider programs that have been in operation at least one (1) year to participate in the monitoring process on an annual basis. Nine (9) programs participated in the monitoring process in FFY 2011.

### FFY 2011 Monitoring Process

A notice was issued to the programs in February 2012 to initiate the monitoring process along with forms and documents to support the process. All programs completed a self-assessment in conjunction with the IDEA Part C Office and submitted a final report not later than May 31, 2012. Programs were required to maintain an internal Quality Assurance (QA) Team process and the IDEA Part C Office liaison to the program interacted with this team on a regular basis. Programs with identified noncompliance from program monitoring relative to an indicator were issued one (1) finding for that indicator. Programs were also issued one (1) finding per complaint for each indicator where noncompliance was identified through complaint investigation.

Data collected, analyzed and reported as part of the self-assessment and verification process included:

- data gathered through child record reviews (Indicators 1 and 8.A.);
- data from the Tracking Resources and Children (TRAC) child data collection system (Indicators 2, 5, 6, 7 and 8.C.);
- data from the Child Outcomes tracking system (Indicator 3);
- results of the Annual Part C Family Outcomes survey (Indicator 4); and
- data from complaints, mediations and due process tracking system (All indicators, as appropriate).

### Findings Issued Based on Monitoring

Review and verification of each program's report and supporting data was conducted by the IDEA Part C Office liaison. As a result, new findings were issued relative to State Performance Plan (SPP) Indicators 1 and 2 in FFY 2011 as reflected in Table 9.A. above. In addition, the State monitoring system includes a section specific to Procedural Safeguards.

A written notification of findings was issued to one (1) program on May 29, 2012. Letters of findings were issued to the remaining eight (8) programs early in the FFY 2012 reporting period. The notice of findings included a citation of the regulatory requirement for which the program had been noncompliant. In indicators where the program's performance was found to be less than substantially compliant (94% or below), a finding was issued and the program was required to generate a written Corrective Action Plan (CAP) in conjunction with the IDEA Part C Office. The plan included identification of underlying issues contributing to the failure to meet requirements and strategies to change policies and procedures, as appropriate, and identify persons responsible for ensuring implementation of stated activities, targets, and projected timelines for correction. If the program was not required to develop a formal CAP. The program was notified all noncompliance must be corrected as soon as possible but no later than one (1) year from written notification. The IDEA Part C Office

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Table 9.B. – Find	lings and Correction	ons for FFY 2	011 per APR Indic	ator

Indicator	# Programs	# Findings	As a Result of:	# Verified Timely Corrections	Subsequent Corrections
Indicator 1:	9	0	Monitoring	NA	NA
	4	5	Complaint Investigation	2	2
Indicator 2	9	1	Program Monitoring	1	0
	4	9	Complaint Investigations	2	5
Indicator 7	9	0	Program Monitoring	NA	NA
Indicator 8.c.	9	0	Program Monitoring	NA	NA
State: Procedural Safeguards	3	5	Complaint Investigations	3	2
Totals		20		8	9

# OSEP Response Table to the FFY 2012 APR Stated:

The State revised the improvement activities for FFY 2013; however, the current State Performance Plan expires at the end of FFY 2012. The State should include the new improvement activity in the FFY 2013 State Performance Plan submission.

The State was identified as being in need of assistance for two consecutive years based on the State's FFY 2009 and FFY 2010 APRs, was advised of available technical assistance, and was required to report, with the FFY 2011 APR, on: (1) the technical assistance sources from which the State received assistance; and (2) the actions the State took as a result of that technical assistance. The State reported on the technical assistance sources for this indicator and reported on the actions the State took as a result of that technical assistance for this indicator and reported on the actions the State took as a result of that technical assistance.

The State reported that three of four findings of noncompliance identified in FFY 2009 were corrected. The State also reported that the remaining seven findings of noncompliance identified in FFY 2008, and the remaining finding of noncompliance identified in FFY 2006, were not corrected. For the uncorrected noncompliance, the State reported on the actions it took to address the uncorrected noncompliance.

