



DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIRECTOR'S OFFICE

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MEETING AGENDA

Name of Organization: Nevada Early Intervention Interagency Coordinating Council (ICC)

Date and Time of Meeting: April 28, 2022, 10:00 a.m.

To attend via video conference, use the link:

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To Attend in Person: 1000 E. William St., Suite 105, Carson City, NV 89701

AGENDA

I. Call to Order and Welcome

Sherry Waugh, Co-chair

II. Public Comment *(No action may be taken on a matter raised under this item of the agenda until the matter itself has been specifically included on an agenda as an item upon which action will be taken.)*

III. Approval of the Minutes from the January 11, 2022, Meeting (For Possible Action)

Sherry Waugh, Co-chair

IV. Discuss, Nominate and Approve New Nevada Early Intervention Interagency Coordinating Council (ICC) Parent Representative Co-Chair (For Possible Action)

Sherry Waugh, Co-chair

- V. **Nevada Early Hearing Detection and Intervention (EHDI) Program Processes and Outcomes**
Perry Smith, Program Coordinator, Early Hearing Detection and Intervention Program
- VI. **ICC Subcommittees – Review and discuss current activities**
- i. Family Support Resource Subcommittee
Mary Garrison, IDEA Part C Office
 - ii. Child Find Subcommittee
 - a. Minutes from December 16, 2021, meeting
Sherry Waugh, Subcommittee Chair
 - iii. Equity Subcommittee
Andre' Haynes, Subcommittee co-chair
Abbie Chalupnik, Subcommittee co-chair
- VII. **Aging and Disability Services Division Updates**
- i. Early Intervention Updates
Rique Robb, Deputy Administrator, Aging and Disability Services Division
 - ii. Update on Early Intervention Comprehensive Data System Request for Proposal
Jeff Haag, Deputy Administrator, Aging and Disability Services Division
 - iii. Early Intervention Program Highlights (Information Only)
Mary Garrison, IDEA Part C Office
- VIII. **Nevada Early Intervention Services System Study Update from Health Management Analysts**
Stephen Pawlowski, Managing Director, Burns and Associates
- IX. **IDEA Part C Information and Reports:**
- i. Update on the Nevada Pyramid Model Implementation
 - National Training Institute on Effective Practices Annual National Conference 2022
 - The Pyramid Consortium eModules
 - ii. Update on Division of Early Childhood (DEC) 38th Annual International Conference on Young Children with Special Needs and Their Families
 - iii. Update on Association for Education and Rehabilitation of the Blind and Visually Impaired (AER) 2022 International Conference
 - iv. Complaint Matrix
 - v. Yellow Bar Report for State Fiscal Year 2022
 - vi. Delayed Services Report
 - vii. Regional CAPTA Referrals
 - viii. Update on District Transition Concerns
 - ix. 2021 Family Survey Comments
 - x. 2022 Family Survey Preliminary Results
 - xi. Federal Updates-Annual Performance Report (APR), State Systemic Improvement Plan (SSIP), Supplemental IDEA Funds Made Available by the American Rescue Plan
 - xii. Program Monitoring Updates
IDEA Part C Office Staff
- X. **Consider Agenda Items for the Next Meeting (For Possible Action)**
Sherry Waugh, Co-chair

XI. Schedule Future Meetings (For Possible Action)

- i. Discuss Potential Face to Face ICC Meeting
 - ii. Schedule October and January Meetings
 1. Week of October 17-21, 2022
 2. January 19-20, 23-25, 2023
- Sherry Waugh, Co-chair*

XII. Public Comment *(No action may be taken on a matter raised under this item of the agenda until the matter itself has been specifically included on an agenda as an item upon which action will be taken.)*

XIII. Adjournment

Sherry Waugh, Co-chair

NOTE: Items may be considered out of order. The public body may combine two or more agenda items for consideration. The public body may remove an item from the agenda or delay discussion relating to an item on the agenda at any time. The public body may place reasonable restrictions on the time, place, and manner of public comments but may not restrict comments based upon viewpoint.

Parking fees may apply at meeting locations. Please check the websites of the specific locations to determine if permits are required and for prevailing rates.

We are pleased to make reasonable accommodations for members of the public who have disabilities and wish to attend the meeting. If special arrangements for the meeting are necessary, please notify Mary Garrison at (775) 687-0508 as soon as possible and at least two days in advance of the meeting. If you wish, you may e-mail me at mgarrison@dhhs.nv.gov.

Agenda Posted at the Following Locations:

- Aging and Disability Services Division, Carson City Office, 3416 Goni Road, Ste D-132, Carson City
- Aging and Disability Services Division, Reno Office, 9670 Gateway Drive, Ste 200, Reno
- Advanced Pediatric Therapies, 1625 E. Prater Way Ste 107, Sparks
- Clark County Public Library, 1401 E. Flamingo, Las Vegas
- Desert Resource Center, 1391 S. Jones Blvd., Las Vegas
- Capability Health and Human Services-South, 7281 W Charleston Blvd., Las Vegas
- Elko County Public Library, 720 Court, Elko
- IDEA Part C Office, 1000 E William St, Ste 105, Carson City
- IDEA Part C Office, 4220 South Maryland Parkway, Building A, Ste 121, Las Vegas
- Northeastern Nevada Early Intervention Services, 1020 Ruby Vista Drive, Ste 102, Elko
- Northwestern Nevada Early Intervention Services, 3427 Goni Road, Ste 104, Carson City
- Northwestern Nevada Early Intervention Services, 2667 Enterprise Rd., Reno
- Nevada PEP, 7211 W. Charleston Blvd, Las Vegas
- Nevada Disabilities Advocacy Law Ctr., 1865 Plumas St., #2, Reno
- Positively Kids, 2480 E Tompkins Ave #222, Las Vegas NV
- Southern Nevada Early Intervention Services, 1161 S. Valley View Blvd., Las Vegas
- State of Nevada, Department of Education, 700 E. 5th St., Carson City
- Therapy Management Group, 6600 W. Charleston Blvd. #111, Las Vegas
- The Continuum, 3700 Grant Drive, Ste A, Reno
- UNR/NCED, University of Nevada, Reno
- Downtown Reno Library, 301 S. Center, Reno
- In addition, the agenda was mailed to groups and individuals as requested, posted at Nevada Early Intervention Services Programs and on the Web at <https://notice.nv.gov/>, <http://adsd.nv.gov/>, and <http://dhhs.nv.gov/Programs/IDEA/ICC/Meetings/>

- ***If A Member of The Public Wishes To Obtain Supporting Materials For The Meeting Please Contact Mary Garrison:***
E: MGarrison@dhhs.nv.gov P: 775-687-0508



DRAFT MEETING MINUTES

Name of Organization: Nevada Early Intervention Interagency Coordinating Council (ICC)

Date and Time of Meeting: Tuesday, January 11, 2022
10:00 AM

DRAFT MINUTES

I. **Call to Order, Roll Call, Announcements and Introductions:**

Co-chair Shery Waugh welcomed the council and called the meeting to order at 10:02 a.m.

Members Present: Dawn Brooks, Andre' Haynes, Kellie Hess, Sarah Horsman-Ploeger, Robin Kincaid, Sandra LaPalm, Janice Lee, Catherine Nielsen, Kate Osti, Cathleen Rexing, Karen Shaw, Sherry Waugh, Dr. Jenna Weglarz-Ward

Members Absent: Valeria Gundersen, Kristin Hoxie, Lisa Hunt, Rhonda Lawrence, Crystal Johnson, Keana Sullivan

- II. **Public Attendees:** Christa Allan, Therapy Management Group (TMG); Robert Burns, Therapy Management Group (TMG); Lea Case, Public; David Cassetty, Department of Insurance (DOI); Abbie Chalupnik, Aging and Disability Services (ADSD); Cheryl Dinnell, Nevada Lifespan Respite Care Coalition; Dr. Tiffany Tyler-Garner, Children's Advocacy Alliance; Sabrina Jones, Capability Health and Human Services (CHHS); Marnie Lancz, TMG; Fran Maldonado, Department of Child and Family Services; Yvonne Moore, Positively Kids; Julie Ortiz, Advanced Pediatric Therapies (APT); Margaret Paoli, ADSD; Monique Robinson, MDDA; Jessica Roew, NEIS; Dominique Seck, Department of Health and Human Services; Brittany Toth, Public

Part C Office Staff Present: Shari Fyfe, Mary Garrison, Lori Ann Malina-Lovell, Jalin McSwyne, Iandia Morgan, Melissa Slayden

III. **Public Comment:**

Dr. Tiffany Tyler-Garner from the Children's Advocacy Alliance thanked the Interagency Coordinating Council for their commitment to serving young Nevadans and looked forward to the great work ahead.

IV. **Approval of the Minutes from the October 21, 2021 Meeting (Attachment Included)
(For Possible Action):**

Sherry Waugh requested the council to review the minutes from October 21, 2022 and provide any edits or approval. Edits that were requested were; remove Melissa Slayden as a Part C staff attendee, remove Catherine Nielsen as an absent attendee as she was not appointed to the council until after the January 2022 meeting. Robin Kincaid asked about agenda items that were requested during the last meeting, but are not listed on today's agenda. Ms. Garrison explained that some items were moved to the April agenda as the majority of today's agenda needed to pertain to the

Annual Performance Review. Ms. Garrison also stated she would include the items moved in future minutes. Ms. Kincaid asked specifically about the family survey results, which she hoped we could see in January. Melissa Slayden explained that the family survey responses are part of the Annual Performance Review, which would be discussed in today's meeting. Ms. Slayden asked if Robin meant specific responses from the survey, or cumulative data. Ms. Kincaid and Ms. Waugh indicated the ICC typically received both in the past. Lori Ann Malina-Lovell explained that the specific responses were provided as a courtesy by the previous data manager, but since her passing the Part C office has had to prioritize data based on federal requirements. Ms. Malina-Lovell advised the council that the Part C office will discuss providing that report again. Janice Lee advised that Cathleen Rexing has a misspelling in her name on the October minutes. Karen Shaw stated that she is listed as a public attendee, but she is the Native American representative on the ICC. Ms. Garrison stated that prior to today's meeting, she had not seen the reappointment notice for Ms. Shaw, but would work with Karen and the administrator that handles reappointments after today's meeting. Ms. Garrison asked if there were any more edits to the October minutes.

MOTION: Approve the minutes from October 21, 2021 with edits noted.

By: Cathleen Rexing

Second: Dawn Brooks

VOTE: Passed

V. New Member Biographies:

a. Catherine Nielsen, Nevada Developmental Disabilities Council

Mrs. Catherine Nielsen is a mom of three and one of her children has a disability (kidney disease). Catherine and her husband have pretty severe epilepsy. Also, Catherine is deaf in her left ear and she utilizes a hearing aid in her right ear. Catherine was born and raised in Nevada and is currently the executive director of the Nevada Governor's Council on developmental disabilities, so while she is serving in a professional role she also has personal experience. Please feel free to contact Catherine if you need anything, she is very excited to assist the ICC.

b. Cathleen Rexing, Nevada Department of Education

Ms. Cathleen Rexing is a mother and is new to the Nevada Department of Education, but has a background in education. Ms. Rexing has worked as a special education aid, and has spent the last 15 years teaching in Clark County, Nevada. Ms. Rexing is very happy to be on the ICC.

VI. Nevada Lifespan Respite Care Coalition

The ICC may know Ms. Dinnell's husband, Dan who recently retired from the Part C Office. Ms. Dinnell is the executive director for the Nevada Lifespan Respite Care Coalition (NLRCC), and the coalition transitioned last year into a public body like the ICC. The NLRCC will be working on issues surrounding caregiving and caregiver supports training, respite is the number one request that family caregivers make for themselves, respite if you don't know means a short term temporary break from providing care meant to be used for the self-care of the caregivers. Respite provides family caregivers the freedom to enjoy their interests and activities and receive support and encouragement to help friends and colleagues outside of caregiving and to preserve the quality of their own daily lives and enhance their overall family. Loved ones usually get better care from their caregivers when they have some balance in their lives and so many individuals with disabilities or special healthcare needs have a primary caregiver who supports without any special training, compensation, or support. Family care givers are really part of the long term social service system. The pandemic has shown that these caregivers are an essential support that have been taken for granted and left standing alone. Due to Covid, the demands and pressure experienced brought caregivers to their breaking points. Ms. Dinnell wanted to take this opportunity to introduce herself and to inform the ICC of the coalitions interest in your work and to share the coalitions goals as we move forward. Ms. Dinnell hopes that the ICC will agree that support for caregivers will positively influence the long term support that infants and young children with

disabilities receive. Ms. Dinnell hopes to learn more about what your families and the caregivers go through. The NLRCC has been charged with finding out what families and caregivers need and how well we as a state are doing to provide support for those needs. Early Intervention services was designed to serve families so I hope the ICC has some information on your family caregivers and their families, Cheryl stated. Unfortunately our long term and social services system of the programs focus more on the challenges of providing services to the Individual and may have made assumptions about the primary caregivers ability to provide care indefinitely without ever asking what caregivers need themselves. This is kind of a blind spot that the state has in Nevada. Ms. Dinnell has had a chance to review the family survey report. I know you're trying to help families to be able to better support and help their children's emotional skills and overall development. Ms. Dinnell hopes that the NLRCC and the state can find some areas where our priorities have common ground. Ms. Dinnell has some questions for the ICC and is hoping to learn or have a conversation with the leadership about it

1. How does the systems and services of the ICC address things like helping family caregivers asses their abilities and circumstances?
2. Do caregivers have the skills and the knowledge they need to provide care?
3. How much are caregivers aware of the trade off's or sacrifices that they are going to have to make in order to provide care in their caregiving role?
4. How do we help them make good decisions about those tradeoffs?
5. Have we given them any safety valves to reduce the pressure that they feel and are we providing suggestions to make respite services more attainable?

Ms. Dinnell hopes that NLRCC can help the ICC in getting more information on your family caregivers. Mary has Ms. Dinnell's contact information for anyone interested in getting in contact.

VII. Aging and Disability Services Division (ADSD) Early Intervention Services Update

ADSD gave an update regarding the updated re-entry plan. The IDEA Part C office worked collaboratively with Quality Assurance (QA) and ADSD to release. The new re-entry plan indicates that we can continue face to face visits in community settings such as daycare's and libraries as well as being able to allow more than one Early Intervention professional in a room with families. This was released in November however we are re-evaluating our phases right now due to the current surge in Covid cases.

Additional information is included in the next agenda item.

VIII. Review, Discuss, and Approve the State Performance Plan (SPP)/Annual Performance Report (APR) that is due to the Office of Special Education Programs (OSEP) February 1, 2022; ICC APR for Submission to Governor's Office (For Possible Action):

Ms. Malina Lovell wanted to thank the ADSD team and QA team for all of their help. Phase 3.5 should be implemented any moment now and it is expected to occur today so we can say that in part to Robins question that 100% of children in early intervention services at least for the remainder of this month are expected to be accessing services through telehealth and/or telephone consultation and in clinic visits. That would be the extent of the settings that would be permitted during this pause and that has been under stringent review. Our Department of Health and Human Services, state leadership team, and our Part C Office guidance is under general view so we look forward to having more updates and to collaborate with ADSD. Hybrid services encompasses visits via telehealth and in person so we look forward to sharing and we do hope and pray that the cases of Covid decrease because it certainly is taking a toll. More about that will be discussed when we are talking about the APR. As you may recall we were provided a grant and that was the American Rescue Plan or ARP. The grant was brought into our authority this past fall and we have designated just a little over \$200,000 toward a system study that would be a comprehensive look at how our system is running and how we can have continuous improvement. One of the key areas of the system study includes rates but we are also looking at many other components such as how we can improve in areas of professional

development, in technical assistance, and how we may improve in ensuring we have access to services. So we look forward to sharing that system study report with you all when that is available this spring perhaps in May. The information has been conducted by a contractor and they are Health Management Associates (HMA) and we completed our work order which in part contains the scope of work for our vendor, Health Management Associates (HMA) and which also includes the proposal so that it is available for public access. If anyone would like to see that you may make a request to the Part C Office but we could also make that available for the ICC to review in the future. I think what will be really interesting to see will be the completed report. Not only will the report benefit our system with continuous improvement planning and implementation but will also be informative pieces that will help ADSD with their budget contacts.

Sara Horsman-Ploeger stated that they are looking forward to seeing the results of the system study. Once that is reviewed then we will be able to share the study with the ICC. We will look at our results such as what would be a fair rate for everyone to be paid per child and would like to expand services in different regions. Currently, right now there has been a little delay in purchasing but we are in the process of adding vendors so we should have information in spring or summer but it is moving forward and we are looking forward to getting that. It has been about ten (10) plus years since the last system study, so we are looking forward to the update especially given the changes in our service delivery.

Ms. Malina Lovell wanted to clarify the vendor for the system study, they are contractors, Health Management Associates (HMA) and the name of the individual who is the lead for that project is Stephen Pulaski. We had a brief kick off meeting with Steven and his associates in December. Early intervention programs throughout the state will be learning about HMA. Since everyone will be involved, HMA wants to reach out to our programs and inquire an accurate information perspective as they create the system study. Ms. Malina Lovell mentioned that tomorrow, Wednesday, January 12, 2022, is the Part C office's monthly technical assistance (TA) call.

Ms. Garrison informed the ICC that they have a question from Ms. Kincaid who asked can we make sure that any vendor that you might select for this analysis are very familiar with ADSD and regulations for Part C? Ms. Garrison doesn't know if the ICC wants to address it right now but Ms. Garrison has documented to request that Steven and his team address the council during the April meeting and provide an update on their expertise and where they are at with the study. Ms. Kincaid also asked if our community partners like NVPEP have an opportunity to contribute to the system study?

Ms. Malina Lovell answered Ms. Kincaid's first question making sure that anyone doing an analysis is very familiar with IDEA regulations, and yes HMA was analyzed by ADSD colleagues prior to developing our work order. Actually, HMA had an existing master service agreement or MSA with our state and they do have experience with IDEA in other states and have done system studies with other states. I would be happy to share with you all the HMA proposal which was instrumental in developing the scope of work for the work order so you all can see they have a little biography on their proposal.

Shari Fyfe mentioned that sharing the proposal and scope of work with the group would be helpful so the ICC can have a little better sense of what to expect. Ms. Malina-Lovell stated that in April we will share any information we have to keep you informed and I should say that HMA will be working through the month of April to conduct the system study so we won't have the report. I'm expecting the report likely in May or shortly after, but I would expect that by the July ICC meeting we would have that record for everyone and I am very excited because it's continuous program improvement that way we're rooting for everybody. Before Ms. Malina Lovell moves onto the next question she wanted to also see if ADSD would like to talk a little bit about the data system project. A new system has been needed for years now and Ms. Horsman-Ploeger was mentioning that in the spring ADSD is heading up a panel that will look at the vendors and everyone's perspectives, not just parts of office but also state programs and community partners. They were encompassing urban,, small towns and the rural and frontier perspective and so we will have more to share

with you. The ADSD team will have more info about that but the Part C Office is funding that with our APR grant. The ADSD team, which includes Ms. Rique Robb and Mr. Jeffrey Haag, are the project co-sponsors and you will hear more about that in April.

Ms. Horsman-Ploeger addressed Ms. Kincaid question regarding community partners input, stating to my knowledge Mr. Pulaski from HMA has requested to meet with the direct service 12 provider programs. The managers and the employees that work with the vision specialists and their supervisors in management and my oversight Mr. Haag are planning to meet this week. I will ask to reach out to our community partners and our council and those we collaborate with. I can see that they would be great value in the system study with additional feedback. We can also expand the highlights to include updates to your interest. I will need advising from those of you on the ICC and Ms. Garrison because I'm not sure how updates work in between our quarterly meetings, for example is it permissible per open meeting law that we are sending information to you and are we allowed to gather feedback from you to share with those on the system study?

Ms. Garrison replied that yes, we can send those out via email. I would just have to blind copy everybody so that there is not a continuation of the discussion as a counsel through email. We must be very mindful of that discussion among yourselves.

Melissa Slayden mentioned that Ms. Fyfe and her were also part of the data system project a few years ago. So I would say that much of that work is salvageable and I would agree but looking at the system as a whole in a multidisciplinary way will be extremely effective to make sure that we meet the needs of all of our reporting requirements.

Ms. Malina Lovell wanted to thank the program managers for sending in their program highlights for this past quarter. We really appreciate it and I do encourage everyone to take a moment to look those over for the exciting and very important work impacting the lives of many little ones and their families. As Cheryl had mentioned earlier to keep an eye on caregivers. We're looking at the whole picture of children and families and what their days look like and what their challenges are for our state performance plan and your performance report at this time but also touching on some of those critical issues as you're wrapping up reviewing those program highlights and transitioning into a draft of our APR. We have completed a majority of the indicators required at the federal level and those are as you will see include indicators one (1), two (2), four (4), five (5), six (6), seven (7), nine (9), and ten (10). Leaving the remaining incomplete indicator, but still in process, indicators three (3), eight (8), and 11. We are ahead of schedule for our reporting draft which is due on February 1, 2022, at the Office of Special Education Programs (OSEP), as it is due annually. Usually at this time of the year we are not this far along and it is not usually until late January that we have a complete draft for the ICC to review, however we scheduled the ICC meeting for the first half of January several months ago in anticipation that we would have the draft complete for you. With unforeseen events that have happened recently we are still ahead of schedule for the February 1, 2022 deadline, but we do not have that completed draft today. We will have that completed in the latter part of this month. Ms. Malina-Lovell is following up the review of this and would really like to ask the ICC for yet another meeting later this month which would be a much shorter meeting to review any remaining part of the APR. The ICC's role in reviewing our APR is to ensure that you are reviewing our data is accurate and completing the certification form and notification form with our APR data and information over the APR. OSEP requires that certification of all 50 states and territories participating. We would like to propose that there be a short meeting to review and send our completed remaining indicators to you by January 25, 2022. Then we will meet with you all on January 27, 2022, and as we think about these things we will discuss this more toward the end of this review but another thing to consider is if your schedules are impacted for that last week of January and if you are anticipating some challenges in meeting quorum. You can consider having a smaller work group that could meet together to do that review and certify on your behalf and that was a suggestion that was brought up by my team to present. We could all meet together again on January 27, or you could decide if you would like a small group that would meet and approve on your behalf. No decision for that needs to be made right at this

moment I just wanted to provide that discussion for you and then circle back to that all right as we go into this.

Ms. Malina-Lovell stated, as you all know Covid-19 continues to have an impact for the entire year. But in recent weeks I've had numerous challenges as our office but also early intervention programs. It is causing challenges for the remaining data we need for indicators three (3), eight (8), and 11. Some of the challenges in addition to the Covid-19 pandemic include what Ms. Waugh mentioned earlier about Omicron exposure and the need for testing and quarantine in our own offices in the south and north. Also, in our early intervention programs both state and community partners have reported increased incidence of exposure and quarantine that leaves staff with limited time and access to what needs to be done. That being said we are very grateful that we are ahead of schedule with a majority of the indicators done by this point in time. Before January, other incidents which occurred recently were inclement weather occurring in Carson City and Reno which resulted in the closure of passes into Carson City and resulted in food shortages occurring in Carson City and Reno which has taken a toll on those direct service providers for families. Keeping all these things in mind we definitely want to move forward with that and not just a spirit of grace but also with a realistic perspective that we need to operationalize flexibility. Also, as we provide services for children with disabilities and their families our state and programs are not defaulted or missing timeframes that were caused due to the disease outbreak of Covid-19. As we go through this I won't read every line for you but you will see considerable mention about Covid-19 throughout the report. This was something that OSEP required previously and in last years report they had mentioned and emphasized very heavily to us that they wanted to see documentation about how specifically Covid-19 impacted our data accuracy, services, and so on. The timeframe for the APR is July 1, 2020 through June 30, 2021. We will be going through the indicators but you can see here that we did not meet the target for indicators one (1), four (4), five (5), and seven (7).

Ms. Kincaid asked for the definition of slippage, which is the loss of more than one percent (1%) from your data work for the year before for each indicator. Some of those indicators it gets interesting, like with child find because those are in the single digit percentages so if we had slippage in one of those that would be a super big deal.

Ms. Malina-Lovell mentioned that we will be going to Ms. Slayden for just about every indicator because she is going to review with you and circle back to the feedback that you all provided to us in October and November. So as you recall it was required of all the states and territories to do a target setting in this requirement every five (5) to six (6) years and here we are with the next five (5) years. You were generous to give us your time in October. In the last quarter you reviewed the process with us to look at our data system frameworks. We're now reviewing targets for indicators and then again many of you attended our public stakeholder meeting on November 15, 2022.

Ms. Slayden mentioned that for Indicator one (1) there's no target because it's just at 100% all the time. This is one of those goals we want every child to receive their services in a timely manner to get what they need. We did not change our baseline data. 61.9% of children in 2005 were receiving their services in a timely manner and so we have definitely grown in the last 17 years. This is from monitoring, 111 children received their services in a timely manner out of 121 there are seven (7) additional children who would have documented delays which are attributed to family circumstances. That will be added to the 111, so it would be 118/121 giving us 97.52%. We did not meet that target, but because we went down to two (2) hundredths of a percent there was also no slippage. If we had been at 96.52% we would have had slippage and would have also had to describe that in the narrative here.

Ms. Malina Lovell mentioned that for those who are new to our system and our reporting which is required at the federal level for the Office of Special Education Programs, in almost every indicator you will see these questions. They are a little different for some indicators such as the method used to select early intervention system programs for monitoring. You can see how we select programs and because of our limited staff and

the small size of our office what we do is monitor all programs but in alternating years for some pieces of reporting. All programs are monitored annually or in pieces such as professional development, but for other areas we monitor them in alternate years. Because we have 12 programs we will split those up and in one year monitor six (6) of those programs for their official child records, and then in the next year we will monitor the other six (6) programs. That is called comprehensive monitoring, however in years past we had done on-site monitoring where we were just afforded that wonderful allowance of visiting a program and stepping foot onto their site, meeting with their staff in person, sitting with them and going through the records, and having recap meetings with them. We would do that typically over a few days of time so our team would travel to the north or south. Since 2020 we had to do virtual monitoring due to the pandemic and social distancing and just concerns for overall safety and health. Virtual monitoring also continued into 2021 and we are anticipating that we will be doing that same method of monitoring for this year and so you may read more on your own time regarding that process of comprehensive monitoring which is there further below and in the following paragraphs. I just wanted to touch on that other types of monitoring which you will see in other indicators may include a desk audit from our TRAC data system. Our current data system is called TRAC for those of you who may not know, TRAC stands for Tracking Resources and Children and that is our data system which is in use for the foreseeable future until our data system project is actualized. We had touched on that regarding the ARP funds going towards that new system. We do anticipate that with the new data system in a year or year and a half, we will be in better shape in completing these reports even more efficiently for you all. For OSEP you will see that there were findings of noncompliance in the system and that those were verified as corrected and so part of monitoring does entail letting programs know when there is something that is out of sorts and something is not lining up. What that leads to is often corrections and it's a great collaborative process where programs have the opportunity to learn course correction and align their practices or their policies with IDEA regulations and so we don't have any concerns as both of the findings as reported were corrected within one (1) year. That one (1) year of time is required by OSEP but what we are typically finding among our early intervention programs is that they are attempting to correct as soon as possible. Programs do not like having some findings hanging over them and so they do a great job of correcting as soon as they can to the extent possible for them and then corrections as you will read on. Corrections may entail work that is done at an individual level where maybe there was something amiss in a child record that needed to be updated or something that needed to be performed with the family. Whether that was some additional paperwork or something that was owed to the family such as a makeup or a corrections can also arise to what we call a systemic level and that may be where our program needs to do a correction that involves a change or an update to their process or procedures so that the error is not going to occur across other cases and their program. Sometimes those corrections at the systemic level may include trainings or professional development for the staff meetings to apprise them of what's going on in the system such as new covid re-entry phase planning implementation. We've had a lot of meetings over this last year and a half regarding that systemic corrections could also intel our office coming back to do another review where we are checking to see that programs are within compliance. For those of you who are new to our system we hope that you will feel informed and that you are learning more about early intervention. You may have questions and so please do feel free to reach out to us or even ask them here because we really want to help everyone feel included and informed when it comes to anything about our early intervention system, at this time specifically for federal reporting and we are ready to go on to indicator two (2).

Indicator two (2) is regarding services in natural environments, and I know that as I share about this many of you already know what natural environments are but in case there may be some on the call who are not aware natural environments in the world of early intervention refers to those environments where children with disabilities may receive their services and supports in an environment such that children who are typically developing would be present. Those are typically known as the home or a community based settings such as childcare, daycare, preschool, library, community centers, the park or wherever children who are typically developing would be and so that is a federal regulation that children receiving early intervention in the natural environment. There are exceptions to this federal regulation and they are very rare but they do include that for the state of Nevada, audiology services are based on the nature of the service requiring an

audio visit to an audio room with an audiologist. So that is one of the rare exceptions to this and then during this time of Covid-19 disease outbreak, OSEP has allowed for alternative service options. Those alternative service options do include the clinic in Nevada. Face to face encounters in an in-clinic visits are meant to be as a one time occurrence and not something that's happening in a perpetual frequency so really they would be something that a family could access once, possibly twice, but really once for a service such as physical therapy, occupational therapy or feeding or nutrition or even vision where the family and the early interventionists need to be face to face so that there may be hands on intervention occurring or and that direct observation is really right there in the proximity of the family and necessary for ongoing strategies to implement the families Individualized Family Service Plan or IFSP. Other than that, during this time of the pandemic we are having services via telehealth and telephone consultation and you may not think that those are natural environments but they do fall under the area of natural environments because the origin of the visit is occurring with the child and the family in their home or wherever they are. It may be the grandparents home or they may be out at a restaurant or somewhere where other families or other children who are typically developing would be present. So the methods of telehealth and telephone consultation or intervention may be considered as part of the natural environment and would meet requirements for this indicator. At this time here we are with the lovely targets for the next several years and I'm going to ask Ms. Slayden to present those to you.

Ms. Slayden addressed the council, the indicator for natural environments you're at the baseline again set in 2005 at a 98.5%. Nevada was doing well historically in this indicator. This is the indicator where OSEP has indicated that as long as your target is over the 96.5% then you should be in good shape. Our technical assistance last year also informed us that we had to increase our target on this one because we hadn't increased it in so long. The 97.5% last year when we set that target it seemed like a good goal. But it was also low hanging so when we did our stakeholder target setting work in the fall last year and what we heard from the stakeholders is that they want to show that we have rigor in our targets but that we are not undercutting ourselves either. We are giving ourselves targets that are achievable but that we may need to move the needle on. So with this after we had done our discussions with some forecasting and the final result being the 99.27%. This goal needs to be at least 96.5% so we could have left it at 97.5 for the rest of the time, but I think that would not have been rigorous enough. What I have done here with the forecasting is we took it out to 99.27%, then 97.5%. I divided those across those six (6) years so that we could achieve that higher standard. At the end of 6 years the target that we have for 2020, 2021, 2022, and 2023 are under the goals that have been achieved in the past and if we get to a point in the next few years where we feel like a 99.27 is too high for our state or we find somewhere where we feel like we are pushing pretty well we can increase. Those are things that we can examine later, I know that the real conversation about setting these targets was about rigor so I think the Part C office would like to know what you think of the federal fiscal year (FFY) 2020 through FFY 2025 target. What are your thoughts, have we achieved the goal we were set out?

Ms. Malina Lovell shared that this is based on input from all of you this past October and November, and we are also including today's date. This is the data from FFY 2020 targets for the number of infants and toddlers with IFSP's who primarily received early intervention services in the home or community based settings. The target was 97.79% and our data was 99.93% with our state meeting the target with no slippage occurring so we want to say a big hurrah to all of our early intervention programs from all of their leadership and all of their direct service providers and the staff supporting them. This is huge and so while we didn't meet the targets for some of the indicators as we mentioned earlier, this one we did meet and now you are in compliance with IDEA and supporting families the best you can while they are in their natural environment.

Ms. Malina Lovell mentioned that Covid is impacting on so many fronts from the little ones and their families and their caregivers but our workforce has been facing such critical staff shortages we're seeing some leave the field that are experiencing extreme workplace fatigue or burnout as they try to juggle their professional load while also caring for their own families and often time are neglecting themselves. So that is something that we aimed to support through our monthly TA calls is encouragement for self-care or those in our system

with regard to returning to the homes. That is something that we keep on the horizon as we collaborate with the ADSD and the ADSD quality assurance team. It was sad that we moved back into a pause because phase 3.5 which put visits back in the home and in the community had just started on December 1st and here we are a little over a month later having to pause due to the significant increase in exposure across the state. It is unfortunate but we do have those phase 3.5 plans ready to resume when we get that go ahead from the authorities in place to do that and that would be our Department of Health and Human Services leadership and physicians.

Nevada's ARP funds or American Rescue Plan funds have gone through allocation and we have provided that report publicly for all of you. We did include stakeholder engagement for the use of those funds we had gathered survey responses and also discussed during our ICC meeting. As we determined the best way to utilize those funds for the greatest impact not just for this year but for the future of the early intervention system to be sustainable and to provide quality supports and services for generations to come. We decided that the best use would be in those three (3) main areas and so I'll refer to it again to Ms. Garrison or Mr. McSwyne if you wouldn't mind helping me place into the chat that link to our Part C website. On the first page of our website you will see a link to our ARP grant materials. We submitted the ARP grant materials to OSEP, again completed with stakeholder feedback, and the 3 main sections for the ARP allocations included as we have mentioned the data system project which is the largest chunk of that 1.8 millions dollars at approximately 1.475 million dollar allocation towards the data system project to ensure that we are meeting the needs of all early intervention programs. Another allocation in the ARP fund includes, as we had mentioned earlier, the system study or continuous program improvement. This is a comprehensive study in which approximately \$206,000 - \$207,000 is allocated. The remaining balance of approximately \$175,000 is allocated to professional development to better the workforce that is providing services to the families. We believe this budget will have far reaching impact as providers are better prepared, better informed, and knowledgeable of the most recent evidence base practices to support children to progress in their optimal development. We are not using the funds at this time to provide a retention bonus, although I wish we could. I wish we could have provided funds to everyone of our 12 programs, and some of these decisions really were made at levels higher than mine, so if you have any more direct or specific questions that may require detail at a higher level. I'm happy to pass along your questions to our leadership. Professional development is a form of retention and the professional development we aim to provide would be at no cost to the staff and we're faced with completing licensure requirements to allow them to continue working in their professional roles in our system and those ongoing continuing education units that they must obtain to maintain their licensure gets pretty hefty. They do add up, and so we aim to provide professional development at no cost to those individuals so that they can continue to keep their licenses current and benefit from those trainings or webinars. Pretty soon some eModules will also be available, which we are going to be covering with our ARP funds for the benefit of all direct service providers in our system. So in a sense I would say that really aligns with retention.