### REQUIRED ACTIONS

The State must demonstrate, in the FFY 2012 APR, that the remaining two findings of noncompliance identified in FFY 2010, the one remaining finding identified in FFY 2009, the seven remaining findings identified in FFY 2008, and the one remaining finding identified in FFY 2006, that were not reported as corrected in the FFY 2011 APR were corrected.

When reporting in the FFY 2012 APR on the correction of findings of noncompliance, the State must report that it verified that each EIS program or provider with findings of noncompliance identified in FFY 2011, and the remaining findings identified in FFY 2010 and FFY 2009: (1) is correctly implementing the specific regulatory requirements (i.e., achieved 100% compliance) based on a review of updated data such as data subsequently collected through on-site monitoring or a State data system; and (2) has corrected each individual case of noncompliance, unless the child is no longer within the jurisdiction of the EIS program or provider, consistent with OSEP Memo 09-02. In the FFY 2012 APR, the State must describe the specific actions that were taken to verify the correction. In addition, in reporting on Indicator 9 in the FFY 2012 APR, the State must use and submit the Indicator 9 Worksheet.

In addition, in responding to Indicators 1, 7, 8A, and 8C in the FFY 2012 APR, the State must report on correction of the noncompliance described in this table under those indicators. The State's failure to correct longstanding noncompliance raises serious questions about the effectiveness of

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the State's general supervision system. The State must take the steps necessary to ensure that it can report, in the FFY 2012 APR, that it has corrected this noncompliance.

The State must take the steps necessary to ensure that it can report, in the FFY 2012 APR, that it has corrected the one remaining finding identified in FFY 2006. If the State cannot report in the FFY 2012 APR that this noncompliance has been corrected, the State must report in the FFY 2012 APR: (1) the specific nature of the noncompliance; (2) the State's explanation as to why the noncompliance has persisted; (3) the steps that the State has taken to ensure the correction of the remaining finding of noncompliance, and any new or different actions the State has taken, since the submission of its FFY 2011 APR, to ensure such correction; and (4) any new or different actions the State will take to ensure such correction.

# Verification of Correction of FFY 2011 Findings

### Indicator 1:

Five (5) findings of noncompliance were issued to four (4) programs in FFY 2011 based on complaint investigations. See Indicator 1 for additional detail.

### Individual Child Correction:

The IDEA Part C Office verified services were initiated, though late, for the children for whom noncompliance was identified through complaint investigation. In addition, a remedy (either compensatory services or reimbursement for the family if the service was obtained independently) was provided for the period of the delay in services per a written agreement established between the program and the family.

Correctly implementing 34 CFR §§303.340(c), 303.342(e), and 303.344(f)(1):

New data was gathered and correction verified for three (3) programs as follows:

Program #1: Timely correction of one (1) finding per on-site verification – 12/17/2012

Program #2: Timely correction of one (1) finding per annual monitoring process – 6/30/2012

Program #3: Subsequent correction of two (2) findings per annual monitoring process- 9/27/2013

Program #4: Nevada has not been able to verify correction of one (1) finding of noncompliance as of the submission of this report.

### Indicator 2:

Ten (10) findings of noncompliance were issued to four (4) programs in FFY 2011 based on complaint investigations and program monitoring.

# Individual Child Correction:

The IDEA Part C Office verified that children for whom noncompliance was identified were transitioned to more appropriate settings or the children were no longer under the jurisdiction of the program involved.

### Correctly implementing 34 CFR §§303.344(d)(1)(B):

New data was gathered and correction verified for two (2) programs as follows:

- Program #1: Timely correction of three (3) findings and subsequent correction of three (3) findings per on-site verification -2/15/2013
- Program #2: Subsequent correction of two (2) finding per annual monitoring process 9/27/13
- Program #3: Nevada has not been able to verify correction of one (1) finding of noncompliance as of the submission of this report; however the program has made progress.
- Program #4: Nevada has not been able to verify correction of one (1) finding of noncompliance as of the submission of this report; however the program has made progress.

## State – Procedural Safeguards:

Five (5) findings of noncompliance were issued to three (3) programs in FFY 2011 based on complaint investigations.