We are approaching indicator three (3), which we would like to ask your patience for since we are still waiting on some data from several programs. We are needing to verify corrections on data regarding child outcomes summaries. This data is linked to indicator 11 which is our state systemic improvement plan and the child outcomes summaries is also the indicator data for indicator 11 for our state identified measurable result or SIMR. That indicator is going to be showing the percentage of children who make progress in their developmental skills and those skills range from social emotional development to using knowledge and skills or to acquiring skills. We will have more for you on that in the latter half of this month as well as when we meet again. We are excited about indicator three (3) by the way because as I mentioned, it informs indicator 11 and it shows the impact which our Pyramid Model activities have had upon the children and families in our state. More to come on that. We may move on to indicator four (4) at this time, which is family involvement. We will be looking here at some percentages and three (3) of those percentages are, A. the percent of families participating in Part C report that early intervention services have helped their families to know their rights, and B. effectively communicate their children needs, and C. help their children develop and

learn. This section, along with all of the other sections, were completed by our hard working Part C liaison's. I just want to give a shout out to them and thank them for all of their hard work and that's Ms. India Morgan, Ms. Shari Fyfe, and Ms. Edythe King working very diligently to complete these sections for us.

Ms. Slayden explained the data for an indicator to the ICC. These data points come from the family survey in which our baseline targets for A, B, and C were set in 2006. The baseline being 94.29%, 91.32%, and then C is showing below these.

Ms. Slayden followed the trend of yearly growth but what happened was that she reduced the amount of growth so rather than a 0.5% increase every year or every other year. For some years we stayed the same. Some I added 0.25% to each target and for these three (3) sections of the indicator, knowing your rights, effectively communication, and helping the child learn, I am leaving us in 2025 with 99%, 98% and 96%. There are two (2) things I would like to address here, one (1) was earlier when Ms. Kincaid had asked about slippage and I have answered that Ms. Waugh clarified that if the target is less than 10% then it's a 0.1% drop that would indicate slippage. If its above a 10% indicator target then the loss of 1% would be slippage. If we find that our indicator targets are too much for our system or if they're not rigorous enough we can revisit these and reset these targets throughout that 2025 reporting period. Indicator four (4), these are the three (3) pieces of data that we collect from the family survey. In the spring of 2021 we were able to distribute surveys to 1559 families and we received 293 responses back both on hard copy and through survey monkey. That survey response rate that you see there is 18.79% which is more than double what the response rate was the year prior. We'll see in just a second whether any of these went down or came up. We were just really happy to finally get an appropriate response rate from nearly 20% of the families that had received 6 months of services by the time the survey went out last year and here we are so this will display the data from the year before the target that we have set for ourselves this year. The target set for this year is 97.75%, we've added that 0.25% to the target goal. 97.24% would not have met the previous year's target so I felt like it was appropriate to continue that trend of growth that we were expecting and we can change that. We did have more than a 1% drop for the reported data in the responses and positive responses and so we do have slippage at 1.08% for B. Following that target increase of 0.25% which is the target for this year is more than 2% over the previous years data. This year our data showed 92.12% so we did not beat that target and we had slippage, this number went down but we're getting feedback from families. We did have that increased rate of return on these so I feel like even if its sad news its good news to know that we have something we can drive for change here. 94.75% was the target we set this year and we foresaw that by helping the child and family to learn and grow we did meet the target 94.75%, but we have no slippage.

Ms. Fyfe explained that we actually got up to an 18% return rate from 9.5% last year so we were really excited about that. We do feel like the slippage was caused by multiple factors and one of them is that the enrollment in early intervention went down by 500 children this past year. You could see what was reported and the reasons for slippage, we also felt the mandated hold on face to face services was part of the reason and that also reflects in the comments on the family survey. Part of what families were saying is that they did not feel it was working as well for their children and then there's just the whole covid pandemic total of people being ill. People may not want people in their homes or just the stress of the whole situation. I do feel we did a really nice job on the family survey. We had responses from every ethnicity that we sent out and we felt like we had covered race/ethnicity with equity and we speak about it further down in the APR as well. Regionally we felt like everything was pretty well equal and it looks really nice for what we are doing and how we're trying to reach families. We reordered the race/ethnicity by reversing the order and we saw that was research based and that you sometimes get a clear answer if you think about how you are phrasing things. We also made it more clear which programs were in which areas and regions of the state so that was easier for families to complete.

Ms. Malina Lovell shared information on the APR indicator five (5) which is regarding child find. Children ages birth to one (1), and later you'll see the child find for children ages birth to three (3). This indicator covers the

percent of infants and toddlers ages birth to one (1) . Historically this target was set at 1% which was better than our baseline data and we had some ups and downs around this data set. So far as the actual data 1.24% in 2015 and then 1.08% which is the same as the new target in FY 2019. A couple of things about indicator five (5) is the indicator where we did not meet the target but we didn't have slippage. We have a regular IDEA Part C and IDEA Part B meeting with the data managers across the nation and outlying territories and every state has seen a drop in the zero to one population and regardless of whether they were meeting their target or had slippage everyone was impacted by the enrollment of children zero to one (1) during the pandemic year that was FY20. What I have done here with the targets is that I projected out from the meeting that we did in November to see what growth we could really push this to. So we kept the target the same for this year, we wanted to improve it by a 0.2% to show some rigor and some growth, 1.28 would take us there so we divided up across the years to have a 0.04% change each year through the next six (6) years. In the next five (5) years I'm hoping that these targets look rigorous to you and that you feel that they are compatible with our goals and achievable. Also, if we want to see what it's like for the next few years data and then perhaps go ahead and flatten those out so that they don't change for a few years is an option too as we move into the next few years of annual performance reporting the data for this. Data is broken into population demographics that we received from the state demographer for those age groups, and then by county. There were 382 children within the age range out of 35,000 in their age range which gave us a 1.07%. Which means we did not meet the target and we were very close but like I said every state had issues with this one and what we do when we analyze this indicator is we compare ourselves to other states we have similar population sizes to. We noted that many states are really feeling this one in the pandemic so I'm proud of our state even though we did not meet the target that we didn't have any slippage it means that we were still very close to the expectations that we had set for ourselves for having those children enrolled and receiving services. You all would probably know the statistics better than I would for what the expectation is for having children in the birth to one or in zero to three (3) and what kind of child find capture we should have for those kids. Some states have their targets set at 5% or 3%. I don't think that's something we want to push ourselves into trying to meet right now. I think that the growth of the targets is steady and solid but if there's any discrepancy there then we are open for that discussion and then we also have the opportunity to change targets as we move forward together. The other indicator is six (6), which is zero through up to that third birthday and then knowing how many kids in that age range are enrolled in receiving services orientation. Regarding the data for the indicator, this is where I had mentioned earlier that we collect the data through monitoring. This indicator you'll see it says data for this indicator are gathered through the TRAC data system so that's just an example of how obtaining the information for the various indicators can differ.

Ms. Slayden presented Indicator six (6), birth to three (3) this really is like the penultimate child find indicator here so the baseline was at 1.36 in 2005 and if you remember that number five (5) had the 2004 baseline here also with a very low percentage so the target stayed the same for a very long time and last year when we were informed by OSEP that we had to move the needle at least some we bumped it to 2.46%. Now I project based on our last 5 years of data and forecasted out to the potential for reaching a 3.31% in 2025. There are some things I'd like you to consider when looking at this 2.46% which we had for 2019 and then we've said again for the target 2.46% for FY2020. We have two (2) years of no change when we look at the 2.46% compared to the actual data that we received in the last few years and the projection ending at 3.31% of all children zero to three (3) receiving services included growth every year to get to that 3.31%. I believe that all the way through 2023 setting these goals are absolutely no problem. We should be able to achieve these which gives us the opportunity in 2024 and 2025 to decide if those were too low or if we should top it off at 2.97% and leave it there at just under 3% for the foreseeable future.

Ms. Fyfe went over the target information. For our birth to three (3) the target was 2.48% and we are at 2.73% so we are above the national average. The target date shows what the national average we might be slightly below that but we are always significantly above the states that are similar to us in population and number of children served within that age range and so if you look at Arkansas, theirs was less than 1%, and

Mississippi is 1.99%. We are doing really well as a state I do see that our birth to one (1) is a little bit more challenging but our overall birth to three (3) is where we are doing really well as a state and so we do have the Child Find ICC Subcommittee as we continue to look at ways to make sure we are reaching underserved populations and regions. We will continue to work on that and if anyone has an interest in attending those we do send out the agenda or you can always email Mary Garrison or myself and we will invite you.

Ms. Malina-Lovell went over Indicator seven (7) which is the 45-day timeline in where the IDEA Federal regulation states that children entering or who are eligible and entering early intervention services must have their IFSP or the individualized family service plan developed within 45 days from the time of their referral and here we have the targets for this year and the next five (5) years.

Ms. Slayden mentioned the baseline data in 2005 was 67.1% and Nevada has really grown over the last 2 decades. You don't get to set a target for this, the goal is 100%. The last five (5) years we've been in the 99th targets always 100% and will remain this year. When we look at the data from last year we're at 99.01%. This year we are at 99.18% and we did not meet a 100% but we came up in those timely evaluations and IFSP. The 2909 is the number of kids who met the timeline and this is the number of eligible children who should have been assessed within those 45-days. It's not every child that was assessed it's those eligible babies that we look at their timeline because that's what OSEP needs. We have number of documented delays just like we do with other things that happen within a child record, we look at the notes to make sure that the fault is attributed to exceptional family circumstances. There were 372 of those during this very hectic pandemic, July 1, 2020 through June 30, 2021. In July of 2020 we weren't sure that the kids were going to step foot back into a building again before the end of the year. In June of 2021 we saw another phase of having problems at the close of the school year, trips being cancelled, flights being cancelled.

Ms. Malina-Lovell stated that we will pass through indicator eight (8) which again as I mentioned is not complete. We will have that for you later this month. I just like to show everyone that indicators nine (9) and ten (10) are not applicable to our system this year because no families came forward requesting a dispute resolution. When you reach ten (10) cases or more OSEP will want the state to report out and provide the narrative of what happened. All families entering the early intervention system and receiving early intervention services must be apprised of their parents rights and responsibilities that is a requirement and what we call procedural safeguards, which safeguard their families, their supports, and services and those are provided to families throughout their time with early intervention right from the beginning with referral all the way through to evaluation and eligibility. If eligible to initial IFSP and to all the junctures that follow up throughout which are actually the indicators of this APR and indicator ten (10) is for mediation and we did not receive any request for mediation this year so as you will see we have indicated in those fields zero for that count.

Ms. Garrison mentioned that we are attempting to meet on the January 27, 2022, and I agree with Ms. Waugh's suggestion that our final approval for the APR be handled by a subgroup and I will entertain a motion to undertake that activity on the 27th of January at 11:00 a.m.

MOTION: Subgroup to meet on January 27, 2022 at 11:00 a.m. to review and approve the APR

By: Janice Lee

Second: Jenna Weglarz-Ward

VOTE: Passed

IX. **ICC Subcommittees – Review and discuss current activities**

a. **Family Support Resource Subcommittee**

i. **Discuss new chair for the Interagency Coordinating Council (ICC) Family Support Resource Subcommittee**

Ms. Garrison requested members consider a role with the Family Support Resource Subcommittee. The subcommittee has struggled to meet quorum and has no updates.

b. Child Find Subcommittee

i. Minutes from August 24, 2021 meeting-Information Only

Ms. Waugh mentioned that the Child Find Subcommittee has minutes from August to share. We have our next meeting on March 17th at 1:00 pm.

c. Equity Subcommittee

i. Meeting notes from November 4, 2021 meeting

Ms. Malina-Lovell asked to give the floor to Andre' Haynes who is the Equity subcommittee co-chair along with Ms. Chalupnik his fellow co-chair for the equity subcommittee to address the ICC.

Ms. Chalupnik mentioned that we really understand the importance of involving the public and the community into the process so that we are continuing to build trust and ensure that there is fair and equitable access to early intervention services. In our last meeting we worked on our vision and mission statements and we had a good influence statewide and we are working with the Part C Office via Ms. Garrison.

Mr. Haynes stated that one of the things he has been doing is speaking with several special education teachers and the Clark County School District (CCSD) and one of the things that they had conveyed to me is that there's a disconnect between the teacher's and the school district in regards to the gaps, curriculum, the course materials and also they're having challenges with not just the class size but all of the different levels of development challenges that are not categorized. So that when the curriculum and materials are taught to the students they can each focus and be met directly at their level. The main thing is that they have stressed to me is their concerns that information is not be shared and the school district is not in conversation with them. The district seems to be unaware of that and there seems to be a disconnect, so they're very happy to hear about this group and about the different people who are participating. The fact that information is being shared and they definitely told me that in the very near future they'll share information with me for our subcommittee to bring to the attention of everyone here and they will try to call in or join future meetings online. I received information yesterday from a contact I have in social security about some administrative changes, they are not legislative so we won't see them on certain lists but internally there's some things going on administratively that will impact children who are receiving social security disability benefits and that's all I have

X. IDEA Part C Information and Reports

a. Update on the Nevada Pyramid Model Implementation

Ms. King stated that The Nevada Pyramid Model and I have some good news as we work for sustainability of the implementation of this very critical model, it came to our attention that although the QA team has provided wonderful training and implementation to our providers they couldn't do it all the time. We had days locked and blocked out for them to provide training to many of our providers. If you could not attend for a day or two (2) days it was not working to have it not available all the time. So the Part C Office has been working with Mr. Rob Corso, who is the executive director of the Pyramid Consortium. He has agreed to develop these training modules that we need online. This will be good for the therapists because their programs really couldn't afford to pay the therapists to attend day long meetings and now you can pull up these trainings as they're needed. We got to the point where we had to negotiate what we're going to get and how we're going to use it. I have kudos for Ms. Fyfe and Ms. Malina-Lovell for doing the negotiations with Mr. Corso, because he had proposed that we got unlimited access to all providers for five (5) years and we didn't think that was long enough. Ms. Fyfe and Ms. Malina-Lovell worked very diligently to get seven (7) years with

unlimited access to all providers and a discount of 60% to the cost of their platform for the next seven (7) years and then if that contract is renewed we will pay the cost of the server and we will have unlimited access to these trainings on their platform.

b. **Update on American Rescue Plan (ARP) funds**

Updates regarding this item were provided and noted earlier in this meeting.

c. **Complaint Matrix**

Ms. King mentioned that we had no formal complaints during this period of time.

d. **ICC SFY22 Budget**

Ms. Garrison mentioned that the ICC budget which is the total amount that the ICC has spent to date and in this fiscal year will reflect that the largest portion is the early intervention calendar. For State Fiscal Year 2023 (SFY23), the ICC will likely see a significant increase in the cost because we are trying to transition to a planner that would be distributed to families to replace the early intervention calendar. It would include a calendar in the planner, also some tips, resources, stories, and other good information to provide to families.

XI. **Consider Agenda Items for Next Meeting (For Possible Action):**

- Nominate and Approve New Nevada Early Intervention Interagency Coordinating Council (ICC) Parent Representative Co-Chair

Ms. Garrison stated that the agenda for next the meeting is a look at the family survey responses, we're hoping to have an update from HMA regarding the system study, as well as the new data system, review of the minutes, the ASD updates, including the phase planning updates as we move through the pandemic, and the Part C office items which are update on the pyramid model, ARP funds, complaints and the ICC budget.

XII. **Schedule Future Meetings (For Possible Action):**

- April 28, 2022, 10 a.m.
- July 21, 2022, 10 a.m.

XIII. **Public Comment –**

(No action may be taken on a matter raised under this item of the agenda until the matter itself has been specifically included on an agenda as an item upon which action will be taken.)

Brittany rejoined us I just wanted to thank the group for urging me to submit my application and just mention two (2) things one (1) that I did submit my application to the council and had been received for consideration for appointment and any potential vacancies I am interested in participating as a parent and a southern Nevada resident and if you can forward my application or any new application at that time as well. I'd love to be able to participate or just know at what level I'll be participation as either of the public or a member for subsequent meetings where voting needs to be read in advance or things of that nature.

Ms. Katherine Nielsen would like to make a public comment about putting the draft in the background of your minutes as a watermark since it makes it inaccessible so in the future can we possibly change that to state draft at the beginning of the minutes instead of a watermark so that it is completely accessible, and another thing is we having a self-advocacy conference this year it is open to self-advocates, family members of those that are self-advocates, and professionals. Its going to be August 2nd to the 4th in Las Vegas and the council has funds to assist in travel any questions you can visit our website or contact our office for more information

XIV. **Adjournment**

Meeting was adjourned at 1:20 p.m.