Findings of noncompliance issued in this area were based on data gathered through review of child records to verify the program's documentation of informing families of rights and procedural

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safeguards, issuing appropriate prior written notice and obtaining appropriate and timely written parental consent. Since the findings were based on the program's documentation of procedures and processes and were after-the-fact, child correction was not required in these instances.

# Correctly Implementing 34 CFR §§303.420 and 303.421

New data was gathered and correction verified for all three (3) programs as follows:

Program #1: Timely correction of one (1) finding and subsequent correction of one (1) finding per on-site verification – 2/15/2013

Program #2: Subsequent correction of one (1) finding per on-site verification - 5/16/13

Program #3: Timely correction of two (2) findings per focused monitoring – 3/26/12.

# Discussion of Improvement Activities <u>and Explanation</u> of Slippage, if the State did not meet its target that occurred for FFY 2012:

Nevada experienced slippage in the percent of findings corrected in a timely manner from FFY 2011 (55%) to FFY 2012 (40%). However, more subsequent corrections have been verified as of the date of the submission of this report than had occurred prior to the submission of the FFY 2011 Annual Performance Report (APR). As of the submission of this report, a total of 17 of the 20 (85%) findings of noncompliance issued in FFY 2011 have been verified to have been corrected. The three (3) remaining findings of noncompliance are specific to two (2) programs and are related to Indicators one (1) and two (2). Both programs also have ongoing findings in these indicators from previous reporting periods. Please see each of the indicators for additional details.

### Nature of the Noncompliance:

As in the previous reporting period, the on-going noncompliance continues to be specific to Indicators one (1), Timely Initiation of IFSP Services, and two (2), Provision of Services in Natural Environments. In both indicators, it has been verified the two (2) programs involved are making progress but neither could be verified to have achieved full correction as of the date of this report. During this reporting period, the issues relative to Indicator 1 continued to be shortage of resources in the most populated area of the State. In Indicator 2, the issues include interpretation of what constitutes a "natural environment" and what is appropriate justification for providing services in an alternate environment. Please see details in each indicator for more specific information.

# Reason(s) for Persistence of the Noncompliance:

Indicator 1:

- Insufficient personnel capacity to serve the number of children being referred and the number determined eligible for early intervention services due to State fiscal crisis.
- Specific personnel shortages and budget containment in Speech Language Pathologists, Occupational Therapists, Physical Therapists, Instructional Aides, Feeding and Vision services.
- Lack of competitive salaries for professional therapists.
- Decrease in workforce capacity for existing personnel due to the state mandated furloughs for all employees.

# Indicator 2:

- Turn-over in program personnel.
- Ongoing need for buy-in by some individual therapy personnel.
- Use of individual/agency contractors who did not provide services in the natural environment in order to expedite services and prevent children from waiting for service initiation.

### New or Different Actions in FFY 2012 This Reporting Period to Ensure Correction:

Indicator 1:

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- Focused monitoring;
- Increased number of on-site verification visits to ensure progress;
- Report to State Legislature and ICC regarding wait list;
- Significant increase in State funding for early intervention services by the Nevada Legislature in the 2013 session; effective date for implementation July 1, 2013;
- Increased number of personnel positions specified for State early intervention programs by the Nevada Legislature in the 2013 session; effective date for implementation July 1, 2013.

## Indicator 2:

- Focused Monitoring;
- Training for program therapy personnel by the IDEA Part C Office;
- On-site verification visit to monitor progress.

# New or Different Action Anticipated for FFY 2013 to Ensure Correction:

Indicator 1:

- Monthly verification by the IDEA Part C Office to include on-site verification visits and desk audits through the TRAC data system;
- Tracking of progress in filling new positions and status of new contracts with therapy providers;
- Continue to monitor the number of children who have services that have not been initiated within required timelines on a monthly basis through the TRAC data system;
- Establish progressive performance targets with early intervention program;
- Explore possibility for additional positions to be added to the IDEA Part C Office to support more frequent follow-up, training and technical assistance for program;
- Establishment of Quality Assurance Teams through the Aging and Disability Services Division (ADSD) to support the increased capacity of early intervention programs to receive additional children;
- Implement clarification provided through the U.S. Office of Special Education Programs (OSEP) technical assistance visit related to crediting correction of noncompliance for individual child when service is initiated and distinguishing between children who need compensatory services and those actually waiting for initiation of services on the program wait list;
- Continue to access technical assistance from OSEP and national technical assistance providers to address underlying issues related to the noncompliance;
- Review and update state monitoring processes to identify and target critical areas.