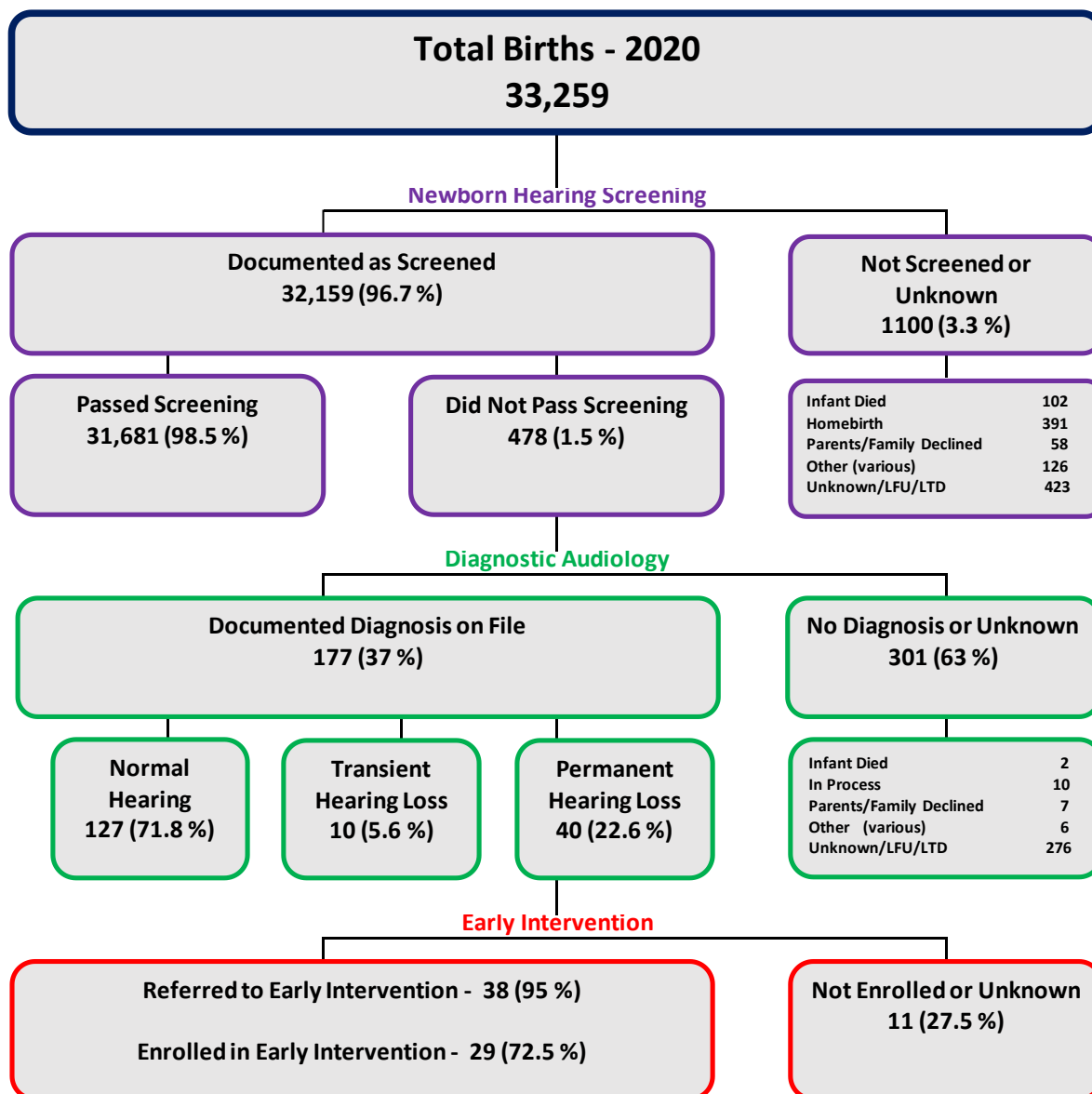


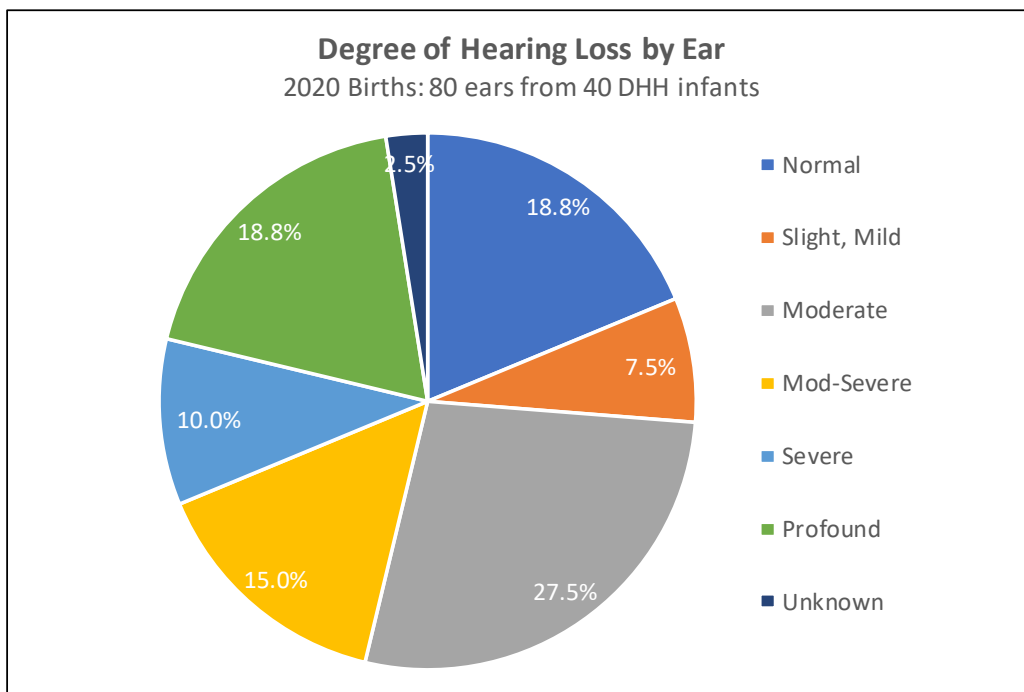
Nevada Early Hearing Detection and Intervention



The purpose of the Nevada Early Hearing Detection and Intervention (EHDI) Program is to ensure all children in Nevada are screened for hearing loss at birth and those identified with hearing loss receive timely and appropriate audiological, educational and medical intervention. Nevada EHDI promotes the national EHDI goals and timelines developed by the Joint Committee on Infant Hearing (JCIH) and the Centers for Disease Control and Prevention (CDC).

- 1 - Before **ONE** month of Age:
Hearing Screening for all babies
- 3 - Before **THREE** months of Age:
Diagnostic Audiology by an audiologist if baby did not pass hearing screening
- 6 - Before **SIX** months of Age:
Early Intervention if baby is diagnosed with hearing loss





Resources for More Information about EHDI and EHDI Related Goals:

Nevada Early Hearing Detection and Intervention (EHDI):

<http://dpbh.nv.gov/Programs/EHDI/EHDI-Home/>

Centers for Disease Control and Prevention (CDC) – Hearing Loss

<https://www.cdc.gov/ncbddd/hearingloss/>

Health Resources and Services Administration (HRSA) – EHDI:

<https://mchb.hrsa.gov/maternal-child-health-initiatives/early-hearing-detection-and-intervention.html>

American Academy of Pediatrics (AAP) – EHDI:

<https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/PEHDIC/Pages/Early-Hearing-Detection-and-Intervention.aspx>

Joint Committee on Infant Hearing (JCIH):

<http://www.jcih.org/>

National Center for Hearing Assessment and Management (NCHAM):

<http://www.infanthearing.org/>

EHDI E-Book

A Resource Guide for Early Hearing Detection and Intervention

<http://www.infanthearing.org/ehdi-ebook/index.html>

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<http://dpbh.nv.gov/Programs/EHDI/EHDI-Home/>

Nevada Division of Public and Behavioral Health

Newborn Hearing Screening Follow-up Guidelines

Detecting hearing loss is critical to child development. Hearing loss is one of the most common birth defects. If left undetected it can negatively impact language acquisition, speech, academics, and social and emotional development. Following these guidelines from the state Early Hearing Detection and Intervention (EHDI) program ensures every infant receives the best care.



BY 1 MONTH

Hearing screenings should be performed prior to leaving the birthing facility. If the baby does not pass the hearing screen in one or both ears, returning for a rescreen in 1-3 weeks is strongly encouraged:

- Always rescreen both ears
- If initially screened with AABR, rescreen with AABR
- If initially screened with OAE, rescreen with OAE or AABR
- The birthing facility and all rescreen providers should report results to the state EHDI Program



BY 3 MONTHS

If the rescreen is not passed, a diagnostic hearing evaluation with a pediatric audiologist is needed; choose one who is able to perform the following:

- Click Auditory Brainstem Response (ABR)
- Frequency Specific Tone Burst ABR
- Bone Conduction ABR, if needed
- High Frequency Tympanometry
- Otoacoustic Emissions (OAE), optional
- The audiologist should report results to the state EHDI Program



BY 6 MONTHS

If child is identified as being deaf or hard of hearing, the following steps should be taken:

- Enrollment in an Early Intervention (EI) program
- A medical examination by an Ear, Nose, and Throat (ENT) physician
- Hearing aid consultation with a pediatric audiologist
- The Early Intervention provider should report results to the state EHDI Program or document in their data management system

Pediatric Audiology Facilities in Nevada

The following facilities are the only ones in Nevada with current profiles that meet the national guidelines built into the EHDI-PALS directory and have the necessary equipment to provide a complete diagnostic hearing evaluation on infants younger than 6 months of age. Visit [EHDIPALS.org](https://ehdipals.org) to search for a pediatric audiologist, find helpful links, or to learn more about infant hearing loss.

Nevada Early Intervention Services, Northwest

2667 Enterprise Rd.
Reno, NV 89512
(775) 688-1341

Desert Valley Audiology

501 S. Rancho Dr.
Suite A8
Las Vegas, NV 89106
(702) 605-9133

Nevada Early Intervention Services, South

1161 S. Valley View Blvd.
Las Vegas, NV 89102
(702) 486-9200

University of Nevada School of Medicine

5320 S. Rainbow Blvd. Suite 260
Las Vegas, NV 89118
(702) 992-6828

Nevada Early Hearing Detection and Intervention (EHDI)

4150 Technology Way
Suite 210
Carson City, NV 89706
(775) 684-4285



Email:
NVEHDI@health.nv.gov

Website:
dpbh.nv.gov/Programs/EHDI/EHDI-Home/



MEETING MINUTES

Name of Organization: Nevada Early Intervention Interagency Coordinating Council (ICC), Child Find Subcommittee

Date and Time of Meeting: December 16, 2021
1:00 p.m.

Meeting was held virtually using the following link:

Microsoft Teams meeting

Join on your computer or mobile app

[Click here to join the meeting](#)

Join with a video conferencing device

105936574@teams.bjn.vc

Video Conference ID: 112 014 088 4

[Alternate VTC instructions](#)

Or call in (audio only)

[+1 775-321-6111,982247251#](tel:+17753216111982247251) United States, Reno

Phone Conference ID: 982 247 251#

[Find a local number](#) | [Reset PIN](#)

Thank you for planning to attend this Teams meeting.

[Learn More](#) | [Meeting options](#)

DRAFT MINUTES

I. Call to Order and Roll Call

Chair Sherry Waugh called the meeting to order at 1:22 p.m.

A quorum of members was present; the meeting proceeded as scheduled.

Members Present: Karen Frisk, Patrice Gardner, Sarah Horsman-Ploeger, Robin Kincaid, Marnie Lancz, Janice Lee, Sarah Sills, Karen Shaw, Dr. Debra Vigil, Sherry Waugh

Members Absent: Marty Elquist, Cherish King, Rhonda Lawrence, Yvonne Moore, Keanna Sullivan, Jenna Weglarz-Ward

Public Attendees: Jessica Roew

Part C Staff Present: Daniel Dinnell, Shari Fyfe, Mary Garrison, Jalin McSwyne

II. Public Comment

No public comment was made.

III. Review and Approve Minutes from the August 24, 2021, Meeting **(For Possible Action)**

Mary Garrison shared the August 24, 2021, meeting minutes. Ms. Waugh asked the council to review.

MOTION: Approve the August 24, 2021, meeting minutes as presented.

BY: Sarah Sills

SECOND: Dr. Debra Vigil

VOTE: PASSED

IV. Child Find and Project Assist Reporting

- a. State Fiscal Year 2022 (SFY22) 1st Quarter Child Find Report
- b. SFY22 2nd Quarter Child Find Reporting Template
- c. Project Assist Spreadsheet

Mary Garrison shared the report for the first quarter of 2022. Ms. Garrison stated that there were a couple of items that needed to be updated on the spreadsheet we used for the programs to complete. Ms. Garrison explained that the committee reviewed the spreadsheet at the last meeting and a lot of adjustments were made. The programs utilized it this quarter and found through trial and error some issues with some of the fields. These fields were updated for the upcoming quarter.

Dan Dinnell addressed the subcommittee, stating that Project Assist is part of Child Find. The Part C Office has a toll-free number that people can call, as well as an email. Part C receives calls from around the world, mostly from military families asking about the programs when they arrive at the Nellis Air Force Base in Southern Nevada. Mr. Dinnell shared a report on calls received through project assist. The report shared was for the years 2019-2021. Mr. Dinnell explained the report is broken down by year.

V. Child Find Outreach and Materials

- a. Nevada Early Intervention Services Northeast (NEIS NE) Child Find materials for distribution
- b. Hospital Contacts

Karen Frisk and Sarah Horsman-Ploeger shared a poster for distribution at doctor's offices. Robin Kincaid shared that she responded by email with suggested edits. Ms. Kincaid requested that the poster be reworded to state, provides services, supports, and resources. This would prevent families from believing that this is just a referral source when services are being provided.

Due to loss of quorum, this agenda item was moved to the next meeting.

VI. COVID-19 Protocol Update and Early Intervention Re-entry

Due to loss of quorum, this agenda item was moved to the next meeting.

VII. Consider Agenda Items for the Next Meeting (For Possible Action)

- ICC Child Find Strategic Plan Review
- Child Find Outreach Materials
- COVID-19 Protocol Update and Early Intervention Re-Entry
- Quarterly Child Find Report
- Project Assist Report

VIII. Schedule Future Meetings (For Possible Action)

The next subcommittee meeting was scheduled for March 17, 2022, 1:00 p.m.

IX. Public Comment

Due to loss of quorum and ending of the meeting, no public comment was made.

X. Adjournment

The meeting was adjourned at 2:03 p.m.

Updates from NEIS – Carson and Elko (Rural/Frontier)

- The Rural Frontier NEIS offices (Carson City and Northeast Nevada) are happy to be fully staffed with our administrative assistants!
- NEIS Carson City is excited to have hired on two new developmental specialists.
- Our Northeast offices are still looking to fill two open developmental positions as well as a DSIV position.
- We continue to train our staff in the NCPMI (Pyramid Model) and our Elko office hosted a pyramid practices centered play group. This playgroup took place at our NEIS Elko office and was a huge success!

Schedule-at-a-Glance*

Tuesday, Sept. 27th

PRE-CONFERENCE DAY*

8:30 AM TO
4:00 PM

CONFERENCE REGISTRATION OPEN 8 AM - 7:30 PM

**Pre-Conference
Workshops are available
for an additional fee.
Just \$50 for each 3-hour
workshop.*

Wednesday, Sept. 28th

FULL CONFERENCE BEGINS

8:00 AM TO
7:30 PM

CONFERENCE REGISTRATION OPEN 8 AM - 7:30 PM

Thursday, Sept. 29th

FULL CONFERENCE

8:00 AM TO
7:30 PM

CONFERENCE REGISTRATION OPEN 8 AM - 7:30 PM

Friday, Sept. 30th

FULL CONFERENCE

8:00 AM TO
4:00 PM

SOLUTIONS DESK OPEN 7:30 AM - 5 PM

EXHIBIT HALL

The Exhibit Hall will be
 open daily with access to
 DEC sponsors,
 exhibitors, and space to
 network!