Indicator 2:

- Monthly verification by the IDEA Part C Office to include on-site verification visits and desk audits through the TRAC Data System;
- Requiring program to submit Justification for Provision of Service in Alternative Setting Page of the Individualized Family Service Plan (IFSP) to the IDEA Part C Office for review immediately following any applicable IFSP meeting;
- Establish progressive performance targets with early intervention program;
- Explore possibility for additional positions to be added to the IDEA Part C Office to support more frequent follow-up, training and technical assistance for program;
- Require program personnel to participate in mandatory training.

### Findings of Noncompliance - FFY 2009

Findings of Noncompliance From FFY 2009 Not Timely Corrected (corrected more than one year from identification of the noncompliance) and/or Not Corrected:

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Indicator 2:	
1. Number of FFY 2009 findings not timely corrected (same as the number from (3) about 1.	ove) 4
2. Number of FFY 2009 findings the State has verified as corrected beyond the one-year	ar
timeline ("subsequent correction")	3
3. Number of FFY 2009 findings not yet verified as corrected [(1) minus (2)]	1

One (1) finding of noncompliance from FFY 2009 remains uncorrected for one (1) early intervention service provider program at the time of the submission of this report. This finding is related to Indicator 2. The program is a private agency providing services through a Provider Agreement with Nevada State Health Division (NSHD). Responsibility for administration of the direct services component of the State's Early Intervention system was transferred from NSHD to the ADSD by the Nevada Legislature in the 2013 session. The IDEA Part C Office was also transferred into the Director's Office of the Department of Health and Human Services (DHHS). The IDEA Part C Office will work closely with ADSD to ensure enforcement of all IDEA requirements with this service provider agency in FFY 2013.

Enforcement:

The IDEA Part C Office liaison conducted an on-site verification visit with the program in November 2013 and also completed a full desk audit of enrollment through the TRAC data system. The program showed significant progress but had not achieved full compliance with the requirement for providing appropriate justification for services not provided in natural environments. The IDEA Part C Office will meet with ADSD management to establish and implement enforcement actions to ensure compliance is achieved in FFY 2013.

# Findings of Noncompliance - FFY 2008

Correction of Remaining Findings of Noncompliance from FFY 2008	
1. Number of remaining FFY 2008 findings noted in OSEP's response to Nevada's FFY	
2010 APR for this indicator.	8
2. Number of remaining FFY 2008 findings the State has verified as corrected	
	0
3. Number of remaining FFY 2008 findings the State has NOT verified as corrected in FFY	
2011 [(1) minus (2)]	8

The on-going findings of noncompliance from FFY 2008 (8) are all related to APR Indicator 1: Percent of infants and toddlers with IFSPs who receive early intervention services on their IFSPs in a timely manner. These findings resulted from complaint investigations and program monitoring. This data was revised in the FFY 2012 APR to include noncompliance identified through monitoring for one (1) program that had previously been reported as having on-going noncompliance since FFY 2006. Additional explanation is provided in the section below related to FFY 2006.

As reported previously, the IDEA Part C Office has verified individual child correction for all children involved by verifying the services were provided, though late, and an appropriate remedy (ex. compensatory services or reimbursement to the family) had been provided per signed agreement with the family. However, the IDEA Part C Office has not been able to verify the program is meeting this requirement for all children. The program demonstrated progress in the FFY 2012 monitoring process and in on-site verification visits. Monthly data reports on the number of children enrolled in the program waiting for initiation of services beyond required timelines continue to be generated by the IDEA Part C Office and reviewed with the program. This information is also reported to the Office of the Director in the DHHS via Case Load Evaluation and Organization (CLEO) reports. See Indicator 1 for additional details.