***Schedule Subject to Change**
More details to come

AER Conference Schedule

Wednesday, July 20

SESSION TITLE	SPEAKER(S)	*TYPE OF SESSION YOU ARE PROPOSING
9:00 AM - 4:30 PM		
NVI Division: Learning from Children and Adults with CVI about How They Live their Best Lives	Nicola McDowell Mindy Ely Amanda Lueck Susan O'Brien Melody Furze Corinna Bauer	
MacFarland Seminar: Hope, Resources, and Emerging Therapies for Inherited Retinal Diseases	Ben Shaberman Michelle Glaze Andrew Kim	
Information and Technology Division: Navigating the Assistive Technology Journey	Belinda Rudinger	
Janet Barlow Symposium Day: Help! It's getting harder and harder to teach street crossing	Margaret (Meg) Robertson Billie Bentzen Lukas Franck Dona Sauerburger Claudia Libis Raychel Callary JoAnne Chalom Linda Myers Jennifer Graham Liz Robertson Marybeth Cleveland	
Instructional Services: Anatomy of a Functional Vision Evaluation	Tommie Roesch Shannon Darst Ellen Hoke Debra Sewell	

AER Conference Schedule

	Jill Brown Rona Pogrund Tina Herzberg Tanni Anthony	
Adult Services: What You can do to Stem the Growing Public Health Crisis of Older People with Vision Loss	Katie Frederick Lee Nasehi Priscilla Rogers Neva Fairchild Alan Lovell	
Thursday, July 21		
SESSION TITLE	SPEAKER(S)	*TYPE OF SESSION YOU ARE PROPOSING
7:00 AM - 9:30 AM		
Breakfast – Adult Services		
8:00 AM - 9:30 AM		
O&M Business Meeting		
9:45 AM - 11:15 AM		
Are We Ready? The Challenges of Kindergarten Readiness: A Guidance Protocol	Catherine Smyth DeEtte Snyder Lisa Lind Michael Abel Alex Olson Kelly Hantak	Breakout session - 90 minutes
Bicycles and vision disabled pedestrians—a dangerous mix	Billie Bentzen Linda Myers Alan Scott	Breakout session - 90 minutes
Braille: Refreshing Knowledge, *Blasting* Down Barriers, and BINGO!	Kyle DeJute Dawn Eadens	Breakout session - 90 minutes
Considerations for Educating Students with CVI: The Learning Environment	Amy Campbell Deborah Chen	Breakout session - 90 minutes

AER Conference Schedule

	Jennifer Edgar Marieke Steendam	
Early Literacy: How to Embed Literacy Activities into Daily Routines	Luanne Stordahl Ronda Dalley	Breakout session - 90 minutes
I Take the Yellow Pill in the Morning! Promoting Self-Management in the Older Adult with Low Vision	Cheri Nipp	Breakout session - 90 minutes
JAWS, NVDA, and Chromevox: Basic Internet Navigation	Cody Laplante	Breakout session - 90 minutes
Not your Grandmothers Radio Reading Service: innovations and changes in the Audio Information Services Field	Lori Kesinger Maryfrances Evans Bekah Jerde	Breakout session - 90 minutes
O&M Referrals: A Team Approach	Justin Kaiser Tina Herzberg	Breakout session - 90 minutes
Redefining the Limits when Teaching Newly Blind/Low Vision Adults - Teaching like "There is no Box"	Kathleen Abrahamson Robert Alminana Bobbie Pompey Gina di Grazia Divina Carlson	Breakout session - 90 minutes
State of College Readiness and Preparation 2022 and Ahead	Leslie Thatcher	Breakout session - 90 minutes
Success Strategies Employed by Blind O&M Candidates and Blind O&M Specialists	Laura Bozeman Nora Griffin- Shirley Brad Blair	Breakout session - 90 minutes
11:45 AM - 12:45 PM		
1Touch Project. Providing tools for safety in travel, self-empowerment, communication skills and threat awareness. Vocational and social rehabilitation for all ages and walks of life are	Stephen Nicholls	Breakout session - 60 minutes

AER Conference Schedule

the ultimate goals of the 1Touch in addition to personal safety. As		
A New Approach to Engaging Clients	Leslie Hoskins	
Assistive Technology Use in the Workplace for People who are Blind or Have Low Vision	Michele McDonnall Anne Steverson Katerina Sergi	Breakout session - 60 minutes
Evaluation of Smart Phone Applications to Provide Intersection Information	William Wiener	Breakout session - 60 minutes
International Services and Global Issues: Past, Present, & Future	Belinda Rudinger Kevin McCormack Katherine Ericson	Breakout session - 60 minutes
Learning SmART: Learning Concepts Through Art	Karen Poppe	Breakout session - 60 minutes
Navigation and Dynamic Content in a New eBRF	Greg Stilson William Freeman	Breakout session - 60 minutes
Peeking into how the blind and visually impaired contend with suicide risks and generate protective supports.	Henry J. Tyszka (Tish'-ka)	Breakout session - 60 minutes
Pivot: Successfully Migrating a High-Touch In-Person Program for Seniors with Vision Loss into the Virtual World	Lynn Dubinsky Phillip Reeves	Breakout session - 60 minutes
Standardizing Early Intervention-Based Functional Vision Assessments: Establishing Quality When Conducting and Writing Evaluation Reports	Elise Darrow	Breakout session - 60 minutes
The Socio-Emotional Impact of COVID-19 on Educational Professionals who Serve Students	Carlie Rhoads Tina Herzberg	Breakout session - 60 minutes

AER Conference Schedule

with Visual Impairments: Challenges and Solutions		
Understanding the Lived Experiences of Visually Impaired Students in Physical Education: A Review	Justin Haegele	Breakout session - 60 minutes
2:00 PM - 3:00 PM		
A Need for Interdisciplinary Personnel to Serve Students With Deafblindness: A Literature Review	Phoebe Okungu Nora Griffin-Shirley The Nguyen Chinomso Ihenagwam	Breakout session - 60 minutes
Associated Risk of Trauma and Chronic Stress: A Disability Focused Perspective	Marie Celeste	Breakout session - 60 minutes
Birth to Three Orientation and Mobility, New Mexico Style	Lynn Little	Breakout session - 60 minutes
Community Experiences of Teachers of Students with Visual Impairments in Creating Math and Science Tactile Graphics	JinSeok Park Sunggye Hong	Breakout session - 60 minutes
Does Your Workload Seem Excessive? The New Workload Analysis Tool for Itinerant Vision Professionals, the VISSPA, May Help!	Rona Pogrund Shannon Darst	Breakout session - 60 minutes
Embracing the New Normal in Remote Service Delivery	Jan Chudeusz Chantel Buck Jayne Maravola	Breakout session - 60 minutes
Everything Old is New Again! Welcome to the new APH ConnectCenter	Olaya Landa-Vialard Kathryn Botsford	Breakout session - 60 minutes
Hands on Juno Experience for COMS	Thomas Strasz Meredith Bryde Garret Waldie	Breakout session - 60 minutes

AER Conference Schedule

MAC or PC; That is the Question.	Kasey Hopper	Breakout session - 60 minutes
Practice What you Teach. How ObjectiveEd's Reinforcement Learning System improves student outcomes.	Marty Schultz	Breakout session - 60 minutes
Reassessing Evaluation Practices of Children with Vision Impairment	Callie Brusegaard Huyentran Vo	Breakout session - 60 minutes
The Impact of COVID-19 On Individuals with Visual Impairments: Results for the Journey Forward Survey	Carlie Rhoads	Breakout session - 60 minutes
3:30 PM - 4:30 PM		
Code Jumper: Computer Science, Careers, and the Expanded Core Curriculum	Beth Dudycha	Breakout session - 60 minutes
Curriculum-based Evaluation Tools: Evolving & Responsive Practices	Donna McNear	Breakout session - 60 minutes
Digital Learning: APH Hive Courses Built for You	Amy Campbell	Breakout session - 60 minutes
Fall Prevention Interventions for Older Adults Who are Visually Impaired	Ms. Tressa Kern	Breakout session - 60 minutes
Free and Easy Tactile Graphics -- Tactile Graphic Image Library	Sally Hart	Breakout session - 60 minutes
Project INSPIRE'S Professional Development: Nemeth Code and Strategies for Supporting Math Learning	Penny Rosenblum Tina Herzberg	Breakout session - 60 minutes
Safe Soundscape: How Sounds in the Environment Effect Behavior	Kenalea Johnson	Breakout session - 60 minutes
The Impact of COVID-19 on O&M Services for Children	Danene Fast Justin Kaiser	Breakout session - 60 minutes

AER Conference Schedule

Understanding Mother's Perceptions on Assessment and Education Programming for Their Children with CVI	Melody Furze Silvia Correa-Torres	Breakout session - 60 minutes
Walk Your Own Path: A Mural to Start a Conversation	Shelby Glass	Breakout session - 60 minutes
Why Did You Become a TVI?: Feedback From One TVI Preparation Program's Alumni and Open Discussion on Why Individuals Decide to Become Teachers of Students with Visual Impairments	Rachel Schles Madeline Chastain	Breakout session - 60 minutes
21st century child with low vision and use of prescribed optical device	Cindy Bachofer	Breakout session - 60 minutes
4:00 PM - 5:30 PM		
Host Committee Welcome Reception		
7:00 PM - 9:00 PM		
President and Host Chapter Opening Reception		
Friday, July 22		
SESSION TITLE	SPEAKER(S)	*TYPE OF SESSION YOU ARE PROPOSING
7:00 AM - 9:30 AM		
Breakfast – Instructional Services		
9:00 AM - 5:00 PM		
Exhibit Hall		
9:45 AM - 11:15 AM		
Blind in New York but not in Missouri: How Eligibility Criteria for Students with VI Vary Across the US	Rachel Schles Hilary Travers	Breakout session - 90 minutes

AER Conference Schedule

Creating a Gateway to Accessing Education for Students with Significant Support Needs Including Deaf-Blindness	Kristi Probst Emma Nelson	Breakout session - 90 minutes
Getting Ready for Infrastructure Changes- Pedestrian Barricades for Pedestrians with Vision Loss, ADA and Advocacy	Margaret (Meg) Robertson	Breakout session - 90 minutes
Introduction of the Guidelines for Determining the Frequency of Services to Support Learners with CVI; a tool for service providers	Stephanie Steffer Chaesa MacWilliams	Breakout session - 90 minutes
O&M: An Older Person's Gateway to Independence	Laura Bozeman Nora Griffin-Shirley Anita Page	Breakout session - 90 minutes
Preparing Your Organization for Accreditation/Re-Accreditation	Elly du Pre	Breakout session - 90 minutes
Resources for Learning and Teaching Nemeth Code within UEB Contexts	Susan Osterhaus Sara Larkin Tina Herzberg	Breakout session - 90 minutes
Safety Education Empowering Defense Presented by STRIVE4YOU	Amy Wilson	Breakout session - 90 minutes
Tactile Walking Surface Indicators: What, Where, Why and How	Billie Bentzen Alan Scott Jennifer Graham	Breakout session - 90 minutes
Texas 2 STEPS: Connecting the Dots	Marjorie Wood Debra Sewell Stephanie Walker Jill Brown	Breakout session - 90 minutes
What's Your Vision for APH VisionAware?	Katie Frederick Priscilla Rogers	Breakout session - 90 minutes

AER Conference Schedule

¡Quiero leer! I want to read! Access for Spanish Speakers and Emergent Bilingual Learners with Visual Impairments	Rebecca Sheffield Nicole Gaines Olaya Landa-Vialard Luis Perez	Breakout session - 90 minutes
12:00 PM - 1:30 PM		
Awards Ceremony and Lunch		
2:00 PM - 3:00 PM		
A Million Manipulatives in Your Pocket	Leanne Grillot	Breakout session - 60 minutes
Collaborative Employment Practices: Joining Forces for Success	Ian Shadrick	Breakout session - 60 minutes
Contracting rate survey	Robert Wall Emerson Susan Langendonk JoAnne Chalom William Wiener	Breakout session - 60 minutes
Gateway to Inclusion: A Critique of Picture Books Featuring Fictional Characters with Visual Impairments	Loana Mason Kara Halley Elizabeth Bolander Michelle Chacon Ann Cunningham	Breakout session - 60 minutes
How Many Braille Readers? Policy, Politics, and Perception	Sarah Chatfield Rebecca Sheffield Frances Mary D'Andrea	Breakout session - 60 minutes
Interrupting CVI Spirals before they become Meltdowns: O&M and other strategies to reduce the intermittent	Nicola McDowell Marji McWee	Breakout session - 60 minutes

AER Conference Schedule

visual/neurocognitive/emotional overload often experienced by people with CVI		
Physical Activity of Children and Youth who are Deafblind: Research to Practice	Melanie Perreault Pamela Beach Lauren Lieberman	Breakout session - 60 minutes
Reflecting on the Impact of COVID-19 on Education of Students with Visual Impairments: Looking Back and Moving Forward	Arielle Silverman	Breakout session - 60 minutes
T3: Next-Generation Audio-Tactile Tablet	Steven Landau Ann Cunningham Lucia Hasty Stephanie Herlich	Breakout session - 60 minutes
The Start of Modern Vocational Training for the Blind, The Red Cross Institute for the Blind and Evergreen	Robert Kozel	Breakout session - 60 minutes
Turning on Touch Thinking: Tactile Discrimination & Braille Letters	Donna McNear	Breakout session - 60 minutes
Variations in State Policies Related to Licensing of Teachers of Students with Visual Impairments	Callie Brusegaard Mackenzie Savaiano Huyentran Vo	Breakout session - 60 minutes
3:30 PM - 4:30 PM		
Accessibility in the Chromebook	Bruce McClanahan Cecilia Robinson	Breakout session - 60 minutes
Braille Brain: A Personnel Preparation Braille Training Program	Cheryl Hannan Kim Blackwell Gina Michell	Breakout session - 60 minutes

AER Conference Schedule

Braille Instruction throughout the Curriculum	Karen Carl	Breakout session - 60 minutes
Building and Sustaining STEM Career Interests and Motivation through STEM Activities and E-mentoring Among Middle and High School Students with Visual Impairments	Garrison Tsinajinie Sunggye Hong JinSeok Park Tasnim Alshuli Steve Kortenkamp	Breakout session - 60 minutes
Creation of the National Agenda for STEM Education for Students with Visual Impairments	Tiffany Wild Derrick Smith Stacy Kelly Danene Fast	Breakout session - 60 minutes
Learn about APH Press	Heather Spence Jess Bryant	Breakout session - 60 minutes
O&M Instructors Who Are Blind Sharing Teaching Strategies and Nonvisual Skills	Nora Griffin-Shirley Laura Bozeman Phoebe Okungu The Nguyen Chinomoso Ihengawam	Breakout session - 60 minutes
Reframing Aging & Vision Loss: A National Collaboration utilizing Networking Leadership	Lee Nasehi	Breakout session - 60 minutes
Speaking of Video Magnifiers: Which One is Right for My Student?	Kimberly Cline	Breakout session - 60 minutes
Statewide Mentor Program for Rural States	Jodi Floyd	Breakout session - 60 minutes
The effect of Visual Impairments on Global Development	Erin Milller Carrie Vogiatzis	Breakout session - 60 minutes
5:00 PM - 6:00 PM		
ACVREP Yesterday, Today and Tomorrow	Kathleen Zeider	Breakout session - 60 minutes

AER Conference Schedule

Call the Braille Midwife: standardized assessments and braille	Kyle DeJute Katherine Padgett	Breakout session - 60 minutes
Exploring Gateways to Assistive Technology Instruction	Charles Yarberry Sharon Giovinazzo	Breakout session - 60 minutes
How do adults who are blind describe their quality of life?	Loreta Dylgjeri	Breakout session - 60 minutes
Identifying Sensory Intersectionality: Recognizing a Second Sensory Loss in Learners with a Diagnosed Sensory Impairment	Natasha Baebler Mary Morrell Karen Carl	Breakout session - 60 minutes
Instruction in Graphics Literacy for Elementary Students: What TVIs Report	Penny Rosenblum Tiffany Wild Tina Herzberg	Breakout session - 60 minutes
O&M Provider Requirements and Student Eligibility Criteria Throughout the US	Dawn Anderson Justin Kaiser	Breakout session - 60 minutes
Preparing Students for College or Career: Supporting Educators who Work with Transition-Aged Students with Visual Impairments	Hilary Travers	Breakout session - 60 minutes
Self-Advocacy: A Necessary Skill for Every Student	Lauren Lieberman Judith Byrd Ruth Childs	Breakout session - 60 minutes
Teaching Handwriting to Young Children with Visual Impairment: Multi-sensory strategies and intervention	Kitty Edstrand Joan Henriksen Mackenzie Savaiano	Breakout session - 60 minutes
Touching the Solar System: Utilizing Project-based Learning Curriculum with 3D Printing models and 2D Tactile graphics for Students with Visual Impairments	Tasnim Alshuli JinSeok Park Steve Kortenkamp	Breakout session - 60 minutes

AER Conference Schedule

	Garrison Tsinajinie Sunggye Hong	
Young, Visually Impaired and Happy: How hard is it?	Cindy Bachofer	Breakout session - 60 minutes
Saturday, July 23		
SESSION TITLE	SPEAKER(S)	*TYPE OF SESSION YOU ARE PROPOSING
7:00 AM - 9:30 AM		
Breakfast – Related Services		
9:00 AM - 3:00 PM		
Exhibit Hall		
9:45 AM - 11:15 AM		
Active Learning for Students with Multiple Disabilities: Building Capacity in Texas	Hillary Keys	Breakout session - 90 minutes
CVI and O&M Screening Tool	Valery Kircher	Breakout session - 90 minutes
Early Intervention Programs Across the US: What's Working for US, Can Work for YOU	Kathy Mullen Lisa Lind DeEtte Snyder Catherine Smyth Karen Borg Luanne Stordahl Alison Clougherty Stacy Cornwall	Breakout session - 90 minutes
Essential Tools of the Trade for Individuals Who Are Deafblind	Kaycee Bennett	Breakout session - 90 minutes