Correction of Remaining Findings of Noncompliance from FFY 2006	
1. Number of remaining FFY 2006 findings noted in OSEP's response to Nevada's FFY	

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2010 APR for this indicator.	0
2. Number of remaining FFY 2006 findings the State has verified as corrected in FFY 2011	
	0
3. Number of remaining FFY 2006 findings the State has NOT verified as corrected in FFY	
2011 [(1) minus (2)]	0

# FFY 2006 Non-Compliance

The SPP submitted to OSEP by Nevada in December 2005 first established the "30-day standard" for timely initiation of services for early intervention services. Based on that standard, a finding of noncompliance was issued to one (1) program in the State in December 2006. All children represented in the data collection for monitoring for that period received the services on their IFSP; however, only 51 percent met the 30-day criteria for all IFSP services.

Nevada received a technical assistance visit from the OSEP state contact in September 2013 to support the State in identifying and implementing strategies to address long-term noncompliance for this indicator. During this visit, clarification was provided that the State was not required to implement the two-pronged approach to correction of noncompliance prior to the issuance of the 09-02 memo by OSEP on October 17, 2008. Since it was verified child correction had occurred for the children involved in the 2006 finding, Nevada is revising the status relative to this finding of noncompliance in this APR. The term for the on-going noncompliance is being calculated from FFY 2008 in keeping with the date the 09-02 memorandum was issued rather than from the FFY 2006 date reported in previous APRs. A review of the monitoring records shows a letter was issued to the program in November 2008 with data identifying noncompliance in this indicator. FFY 2008 data is being amended to include this finding.

# Critical Activities Implemented During This Reporting Period:

- 1. (SPP Activity 1) Develop written monitoring guidelines and procedures for Part C monitoring outlining procedures for implementation, definitions of relevant terms, compliance requirements, and timeline for correction. Distribute guidelines and procedures to all early intervention programs. Procedures will include the provision that any program determined, through state general supervision procedures, to be performing at 95% or above in a specific compliance category will be issued a finding but will not be required to generate a written CAP for that area. The program must correct all individual child noncompliance and continue to work toward 100% compliance or compliance with the State established target, as appropriate. Program performance found to be below 95% will result in a finding of noncompliance and will require a written plan to correct the noncompliance as soon as possible, but in no case, later than one (1) year from identification. Programs will be required to submit interim progress reports as determined by the IDEA Part C Office. *This activity is ongoing.* 
  - A sub-grant was established between the IDEA Part C Office and the ADSD, which has designated responsibility for administrative oversight of the operation of all early intervention programs, with specific language requiring all early intervention programs to comply with IDEA Part C requirements. Concerns related to the performance of any individual program were issued to both the individual program and the ADSD administration by the IDEA Part C Office for collaboration in determining appropriate action to be taken.
  - On-site technical assistance reviews were conducted with all new early intervention programs by the IDEA Part C Office within the first six (6) months of operation.
  - All early intervention programs maintained an internal QA team process to review program data, at a minimum, on a quarterly basis for self-assessment purposes. More frequent reviews were recommended, or required, for areas identified as problematic relative to compliance with IDEA Part C. The program's IDEA Part C Office liaison participated in QA team processes in a technical assistance role.
  - Documentation for the basis of all findings, including a roster of individual child records requiring correction, was maintained by the program, as well as in the IDEA Part C

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Office. The IDEA Part C Office tracked this information as part of the process of verification of correction of the noncompliance.