AER Conference Schedule

Finding Wheels: A Tool for Travelers who are Teens or in Their Early 20s	Penny Rosenblum	Breakout session - 90 minutes
High School and College Readiness Checklists: Are they the right tool for you and our student? Yes! And here's the ways to use them	Leslie Thatcher	Breakout session - 90 minutes
Independent Living Skills (ILS) Modules: Everything You Need to Begin Today!	Amanda English	Breakout session - 90 minutes
Nemeth/UEB Technical in a Box for Middle School Students	Sara Larkin Susan Osterhaus Tina Herzberg	Breakout session - 90 minutes
OSEP Updates & Listening Session: A Conversation with the Field	Rebecca Sheffield Eric Caruso Tina Diamond	Breakout session - 90 minutes
Quality Services to Older Adults who are Blind – Projections for 2025	Elly du Pre Anisio Correia Neva Fairchild	Breakout session - 90 minutes
The Future of the VRT Field	Daniel Norris Elyse Connors Polly Abbott Jennifer Ottowitz	Breakout session - 90 minutes
Updating the O&M Division Strategic Plan: Looking ahead to 2027	JoAnne Chalom Raychel Callary Margaret Winn Valery Kircher	Breakout session - 90 minutes
11:45 AM - 12:45 PM		
4to24: An App to Help Parents and Youth Prepare for Employment	Karla Antonelli Anne Steverson Jennifer Cmar	Breakout session - 60 minutes
ADL and O&M Anyone? A Blueprint to Create and Execute a Residential Summer Instructional Program!	Kevin Hollinger Christine McElfresh	Breakout session - 60 minutes

AER Conference Schedule

Creating a CVI Graduate Certificate	Laura Bozeman Callie Brusegaard	Breakout session - 60 minutes
Encouraging Student-Led IEPs: Dispatches from the Trenches	Sarah Chatfield	Breakout session - 60 minutes
Identification and Referral of Children with Complex Needs Including Deaf-Blindness	Kristi Probst Emma Nelson	Breakout session - 60 minutes
Maximizing Vision Services in Rural and Remote Areas: Training Pre-Service Professionals to Use Distance Consultation	Katherine Ericson Amy Parker	Breakout session - 60 minutes
Methods for Decreasing Vulnerability to Sexual Assault for People with Visual Impairments	Stacy Kelly Gaylen Kapperman	Breakout session - 60 minutes
More than Meets the eye: A Detailed Analysis of Braille Hand Movements	Tessa McCarthy	Breakout session - 60 minutes
Personal Autonomy: Everyone Deserves Respect. A Case for Active Consent-Seeking Behaviors of Adults Engaging with Children	Erika Fundelius	Breakout session - 60 minutes
Sonic Math Fundamentals: Teaching math skills through a sonified & tactile iPad app	Marty Schultz	Breakout session - 60 minutes
Supporting Healthy Lifestyle for Older Adults with Acquired Vision Loss	Margaret Beckley Prajakta Khare-Ranade Mary Falcetti	Breakout session - 60 minutes
The World has Changed but Our Commitment has Not: A Bill of Rights for All Children with Visual Impairment and their Families	Paul Olson Emily Coleman	Breakout session - 60 minutes
1:15 PM - 2:30 PM		
ADL and O&M Anyone? A Blueprint to Create and Execute a Residential Summer Instructional Program!	Kevin Hollinger Christine McElfresh	Poster session

AER Conference Schedule

Challenges and Considerations of Orientation and Mobility Services in a Large Metropolitan District in Louisville, Kentucky	Megan Penrod	Poster session
Creating 3D Models and 2D Tactile Graphics for Students with Visual Impairments: What is in Your Toolbox?	JinSeok Park Steve Kortenkamp Sunggye Hong	Poster session
Creating a Juvenile Braille Collection in Your Library!	Camille McCutcheon Tina Herzberg	Poster session
Faculty Staff recommendations of adaptations and provisions required to include Blind and visually Impaired in STEM disciplines in Nigeria	Sariat Adelakun Sariat Adelakun	Poster session
Grit as a measurement in the area of visual impairments	Sean Tikkun	Poster session
Hadley's Braille for Everyday Use	Douglas Walker Kim Walker	Poster session
Neurological Visual Impairment: Collaboration in the School Setting for Improved Outcomes	Margaret Beckley Rachel Lau	Poster session
O&M service decisions: What is guiding them if its not assessment?	Lauralyn Randles	Poster session
Science Innovation and the Development of a Polymer Braille Display	Qibing Pei Jinsung Kim Cheryl Hannan Jeanine Interiano	Poster session
The Management of Orthopedic Conditions in Activities of Daily Living for Clients with Vision Impairments	Margaret Beckley Katherine Greg	Poster session
Using Item Response Theory to Validate Assessments for Low-Incidence Populations in Early Childhood Special Education	Catherine Smyth	Poster session

AER Conference Schedule

Working Memory assessment in individuals with visual impairments	Sean Tikkun	Poster session
Working with Military-Connected Students who are Blind or Visually Impaired	Katherine Ericson	Poster session
3:00 PM - 4:30 PM		
3D models revolutionised access to Engineering diagrams to Blind and visually impaired in Nigeria	Sariat Adelakun Aminat Abdulsalaam Michael Kehinde Musibau Shittu Chukuka Udonna	Breakout session - 90 minutes
Adaptive Art Experience	Maureen Army Katherine Johnson	Breakout session - 90 minutes
Audible beaconing APS aid wayfinding at complex street crossings	Billie Bentzen Alan Scott Jennifer Graham	Breakout session - 90 minutes
Communication, Language, Concept Development and Literacy for Young Students and those with Multiple Disabilities in the Digital World	Betsy Flener	Breakout session - 90 minutes
ECC for Birth to Three	Luanne Stordahl Andrea Montano	Breakout session - 90 minutes
Getting Ready-Are You Prepared for the Next Disaster?	Margaret (Meg) Robertson	Breakout session - 90 minutes
Hidden Gems within Windows OS Accessibility	Larry Klug	Breakout session - 90 minutes
Moving Through Life – A Discussion of the Soft Skills of Orientation & Mobility	Peter Tucic Greg Stilson Leslie Hoskins Molly Pasley	Breakout session - 90 minutes

AER Conference Schedule

	Spencer Churchill	
Seeing the Trees from the Forest. New Insights into Cerebral Visual Impairment (CVI)	Arvind Chandna	Breakout session - 90 minutes
Supporting Transition Services at Every Age Level	Spencer Churchill	Breakout session - 90 minutes
Using a Cricut: Getting the "Cutting" Edge on Educational Materials for the Blind and Visually Impaired	Donna Lee Brian Goemmer Jasamyn Nicholas DeGrant Joann Brandenburg	Breakout session - 90 minutes
Virtual Thoughts: An Event-Driven Mixed Method Research Study of Early Intervention Practices During the COVID-19 Pandemic	DeEtte Snyder Catherine Smyth Hong "Nana" Phangia Dewald	Breakout session - 90 minutes
6:00 PM - 9:00 PM		
Evening Event – O&M / Large Divisions		
Sunday, July 24		
SESSION TITLE	SPEAKER(S)	*TYPE OF SESSION YOU ARE PROPOSING
7:00 AM - 10:00 AM		
Breakfast – Business Meeting		
10:15 AM - 11:15 AM		
Developing Braille Literacy in Middle School Students with Visual Impairments and Intellectual Disabilities	Leslie Borton	Breakout session - 60 minutes

AER Conference Schedule

Developing Family Capacity in Supporting the ECC	Chris Tabb	
Digital Competence: A Framework for Meaningful and Effective Device Use	Cheryl Hannan Michael Tuttle	Breakout session - 60 minutes
Educational Tools: APH Mantis Q40 and APH Chameleon 20	Bruce McClanahan Leslie Weilbacher Cecilia Robinson	Breakout session - 60 minutes
Eligibility Awareness: Understanding the Label of “Deafblind” for students across the US	Hilary Travers Rachel Schles	Breakout session - 60 minutes
Eliminating barriers to using assistive technology	Phillip Reeves Sergio Oliva Nutsiri (Earth) Kidkul	Breakout session - 60 minutes
Establishing Reliability for the VRT Functional Independent Living Assessment	Kendra Farrow Elyse Connors John McMahon Daniel Norris	Breakout session - 60 minutes
Graphicacy: Comparison of Traditional Methods to Emerging Technologies	Jen Tennison Spondita Goswami Derrick Smith Jenna Gorlewicz Nicholas Giudice Andreas Stefik Jesse Hairston Merlin Drews	Breakout session - 60 minutes
Mission INSPIRE: Promoting Success in STEM	Tiffany Wild Tina Herzberg	Breakout session - 60 minutes
O&M and CVI	Robert Wall Emerson Dawn Anderson	Breakout session - 60 minutes

AER Conference Schedule

O&M through digital skill building apps: from Barnyard to navigating around your own neighborhood	Marty Schultz	Breakout session - 60 minutes
Perspectives on Braille: Implications of Teachers' Understandings of Braille on Instructional Planning	M. Holbrook	Breakout session - 60 minutes
11:30 AM - 12:30 PM		
Addressing the When and How – Introducing Refreshable Braille technology through the use of Braille Learning Tables from Beginner to Linguist	Peter Tucic	Breakout session - 60 minutes
Braille Challenge Alumni Network	Rachel Antoine	Breakout session - 60 minutes
Examining the Access and Engagement of Students with Visual Impairments during the COVID-19 Pandemic	Tiffany Wild Tina Herzberg Danene Fast Carlie Rhoads	Breakout session - 60 minutes
Foundations for Communication: Teaching intentional behaviors to young children with multiple disabilities	Kitty Edstrand Jessica Matney	Breakout session - 60 minutes
GoTap Braille: The Engaging and Inclusive App Program and Kit for iPad	Betsy Flener	Breakout session - 60 minutes
Interteaching: Creating Authentic Interactions in Higher Education	Callie Brusegaard	Breakout session - 60 minutes
Missouri's "Blind Students' Rights to Independence, Training, and Education (BRITE)" Act – A review of successful collaboration among constituents.	Kevin Hollinger Anne Silea Gary Wunder	Breakout session - 60 minutes
Participation rates in general education mathematics classes among high school students with visual impairments	C. Rett McBride	Breakout session - 60 minutes
Teaching Math to the Blind: Graphing in Classrooms	Li Zhou	Breakout session - 60 minutes

AER Conference Schedule

Teaching pre-employment transition skills through a computer adventure game	Marty Schultz	Breakout session - 60 minutes
Travel Instruction: Models for Service Delivery	John Ford	Breakout session - 60 minutes

COMPLAINT INVESTIGATION LOG

Program	Issue	Complaint Number	Date Filed	60 day Timeline	Child Resolution	System Resolution	Complaint Closed	System Resolution
CHHS-N	Failure to follow Parent's Right to Disagree, Scope of work concerns for the therapist during the visit.	202201	3/31/22	5/30/22	Parent chose to close complaint after concerns were addressed by the program. No follow up due.		4/4/22	

Regional CAPTA Referrals

4/19/2022

The tables below contain CAPTA monthly referral counts by region organized by fiscal year.

FY2022 To Date				
	South	NW Reno	Rural	Monthly Total
July	104	7	4	115
August	103	10	2	115
September	89	4	2	95
October	61	6	5	72
November	52	5	3	60
December	66	5	5	76
January	70	10	6	86
February	72	6	5	83
March				0
April				0
May				0
June				0
Regional Total	617	53	32	702

Rural includes Carson City and outlying areas plus the NE Region outlying areas including Elko, Ely, and Winnemucca.

FY2021				
	South	NW Reno	Rural	Monthly Total
July	39	12	7	58
August	47	8	6	61
September	36	13	5	54
October	37	5	3	45
November	45	10	4	59
December	64	15	2	81
January	71	8	5	84
February	78	15	5	98
March	96	8	5	109
April	73	11	7	91
May	79	11	5	95
June	125	6	2	133
Regional Total	790	122	56	968

Rural includes Carson City and outlying areas plus the NE Region outlying areas including Elko, Ely, and Winnemucca.

Regional CAPTA Referrals
4/19/2022

FY2020				
	South	NW Reno	Rural	Monthly Total
July	52	7	3	62
August	47	9	5	61
September	32	12	3	47
October	22	10	6	38
November	25	7	7	39
December	31	20	3	54
January	58	8	6	72
February	57	14	7	78
March	26	13	4	43
April	40	9	6	55
May	32	17	3	52
June	49	11	5	65
Regional Total	471	137	58	666

Rural includes Carson City and outlying areas plus the NE Region outlying areas including Elko, Ely, and Winnemucca.

FY2019				
	South	NW Reno	Rural	Monthly Total
July	65	10	5	80
August	67	14	9	81
September	70	12	13	82
October	112	21	3	133
November	58	8	4	66
December	44	10	8	54
January	80	16	7	96
February	46	6	4	52
March	49	13	7	62
April	65	11	8	76
May	46	7	5	53
June	43	7	3	50
Regional Total	745	135	76	885

Rural includes Carson City and outlying areas plus the NE Region outlying areas including Elko, Ely, and Winnemucca.

IDEA Part C Family Survey Comments SFY2021

Comments by Program and Region

Many of the responses to the open-ended question identified specific providers who had been instrumental in delivering services that were appreciated by the families. Individual provider and children's names along with any family specific information were redacted from the report to maintain individual family anonymity. The following section reflects the comments as submitted by the respondents with the exception of the redacted information.

ADVANCED PEDIATRIC THERAPIES (APT)

- We are very pleased with the services and clinicians we work with. We've seen a lot of growth in our son because of it. My complaint is the method in which we receive services. We are still receiving PT virtually and it's just not providing us what we need. When my son was evaluated almost 9 months ago, I was told he was delayed due to low tone. The eval was done virtually. His low tone has been mentioned several times. And while our clinicians are wonderful in reassuring me not to worry, it's still concerning to me. So from research, I've spent the 9 months wondering if my child had cerebral palsy or some other condition and wondering if he'd need a wheelchair or a feeding tube, and other common conditions I see low toned children experiencing. Well fast forward to now, my son is referred to orthopedics. That doctor briefly manipulated his body and immediately told me his tone is fine. The orthotist also told us the same thing. While relieved, I'm also angry. I truly believe if our clinicians were able to physically examine my child, I would not have been told he has low tone and would have been saved 9 months of worry. This is at no fault of our clinicians. They are all wonderful and have reassured me this whole time. But they can only do so much virtually. I understand if they cannot come into our home, but I should be allowed to attend services at the clinic. He can see his dietitian in person and there are many children in the building when we go. Why can't my son receive in person services? I question if he would have graduated from services by now had he received in person care. His pediatrician and orthopedic doctor have both encouraged us to leave NEIS and go private so my son can receive in person services.
- Our family has struggled with the telehealth aspect of our child's therapy. We feel that our child would be better served by in-person visits.
- My DS, SLP and OT are the best team for my family. We are very Blessed. They have all helped so much in such a short time with our baby's development and we see the difference. If it weren't for the program, I would be lost and helpless with my very active boy.
- Thank you for all the support.
- My family is so grateful for APT's help and guidance!!! Keep up the great work!
- They try to help me and cover every aspect of my son's needs.
- They're so awesome. My son didn't care about talking and now he talks everyday all day. Thank you so much for your help.
- Thank u for everything the therapist do for our child

No comments were given in Spanish

THE CONTINUUM

- Our PT and DS are awesome!
- Virtual therapy for the past 11 months has been completely ineffective. If private providers and the school district are in person, why isn't EI? The risk is no greater. I'm considering pursuing private speech and reviewing my options for compensation.
- Our IFSP team has been so wonderful! I'm not sure what we would have done without their help.
- Our Family is extremely pleased with all our IFSP team. So helpful.
- Online services were not as effective or full filling as in-person sessions would be.

No comments were given in English or Spanish.

CAPABILITY HEALTH AND HUMAN SERVICE – NORTH (CHHS-N)

No comments were given in English or Spanish.

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CAPABILITY HEALTH AND HUMAN SERVICES – SOUTH (CHHS-S)

- We had a great experience with Early Intervention Capability Health Las Vegas. Our developmental specialist, Physical Therapist and Occupational Therapist gave exceptional service and were a huge help with everything we needed for our daughter. They did an awesome job in engaging with our daughter and gave effective strategies to apply at home with her exercises and activities she needed to get stronger. We're grateful we had them as part of our team! I would definitely recommend their services. The only feedback for the program would be to offer kids more sessions if needed and recommended by their providers. We're grateful for the sessions we were given but when a provider recommended increasing therapy to 4 or more a month, the most that was approved by a supervisor was 3 sessions a month. We're grateful for what we were given and that our developmental specialist and therapists helped support our needs but the decision was up to upper management. It shouldn't be limited to a set amount and should be based on medical necessity. If a child would benefit from receiving more sessions and especially if recommended, and to be able to stick with the same therapists rather than having to go to another clinic, that would be really helpful! Another solution would be to increase insurance coverage for when a child exits the program. We would have wanted to stick with the same therapist at the clinic since she was great and didn't want to start over with a new one, but they didn't take our insurance, so we were forced to search for someone else. Other than that, overall, it was an awesome experience and grateful for all the help that was given! Also, grateful we were able to continue telehealth even when the pandemic hit. Thank you for your services! May God bless you! =)
- The switch of therapy associates mid-way through the program was annoying. Luckily my sons adapted well. Also, the speech therapy person that was assigned to us after our first one left decided that after one session my boys no longer needed to see her. One son still has some speech issues, but I am able to help him with it.
- Great experience! Every therapist/provider was knowledgeable and compassionate to our son's needs.
- Overall, I am satisfied and happy with the results my child has had in this program. My only problem is I don't feel my child needs this program anymore and am discouraged by physical therapist to not stop...not sure how to end service as my daughter's doctor agrees my child is back on track
- We struggle with the telehealth. It's not the same as in person
- We had a wonderful experience with Early Intervention for our son. We are sad he aged out but are happy to be taking lots of strategies with us.
- Capabilities Health is doing well
- Every member of my team has been very supportive in helping me navigate through this time of uncertainty. They are patient, understanding and informative. My only regret is that we aren't meeting in person because of COVID. I think that my son would show much more improvement if he were coming into the facility, but for now they are awesome!!
- My child's team is doing a wonderful job meeting my daughter's needs. Thank you: our DS and therapists. Also, the school district did a great job explaining the preschool process at our meeting as well. 1 year ago, my daughter barely spoke only single repetitive words. Now my daughter is speaking in short sentences. It's amazing what child find does every day to help children and parents grow. I'm a teacher and previously tried everything I knew to meet my daughter's needs. Thankfully child find and I came up with a plan and helped me to discover new strategies to improve my daughter's speech, behavior, and physical needs.
- Each of my therapists and case worker were a great asset in helping me learn the best how-to's to parent & taught me, as a parent, different ways to help my 2-yr old communicate. It was a difficult year through covid & dealing with telehealth with a very busy 3yr old. Each therapist made the experience more enjoyable & every session I came out with better ideas to help me parent my autistic son. I had a very positive experience & would recommend with highest esteem!
- I am very pleased and thankful for the opportunity to have received these services for my daughter. She is doing amazing; she started with 2 words and is now talking 3 phrase words/ sentences Thanks so much!
- Our DS, PT and other therapist have all been amazing, very helpful & supportive with all our needs.
- Capability health has helped us understand how to help our child's mind develop in many ways. He has shown excellent progress and the therapists genuinely care about our family. I couldn't be more happy with the services we've received and the development we've seen in our son. They provide us with many options and the goals are clear and measured.
- After having horrible experience with my left foot, we were nervous to start services with Capability. They have been more helpful and considerate than we could have hoped for. Our SLP has made sure we have what we need, and my daughter has made so much progress because of her and Capability!