- 2. (SPP Activity 2) The general supervision system, including program monitoring, will be evaluated on an annual basis to determine what aspects are most effective and where changes may be appropriate. Input will be provided by system stakeholders. *This activity is ongoing.* 
  - The IDEA Part C Office initiated conversations with national technical assistance liaisons regarding a process to review and update the overall monitoring process and procedures. This will also include determining roles and responsibilities between the IDEA Part C Office and the newly developed Quality Assurance Units proposed for the ADSD.
- 3. (SPP Activity 4) The Lead Agency will develop and implement a plan for reorganization of Nevada's system of early intervention services within the Lead Agency. A single line of authority for all components of the early intervention system will be created through the ADSD. This will include integration of the direct service component into ADSD, rather than having system oversight and service delivery components operate through separate Divisions. Director's Office, DHHS, July 1, 2013 – June 30, 2014 – This Activity is Being Modified.
  - In the 2013 Legislative session, the Nevada Legislature, through the budget process, specified the IDEA Part C Office was to be moved from the ADSD and be located in the Director's Office of the DHHS. Technical assistance received from the OSEP State Contact provided clarification that the IDEA Part C Office would be recognized by OSEP as the single line of authority for the State's Part C System. The direct service component of the system was transferred from NSHD to the ADSD by the legislature. DHHS administration continues to develop the specifics regarding the interface between the IDEA Part C Office and the ADSD.

# Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2013 [If applicable]

SPP Activity 4 for this indicator has been modified as follows:

 Effective July 1, 2013, the IDEA Part C Office was transferred from the Aging and Disabilities Services Division (ADSD) to the Director's Office of the Nevada Department of Health and Human Services (DHHS). In accordance with guidance provided by the U.S. Office of Special Education Programs (OSEP) in September 2013, DHHS has established a single line of authority for all components of the early intervention system through the Director's Office for DHHS, IDEA Part C Office. The IDEA Part C Office, as lead agency for the statewide comprehensive system of early intervention services, through the Director's Office, will maintain oversight and general supervision of the system of services and fulfill all requirements for federal and state reporting relative to the early intervention system. Responsible Party: Director's Office, DHHS/IDEA Part C Office, July 1, 2013 – June 30, 2015.

Nevada is continuing all other ongoing activities relative to this indicator as written; no changes are being made for proposed targets, improvement activities, timelines or resources for the remaining activities for this indicator at this time.

# Part C State Annual Performance Report (APR) for FFY 2012

Overview of the Annual Performance Report Development: See Page 1 – Introduction

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

**Indicator 12:** 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)

**Measurement:** Percent = (3.1(a) divided by 3.1) times 100.

FFY	Measurable and Rigorous Target
FFY 2012	100%

### Actual Target Data for FFY 2012:

No due process hearing requests were filed in FFY 2012. Because of the lack of hearing requests, the measurement formula cannot be applied for this indicator.

# Discussion of Improvement Activities <u>and Explanation</u> of Slippage, if the State did not meet its targets that occurred for FFY 2012:

OSEP July 2012 Response to Nevada's FFY 2011 APR:

The State reported that no resolution sessions were held during the reporting period. The State reported fewer than ten resolution sessions held in FFY 2011. The State is not required to provide targets or improvement activities until any fiscal year in which ten or more resolution sessions were held.

There were no resolution sessions held in FFY 2012 due to the lack of due process hearing requests filed in this reporting period. Because no resolution sessions were held in FFY 2012, no explanation of progress or slippage is required.

Nevada Part C follows the Part B Due Process Hearing regulations. Information regarding the process for and resolution procedures are outlined in State Policies for Nevada Early Intervention Services.

# Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2013 [*If applicable*]

Nevada is continuing all ongoing activities relative to this indicator as written; no changes are being made for proposed targets, improvement activities, timelines or resources for the remaining activities for this indicator at this time.

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# Part C State Annual Performance Report (APR) for FFY 2012

Overview of the Annual Performance Report Development: See Page 1 – Introduction

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

**Indicator 13:** Percent of mediations held that resulted in mediation agreements.

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

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

FFY	Measurable and Rigorous Target
FFY 2012	100%

### Actual Target Data for FFY 2012:

No mediation request was submitted during FFY 2012 therefore, no mediation sessions were held during FFY 2012.

# Discussion of Improvement Activities <u>and</u> Explanation of Slippage, if the State did not meet its target that occurred for FFY 2012:

OSEP July 2012 Response to Nevada's FFY 2010 APR :

The State reported that no mediations were held during the reporting period. The State reported fewer than ten mediations held in FFY 2011. The State is not required to provide targets or improvement activities until any fiscal year in which ten or more mediations were held.

Nevada cannot report on progress or slippage for this reporting period. Baseline will be established when there are 10 or more mediation requests.