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- The program is good, but it would be a lot more effective if in-home services were offered and if more hours months of therapy were offered.
- My child receives speech therapy and every time I have requested notes/suggestions/best practices to be emailed to me after our session. It doesn't happen. So I've stopped asking.

No Comments translated from Spanish.

MDDA

- Our Developmental Specialist has been such an important part of our child's development. She has made a real impact!
- Our service coordinator is rude and disrespectful. She speaks to me as though she is some holy deity, and I am the scum of the earth. She talks over me and does not like it when I have an opinion that even slightly differs from hers. She has made our feelings on EI services be very negative based on our interactions with her. Our overall experience has not been positive.
- Our Team is absolutely fantastic!
- Our SLP & OT are very knowledgeable but our developmental specialist constantly needs to reschedule, requests docs be resigned & resent and does not provide information upon request. Have not seen 6mo review IFSP or goals and we are prepping for annual review.
- My child has not made any progress with telehealth services. She needs in person services for her age.

No Comments translated from Spanish.

NEVADA EARLY INTERVENTION SERVICES NORTHEAST (NEIS NE)

- Our DS has helped me and my family A TON! We are still working on communication skills with my daughter, at times my DS's advice and directions works but sometimes it doesn't. My DS is amazing at her job and any time something doesn't work she will give me new ideas to try. I couldn't have asked for a better provider!! She knows my family from the beginning to current. The children and the rest of the family love our DS!
- Due to covid-19 restrictions placed on our NEIS team, I do not feel they were able to properly provide us services that NEIS would have normally been able to- therefore causing conflict with comfort & helping my child to be completely successful with the program. I feel like the NEIS program failed us without having the NEIS crew doing home visits. especially since for us, our child was extremely far behind. Having help & time in person would have been much more beneficial for our child the costs, and the program use. Our team of NEIS was great, but NEIS failed our team by refusing them in-person access. We should be compensated for this by an extension of services.
- I have nothing but things to say about this service program. Since birth until now. She's almost 3 awesome people and awesome help! Thank you so much.
- Nutritional support info from our nutritionist has tremendously help filled the gap between Doc appointments for my child w/type 1 diabetes Thank you.
- We are so grateful full to have the team of people helping us make sure our son reaches his fullest potential. They are an extension to our family. Prior to our need for early intervention, we didn't even know such services existed. Thanks to all who dedicate their time to these amazing kiddos.

No comments translated from Spanish

NEVADA EARLY INTERVENTION SERVICES (NEIS CC) – CARSON CITY

- We are so thankful, grateful & blessed by the relationships we have created with your team members!! Thank you for all you have done for us!!
- Transitioning out of EI has been rough. We wrote a plan that was not followed by the district what is the point. Service Coordinator/Developmental Specialist did her part and helped us engage the district. Would have liked district information given directly so I could contact when testing/evaluation did not happen until 2 weeks before my son aged out. Felt very rushed and caused a lot of stress.
- The audiologist and the speech therapist are great!!
- I found it challenging to receive services for my young child via zoom/online calls. I understand safety comes first but just wanted to explain why I didn't use more "strongly agree" options.
- I can't express my gratitude and appreciation for my EIS team. They are understanding, patient, and walked me through this journey. My PT and DS are excellent team members, and I am so thankful for their help.

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- I love NEIS, but through COVID, how can the answers be positive.
- My team was amazing and as a full time working single mom, they really worked with me and gave me so many helpful tips and strategies to help my son develop his communication
- We absolutely adore our IFS team and are so thankful for them. We feel heard and valued about every concern there has been and have been offered tips, support, and techniques to help not only our son but our family as a whole. The folks and services with NEIS are invaluable.
- Resume in person sessions especially for young kids! It's been a year now. Ridiculous
- My son has been with NEIS in Carson City. The girls have been amazing to us. I have no complaints with the staff but the program itself is challenging. I understand with COVID happening, it makes hard to participate in the programs my son is in. We were able to finally meet the staff working on my son's case and it was nice to have them actually show parents how to do activities, physical therapy etc. I would like to continue to do this in person with them. I would like the facility to open again. Going through zoom/telehealth is very difficult and not helpful at all.

No comments translated from Spanish

NEVADA EARLY INTERVENTION SERVICES NORTHWEST (NEIS NW) – RENO

- Please , Please, Please let us go back to in-person services. Zoom is nowhere near adequate for my child.
- My DS and SLP have been immensely helpful in our son's development & speech. The physical therapists were also so supportive throughout the past 14 or so months that our son was able to graduate out of their services. Thank you for all you do for our children! We can't wait to meet our SLP in person, hopefully very soon. And to see our DS in person again too, zoom definitely has limitations.
- I encourage to please have more resources to families of children with cochlear implants! Maybe have teachers who are teachers of deaf/hard of hearing who have had experience with kids w/cochlear implants, counselors, play groups with kids and parents that have been through the process would be amazing for families. Try to have all the resources that Stanford offers here instead of families having to travel to Vegas or California. I ask that you please consider the CI kids in the future, also someone to teach them fluent sign language would be great as well. Thank you ! I just want to let you know I have a wonderful team here!
- We love our team. Thank you for everything!
- Our DS is amazing. She is always available if we have any questions or concerns. All her feedback, ideas and resources have been so helpful. We appreciate her so much, and we're so thankful for everything NEIS has done for our family.
- Great program for first time parents that struggle with health problems of infant. Would like to see more handouts pictures explanation of child development with age. I.e., where should be at said age.
- My IFSP team is amazing! They're very helpful & understanding, especially with any sudden changes we make. Also, the tools & activities they give us really have impacted my kids' learning skills. My DS and SLP are fantastic, and we're so grateful for them!
- My SLP and DS have been an absolute pleasure to work with. Although this year had its challenges, they truly cared about my child's needs which was evident in their services that were provided. A lot of my PT services have been wonderful. They have helped our family in so many ways and have provided resources and suggestions to help my child meet goals we weren't sure he would. We are so incredibly thankful to have had them help our son.
- My family had a DS and SLP as providers. They were so amazing with my son and my family. I will forever be grateful for all the help they gave us. They gave us tools we will now be able to use with our other baby. Thank you so much!
- Our worker is awesome and supportive
- Like our case workers! Would like to have more advocacy for programs such as social security, Daycare and outside services that would benefit my child.
- My child needs in-person physical therapy services to meet his needs.
- Thank you for the amazing program you guys run! You guys are doing an amazing job.
- Our DS, SLP & OT have helped my family more than I can express. I only hope that in person services may resume soon, as I believe that it is very difficult for parents to learn without being able to observe the professionals in action with these small children. My team truly did the best they could, despite having to "zoom" most of the year.
- Wish to be able to go into office to show how much my son has progressed. Kind of hard to do over zoom.

No Comments translated from Spanish

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NEVADA EARLY INTERVENTION SERVICES SOUTH (NEIS SO)

- Our DS and SLP are both helpful and nice. They are supportive regarding all areas of development and concern.
- My grandson's team has been amazing and always supportive throughout the entire process! I've been grateful for all they have helped him to achieve in such a short amount of time!
- At one point I was ready to leave NEIS due to feeling that program was a waste of time, but then I was assigned to my DS. She helped with every needed I had for my children. To this day with my aged out of the program and something came up with I will tell or ask about and she right on. I will miss her because my last child aged out in December. She changed my mind regard program; she is a keeper.
- Our coordinator has done a wonderful job guiding us through a challenging time with our daughter. She is extremely personable and always ensures us to reach out if needed. Along with every therapist/nutritionist and any additional services we have received, we know we could not give our daughter the best quality of life she deserves especially when meeting our major goal of not using her g-tube. We are eternally grateful to everyone in NEIS who have encourage, support and respected us the whole way through.
- I am very grateful for my EI services. My daughter has made tremendous growth + progress in her developmental milestone. We also feel great support when it comes to community activities even during a pandemic! The only concern I have is during my daughter's last two IFSP reviews she/we did not get any copies of her present levels or goal outcomes. I felt a bit lost on the last two reviews.
- Our DS's are FANTASTIC! They listen to all of my concerns and help me understand how to help my son and support him with his learning needs.
- Our developmental specialist has been amazing. She has done a great job coordinating everything.
- We are so thankful for our NEIS team! Our child turns 3 soon and will phase out of this beloved service community. Our family is filled with gratitude to our Las Vegas team that has helped us navigate what was unknown. Giving us the needed tools & encouragement towards victory. We whole-heartedly believe that our team's support has fostered in our own ability/confidence life and excitement for our child's unexpected but welcomed journey. Our child is thriving! Our survey is 10/10 for our team of developmental specialists & therapists. Thank you for your love these past 3 years!
- We love our developmental specialist!
- We are very happy with our Early Intervention Team. They're all very supportive and helpful with our daughter's needs. Our DS has been a wonderful Service Coordinator. We're looking forward to in-person visits playgroups.
- Our team w/NEIS was awesome. Our DS great w/being available when needed and coordinating with our therapists, SLP, DS, and OT. My son has shown great improvement and I'm thrilled with all the support we received.
- I am really grateful for all of my child's early intervention providers. They have really helped me feel confident in my child's abilities as well as my ability to help her progress.
- Due to covid it has been difficult giving info about activities for play groups etc. but our NEIS team is AWESOME! They have been going above and beyond during this difficult year.
- Very grateful for this program and our providers.
- Our DS has been amazing through this whole process. She has made it easy for us to understand the development process with our child. She was always available to answer all our questions and concerns.
- EIS has been great for my child and has really helped us. The first person we were assigned wasn't as helpful, but they no longer work there. Our new team member has been amazing, and our child has made huge progress.
- I would like to acknowledge my intervention provider, my DS, for her prompt, and dedication to my family needs. She will go out her way to find needed services and activities to help meet my child needs.
- My DS has been so awesome with our child and his needs. Always asking if there is any other help that we need. Evelyn the speech therapist is amazing! She is so kind and patient. She has been so encouraging and reassuring with our child's milestones. We have been so thankful for all the help we have received.
- Everyone on my team has been amazing. I feel that everyone cares about my son & is working together to get him all the help that he needs. We have not been in the program long (since July 2020), but we have seen massive growth in his areas of need. My DS has been awesome.
- We love our therapists! Our OT, PT, Speech, Nutrition, and Coordinator.
- My team has been amazing right from the beginning. They are all very dedicated and truly care to see positive outcomes for my child. They go above and beyond to accomplish our set goals each month. A big

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shout out to our DS and OT, who have been amazing on this journey with us. We are very happy and grateful to our team! Thank you!

- My case manager in Las Vegas was amazing. He helped me understand my rights in a compassionate way. He supported my family by providing learning activities, understand my child's strength, and made me feel like my opinion mattered. Our SC was a huge reason my daughter is so successful today!
- Overall, EIS has provided the services needed for my child's growth and understanding, however, my biggest concern is doing all of this virtually. My child was 2 and there is no way we could make him sit there for 1 hour each session, much less get any productive services for him. The sessions were more for me to get recommendations on how to address some of the concerns.
- We look forward to being able to have more productive sessions in person when the covid-19 pandemic is over.
- My son began EI June 2020. Unfortunately, due to Covid I feel there has been a lack of support. Doing telehealth is not something that goes well for my son. Our service coordinator only saw him as a child who would scream & cry on the computer. I feel that our service coordinator never got to see all the great things my son has accomplished. I was dissatisfied overall with our service coordinator. I felt like I would express my feelings of frustration & she just didn't seem supportive. I sought therapy & services elsewhere that are in person which has been so beneficial for my son. I do think NEIS would have been more helpful to us if it was in person.
- Our DS has been a wonderful for our son and is always there for me if I have any questions. Our SLP is also great in helping speech therapy which is now a concern of mine. I appreciate the time & hard work from the IFSP members that are helping my son & family.
- Hello, our DS help us a lot in everything. Almost everything. She gave us more information and provide informative activities. She's our angel. Not just her but also those who help. Can't tell their names but I'm so thankful. Now my child is talking a lot and well-potty trained. Thanks for your help. God bless all of you.
- We have had awesome experiences and are very appreciative of your services.
- My family is happy with the support we've received from NEIS! Thank you!
- NEIS has been an immense blessing to our family. Our Developmental Specialist is phenomenal and has helped us in so many ways. We are so grateful for her and for the therapists that we've been privileged to work with!
- NEIS has helped to educate me on how I can best help my child to work and develop appropriately. Their services are invaluable and I'm extremely grateful for them.
- All services are wonderful, except the impact of the pandemic. Thank you
- Our DS has been a great asset to my children development. I will tell anyone if it wasn't for her, I was leaving the program. Before her I felt as if I was not receiving any help or the correct services for my children
- My providers are great and well informed when I ask questions
- It's been a positive experience all around
- I really appreciate having so many knowledgeable and caring people to help me understand my child's needs. I feel so lucky to have our DS's help throughout this whole process. I feel so comfortable telling her anything and can reach out to her anytime I need, and she is ALWAYS supportive and caring. She's absolutely an amazing person. We also receive services from Speech and OT, and I believe I would be in a much different state of mind without their advice and knowledge. This whole program has impacted our life in such a positive way, I'm so grateful.
- I am getting ready to complete the program with my son in June, I just want to say thank you all for taking this journey with my family. We are so grateful to have your help during this whole ride and we are so proud of the success our son has had with the help of the staff members.
- COVID-19 has been challenging for our child meeting services that are meaningful and helpful to her. We appreciate staff being creative and meeting over Zoom, but the services are very difficult to optimize for her.
- We are truly happy with the services we have received. Our family has benefits from these services dramatically. Our assigned person/DS is great with us. My DS is so patient and understanding of our needs. She always has great suggestions on how to help our baby girl. Our OT Specialist is also great. She sends me links to help me with my child. The links are very helpful.
- We had an amazing experience with our NEIS Team. They were an extended part of our family and provided valuable services for our daughter. Specifically, our DS was PERFECT. I don't have enough words to explain exactly how much she helped. If we could keep our DS and ST forever, we would.

Comments translated from Spanish to English

IDEA Part C Family Survey Comments SFY2021

- I am very grateful to all the people who have helped my daughter, she loves them very much. They have helped my family a lot in everything knowing them is the best thing that I could asked for.

POSITIVELY KIDS

- Positively Kids Early Intervention has been great! I look forward to them returning to our in-home visits.
- All providers of services we have had so far have been fabulous. My children have always looked forward to their therapy sessions, both past and present.
- Our DS is very helpful & supportive. She ALWAYS has time, energy & care and ideas! My son adores our SLP with speech, she makes it so fun! Our behaviorist is very supportive & knowledgeable of not only behavioral support with community resources & medical services & insurances.
- Great experience . Every healthful
- Our DS is the best helper. And her teams. Five stars and 2 thumbs up.
- I absolutely love the team at Positively Kids. They're so caring and supportive. Their knowledge has empowered us in our journey with our son. It takes a village to raise a child properly. We feel the team at Positively Kids is a vital part of our family's journey. Specifically, our DS and nutritionist at PK have been extremely helpful and supportive to us. Thanks to all at Positively Kids for assisting us and providing terrific support!
- The whole time is awesome! They have been very patient and helpful throughout the whole process!
- This service was absolutely amazing! Every person was fantastic! My team were a huge help to not only our son but us as well! They are so fantastic at what they do!
- I've used another organization for early intervention services, and it was a terrible experience. Positively Kids does such a fantastic job that it seems more like a private organization that costs thousands of dollars for treatment. The people and services they provide are truly exceptional.