Nevada Part C has an established system for responding to requests for mediation. A pool of trained mediators is available and funds are set aside each year should a request be submitted. Procedures for requesting mediation are outlined in the Parent Handbook that is given to all families at the time of eligibility determination.

# Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2013 [*If applicable*]

Nevada is continuing all ongoing activities relative to this indicator as written; no changes are being made for proposed targets, improvement activities, timelines or resources for the remaining activities for this indicator at this time.

# Part C State Annual Performance Report (APR) for FFY 2012

Overview of the Annual Performance Report Development: See Page 1 – Introduction

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

**Indicator 14:** State reported data (618 and State Performance Plan and Annual Performance Report) are timely and accurate.

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

**Measurement:** State reported data, including 618 data, State performance plan, and annual performance reports, are:

- a. Submitted on or before due dates (February 1 for child count, including race and ethnicity, settings and November 1 for exiting, personnel, dispute resolution); and
- b. Accurate, including covering the correct year and following the correct measurement.

As stated in the Indicator Measurement Table, States may, but are not required, to report data for this indicator. OSEP will use the Indicator 14 Rubric to calculate the State's data for this indicator. States will have an opportunity to review and respond to OSEP's calculation of the State's data.

FFY	Measurable and Rigorous Target
FFY 2012	100%

# Actual Target Data for FFY 2012:

- a. The IDEA Part C Office submitted 618 data reports Table 1 and 2 by February 1, 2013 and Table 3 and Table 4 on November 1, 2013. The Annual Performance Report (APR) for Federal Fiscal Year (FFY) 2012 was submitted by the due date of February 03, 2014. Utilizing the Scoring Rubric for Indicator 14, Nevada scored **100%** on this indicator.
- b. The IDEA Part C Office has implemented numerous procedures to assure data are valid and reliable as identified in the activities below. Reports have been accurate for the required timeframes and are based on specified measurement requirements. Nevada scored **100%** on this indicator.

# Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for FFY 2012:

Nevada has consistently met its compliance target of 100% for this indicator for the past four (4) reporting periods (FFY 2009 through FFY 2012). Therefore, progress or slippage is not relevant for this reporting period.

In January 2012, the roll-out of the web-based Tracking Resources and Children (TRAC) child data collection system (TRAC) was completed. The IDEA Part C Office has utilized federal funds to support a contractor to support ongoing refinement of the system. The IDEA Part C Office Data Manager has also served in a "help-desk" role to assist providers with technical assistance in utilization of the system for data entry and reporting.

#### Ensuring Data Accuracy:

Following the roll-out of the TRAC system, early intervention service provider programs were required to maintain a combination of both electronic and paper versions of data while functioning of the system was being verified. A contract was maintained with the developers of the revised system and they worked with the IDEA Part C Office Data Manager to ensure functionality of the system. Data accuracy continued to be ensured through key components of the statewide mandated forms and the TRAC data collection system. Key components for ensuring data accuracy include:

- The system design included some data required entry fields; the user can only move forward with data entry if these fields are completed;
- The system utilizes User ID and Password to authenticate access to the database, each User ID is setup with a security level at the time of assignment;
- The application identifies all data changes in a record with a date/time stamp and by the last user to access the record;
- Training on the TRAC system was provided to all service providers initially and continued to be available through the IDEA Part C Office;
- The IDEA Part C Office Data Manager operated a "help-desk" for service providers and maintained a list of issues identified to be resolved with the system developers;
- Data reports continued to be pulled and reviewed, at a minimum, on a quarterly basis. Any errors found are reviewed, researched and sent to the individual program(s) for correction in the database before final data reports are generated.

Given the State has maintained 100% compliance for this indicator for three (3) consecutive reporting periods (FFY 2009 – FFY 2012), it is presumed the State Performance Plan (SPP) activities being implemented are appropriate and effective for ensuring data accuracy and supporting timely reporting. Improvement activities for this indicator will not be reviewed for this reporting period.

# Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2013 [If applicable]

Nevada is continuing all ongoing activities for this indicator as written; no changes are being made for proposed targets, improvement activities, timelines or resources for this indicator at this time.