Comment translated from Spanish

- A thousand thanks for helping us understand our children, Blessings

THERAPY MANAGEMENT GROUP NORTH (TMG N)

- My team has been a great asset and support through unpredictable issues with my little one as well as during a trying time in the world. Our SLP, DS and dietician have always made themselves available to me if I had questions or concerns even outside of our scheduled visits. I greatly appreciate their support and guidance with my daughter.
- I will admit that I was very intimidated in the beginning when dealing with any county/ state appointed ----- because we, as adoptive parents always live under the silent threat/danger of If we do or say anything improper, or that is an unknown rule that is broken we could lose that is wonderful little child that has taken our hearts and enriched our lives. Now I am more comfortable after 1 1/2 years asking for help and listening to these people Our DS at TMG and other ladies of WIC to name only a few who have been a blessing in our journey.

No comments in Spanish

THERAPY MANAGEMENT GROUP SOUTH (TMG S)

- I truly feel like my children would benefit from early intervention coming into the home again.
- I appreciate all that DS and SLP have done for me and my little boy. They have been great! We will miss seeing them every month.
- We have been enjoying speech therapy
- Zoom didn't work well. But they really helped me navigate the complicated maze of autism services in Las Vegas.
- Our SLP's and DS were all amazing to collaborate with to help my son develop, grow, learn, and communicate.
- We have not had a strong relationship with our child's speech therapist and feel it has not really helped in a positive way, or helped in working towards our child end goals.
- I love our DS and SLP at TMG Las Vegas. They are so helpful and kind. They are also very accessible. I couldn't be more pleased with the whole process. I would like to resume in person services.
- TMG was so great with helping me understand my son and was very helpful to show me how to communicate with him because he doesn't talk so the showed me sign language etc.. I am so thankful for this help they were able to help us. Even if it was thru zoom in our case it was ok because my son was only 2 so he was not

IDEA Part C Family Survey Comments SFY2021

ready to go in a clinic on his own, they usually have someone come to the home but because of the pandemic it wasn't possible. But all the help they gave us was wonderful!!!

- We love our team and wouldn't give them up for nothing. Just wish they can come into the home already cause it would make it much easier for team to see kids in person.
- My Early Intervention Team has helped me with two children now. We have worked together to improve the children's physical & emotional strengths. They stay and support both me and the child until the child reaches full potential. The Early Intervention are available for questions and concerns and are genuinely thrilled with any progress the child makes. The Early Intervention Team assigned to me are awesome!!
- Our experience with TMG has been nothing short of great. No parent wants their child to go through this, having delays in various areas or even the thought of our DS, SLP and team have really helped us with our son and we truly see improvements in his development. we can't thank them enough. So glad this services are available to families like ours. Its hard work, but if you put forth the effort. Its totally worth it.
- Early interventions services has done more than enough to communicate with us & helping us understand our child through the difficult year 2020 has brought, they have been informative through this challenging time through telehealth/zoom meetings.
- Loved the service & assistance we get!
- I feel penalized for getting services in the community. My copay is high but my child deserves the best. Feel as though they are getting punished for me being on top of their therapy needs.
- I Feel as though my child is being punished because I sought treatment in the community. My copay is substantial, yet I need to continue services because I cannot get them through my ISFP.
- I have had a wonderful experience. My DS, PT and SLP are all amazing people. Helpful, caring and knowledgeable. They have become my friends. This program is wonderful! (our feeding specialist) My only complaint is that I heard about this program from a friend in Massachusetts. My kids were in the NICU at Summerlin Hospital for a very long time and no one mentioned early intervention to me.
- It seemed strange to me that my child's speech therapist would only meet with us once a month and the service coordinator would meet with us more and do speech activities with us. Then, as she started speaking more, he offered to meet with us more. Did he just already have a full schedule? She wasn't as receptive to him when he initially tried to meet more often, so he scaled back and had the service coordinator provide more support instead of trying different activities with her first maybe he could have done things differently had I asked. I've just been following his lead since he's the expert. Thank you! I am pretty satisfied with my child's services, but I know there are families in my community who are unhappy with theirs, so thank you for taking the time to check in with us all! Could you encourage outdoor in person visits maybe during the pandemic? It would be nice to have the option when the weather is nice.
- Covid has really put a damper on my child's progress, so I think it's hard to give strongly agree on some. Just due to rate there has been little opportunity to rate. But I am so grateful for everything.
- My family and I believe our son has been able to make progress because of the staff at Therapy Management Group. I do not know where we would be without our DS, SLP and team. Thank you!!
- Working with TMG has been an absolute fantastic experience. They are an incredible group and the team I worked with specifically our DS, SLP and team were such Godsend. I will forever appreciate their help and support. Thanks!

No Comments translated from Spanish

NO PROGRAM IDENTIFIED

- My children and I could not have gotten where we are without the guidance and support we have and are given by the providers. I support and are grateful for all help they have given us.
- Our PT is awesome! Her physical therapy support has been consistently awesome! The other areas of therapy have been a bit inconsistent or non-existent. It shows how much of a shining star our PT is!

No Comments translated from Spanish

2022 Family Survey Preliminary Results

Early Intervention services and supports help me understand my child's strengths, abilities, and special needs.												
Program (number responses)	Agree	Disagree	Strongly agree	Strongly Disagree	Undecided	(blank)	Grand Total	Program (response percentages)	Agree/Strongly Agree	Strongly Disagree/Disagree	Undecided	Blank
Advanced Pediatric Therapies (APT)-Sparks	5		22		1		28	Advanced Pediatric Therapies (APT)-Sparks	96.43	0.00	3.57	0
Capability Health and Human Services (CHHS)-Las Vegas	20		33		4		57	Capability Health and Human Services (CHHS)-Las Vegas	92.98	0.00	7.02	0
Capability Health and Human Services (CHHS)-Reno	2		5				7	Capability Health and Human Services (CHHS)-Reno	100.00	0.00	0.00	0
MD Developmental Agency (MDDA)-Las Vegas	2		2				4	MD Developmental Agency (MDDA)-Las Vegas	100.00	0.00	0.00	0
NEIS- North East (Elko/Ely/Winnemucca)	4		8				12	NEIS- North East (Elko/Ely/Winnemucca)	100.00	0.00	0.00	0
NEIS-Carson City	6		13				19	NEIS-Carson City	100.00	0.00	0.00	0
NEIS-Reno	13		41		1		55	NEIS-Reno	98.18	0.00	1.82	0
NEIS-South (Las Vegas)	27	1	53	1	2		84	NEIS-South (Las Vegas)	95.24	2.38	2.38	0
Positively Kids-Las Vegas	9		11		2	1	23	Positively Kids-Las Vegas	90.91	0.00	9.09	1
The Continuum-Reno	5		6		1		12	The Continuum-Reno	91.67	0.00	8.33	0
Therapy Management Group (TMG)-Las Vegas	12		25				37	Therapy Management Group (TMG)-Las Vegas	100.00	0.00	0.00	0
Therapy Management Group (TMG)-Reno	2		7				9	Therapy Management Group (TMG)-Reno	100.00	0.00	0.00	0
(blank)	2		8				10	(blank)	100.00	0.00	0.00	0
Grand Total	109	1	234	1	11	1	357	STATEWIDE TOTAL	96.35	0.56	3.09	1

Members of my Individualized Family Services Plan (IFSP) team provide all the information I need to fully participate in developing our IFSP.												
Program (number responses)	Agree	Disagree	Strongly agree	Strongly Disagree	Undecided	(blank)	Grand Total	Program (response percentages)	Agree/Strongly Agree	Strongly Disagree/Disagree	Undecided	Blank
Advanced Pediatric Therapies (APT)-Sparks	4		23		1		28	Advanced Pediatric Therapies (APT)-Sparks	96.43	0.00	3.57	0
Capability Health and Human Services (CHHS)-Las Vegas	20	4	30		3		57	Capability Health and Human Services (CHHS)-Las Vegas	87.72	7.02	5.26	0
Capability Health and Human Services (CHHS)-Reno	1		6				7	Capability Health and Human Services (CHHS)-Reno	100.00	0.00	0.00	0
MD Developmental Agency (MDDA)-Las Vegas	1		3				4	MD Developmental Agency (MDDA)-Las Vegas	100.00	0.00	0.00	0
NEIS- North East (Elko/Ely/Winnemucca)	4		8				12	NEIS- North East (Elko/Ely/Winnemucca)	100.00	0.00	0.00	0
NEIS-Carson City	6	1	12				19	NEIS-Carson City	94.74	5.26	0.00	0
NEIS-Reno	8		44		3		55	NEIS-Reno	94.55	0.00	5.45	0
NEIS-South (Las Vegas)	30		52	1	1		84	NEIS-South (Las Vegas)	97.62	1.19	1.19	0
Positively Kids-Las Vegas	8		15				23	Positively Kids-Las Vegas	100.00	0.00	0.00	0
The Continuum-Reno	4		8				12	The Continuum-Reno	100.00	0.00	0.00	0
Therapy Management Group (TMG)-Las Vegas	12		25				37	Therapy Management Group (TMG)-Las Vegas	100.00	0.00	0.00	0
Therapy Management Group (TMG)-Reno	2		7				9	Therapy Management Group (TMG)-Reno	100.00	0.00	0.00	0
(blank)	1		9				10	(blank)	100.00	0.00	0.00	0
Grand Total	101	5	242	1	8	0	357	STATEWIDE TOTAL	96.08	1.68	2.24	0

As a member of my IFSP team, my opinions count and are honored by other members of the team.											
Program (number responses)	Agree	Strongly agree	Strongly Disagree	Undecided	(blank)	Grand Total	Program (response percentages)	Agree/Strongly Agree	Strongly Disagree/Disagree	Undecided	Blank
Advanced Pediatric Therapies (APT)-Sparks	2	25		1		28	Advanced Pediatric Therapies (APT)-Sparks	96.43	0.00	3.57	0
Capability Health and Human Services (CHHS)-Las Vegas	19	36		2		57	Capability Health and Human Services (CHHS)-Las Vegas	96.49	0.00	3.51	0
Capability Health and Human Services (CHHS)-Reno	2	5				7	Capability Health and Human Services (CHHS)-Reno	100.00	0.00	0.00	0
MD Developmental Agency (MDDA)-Las Vegas	1	3				4	MD Developmental Agency (MDDA)-Las Vegas	100.00	0.00	0.00	0
NEIS- North East (Elko/Ely/Winnemucca)	4	8				12	NEIS- North East (Elko/Ely/Winnemucca)	100.00	0.00	0.00	0
NEIS-Carson City	6	12		1		19	NEIS-Carson City	94.74	0.00	5.26	0
NEIS-Reno	10	44		1		55	NEIS-Reno	98.18	0.00	1.82	0
NEIS-South (Las Vegas)	23	59	1		1	84	NEIS-South (Las Vegas)	98.80	1.20	0.00	1
Positively Kids-Las Vegas	4	18		1		23	Positively Kids-Las Vegas	95.65	0.00	4.35	0
The Continuum-Reno	4	8				12	The Continuum-Reno	100.00	0.00	0.00	0
Therapy Management Group (TMG)-Las Vegas	7	29		1		37	Therapy Management Group (TMG)-Las Vegas	97.30	0.00	2.70	0
Therapy Management Group (TMG)-Reno	2	7				9	Therapy Management Group (TMG)-Reno	100.00	0.00	0.00	0
(blank)	2	8				10	(blank)	100.00	0.00	0.00	0
Grand Total	86	262	1	7	1	357	STATEWIDE TOTAL	97.75	0.28	1.97	1

I am comfortable talking with my early intervention service providers about what is important to me and my family.											
Program (number responses)	Agree	Strongly agree	Strongly Disagree	Undecided	(blank)	Grand Total	Program (response percentages)	Agree/Strongly Agree	Strongly Disagree/Disagree	Undecided	Blank
Advanced Pediatric Therapies (APT)-Sparks	3	24		1		28	Advanced Pediatric Therapies (APT)-Sparks	96.43	0.00	3.57	0
Capability Health and Human Services (CHHS)-Las Vegas	18	39				57	Capability Health and Human Services (CHHS)-Las Vegas	100.00	0.00	0.00	0
Capability Health and Human Services (CHHS)-Reno	1	6				7	Capability Health and Human Services (CHHS)-Reno	100.00	0.00	0.00	0
MD Developmental Agency (MDDA)-Las Vegas	1	3				4	MD Developmental Agency (MDDA)-Las Vegas	100.00	0.00	0.00	0
NEIS- North East (Elko/Ely/Winnemucca)	4	8				12	NEIS- North East (Elko/Ely/Winnemucca)	100.00	0.00	0.00	0

NEIS-Carson City	7	12				19		NEIS-Carson City	100.00	0.00		0.00	0
NEIS-Reno	9	45		1		55		NEIS-Reno	98.18	0.00		1.82	0
NEIS-South (Las Vegas)	19	63	1		1	84		NEIS-South (Las Vegas)	97.62	1.19		1.19	0
Positively Kids-Las Vegas	4	19				23		Positively Kids-Las Vegas	100.00	0.00		0.00	0
The Continuum-Reno	2	10				12		The Continuum-Reno	100.00	0.00		0.00	0
Therapy Management Group (TMG)-Las Vegas	7	30				37		Therapy Management Group (TMG)-Las Vegas	100.00	0.00		0.00	0
Therapy Management Group (TMG)-Reno	1	8				9		Therapy Management Group (TMG)-Reno	100.00	0.00		0.00	0
(blank)	2	8				10		(blank)	100.00	0.00		0.00	0
Grand Total	78	275	1	3	0	357		STATEWIDE TOTAL	98.88	0.28		0.84	0

I have meaningful conversations with our service providers about my child's social-emotional development (positive interactions with others, learning to control emotions and behaviors, understanding and following rules and being able to effectively communicate needs).													
Program (number responses)	Agree	Disagree	Strongly agree	Strongly Disagree	Undecided	(blank)	Grand Total	Program (response percentages)	Agree/Strongly Agree	Strongly Disagree/Disagree	Undecided	Blank	
Advanced Pediatric Therapies (APT)-Sparks	5		20		2	1	28	Advanced Pediatric Therapies (APT)-Sparks	92.59	0.00		7.41	1
Capability Health and Human Services (CHHS)-Las Vegas	20	1	33		3		57	Capability Health and Human Services (CHHS)-Las Vegas	92.98	1.75		5.26	0
Capability Health and Human Services (CHHS)-Reno	1		5		1		7	Capability Health and Human Services (CHHS)-Reno	85.71	0.00		14.29	0
MD Developmental Agency (MDDA)-Las Vegas	2		2				4	MD Developmental Agency (MDDA)-Las Vegas	100.00	0.00		0.00	0
NEIS- North East (Elko/Ely/Winnemucca)	4		8				12	NEIS- North East (Elko/Ely/Winnemucca)	100.00	0.00		0.00	0
NEIS-Carson City	5	1	13				19	NEIS-Carson City	94.74	5.26		0.00	0
NEIS-Reno	12		43				55	NEIS-Reno	100.00	0.00		0.00	0
NEIS-South (Las Vegas)	22	3	55	1	3		84	NEIS-South (Las Vegas)	91.67	4.76		3.57	0
Positively Kids-Las Vegas	4		18		1		23	Positively Kids-Las Vegas	95.65	0.00		4.35	0
The Continuum-Reno	8		4				12	The Continuum-Reno	100.00	0.00		0.00	0
Therapy Management Group (TMG)-Las Vegas	6		30		1		37	Therapy Management Group (TMG)-Las Vegas	97.30	0.00		2.70	0
Therapy Management Group (TMG)-Reno	2		7				9	Therapy Management Group (TMG)-Reno	100.00	0.00		0.00	0
(blank)	2		8				10	(blank)	100.00	0.00		0.00	0
Grand Total	93	5	246	1	11	1	357	STATEWIDE TOTAL	95.22	1.69		3.09	1

The early intervention services we received have helped me effectively communicate my child's needs.													
Program (number responses)	Agree	Disagree	Strongly agree	Strongly Disagree	Undecided	(blank)	Grand Total	Program (response percentages)	Agree/Strongly Agree	Strongly Disagree/Disagree	Undecided	Blank	
Advanced Pediatric Therapies (APT)-Sparks	6		21		1		28	Advanced Pediatric Therapies (APT)-Sparks	96.43	0.00		3.57	0
Capability Health and Human Services (CHHS)-Las Vegas	21	1	31		4		57	Capability Health and Human Services (CHHS)-Las Vegas	91.23	1.75		7.02	0
Capability Health and Human Services (CHHS)-Reno	1		5		1		7	Capability Health and Human Services (CHHS)-Reno	85.71	0.00		14.29	0
MD Developmental Agency (MDDA)-Las Vegas	1		2		1		4	MD Developmental Agency (MDDA)-Las Vegas	75.00	0.00		25.00	0
NEIS- North East (Elko/Ely/Winnemucca)	4		8				12	NEIS- North East (Elko/Ely/Winnemucca)	100.00	0.00		0.00	0
NEIS-Carson City	5	2	12				19	NEIS-Carson City	89.47	10.53		0.00	0
NEIS-Reno	13	1	38		3		55	NEIS-Reno	92.73	1.82		5.45	0
NEIS-South (Las Vegas)	25	2	54	1	2		84	NEIS-South (Las Vegas)	94.05	3.57		2.38	0
Positively Kids-Las Vegas	8		15				23	Positively Kids-Las Vegas	100.00	0.00		0.00	0
The Continuum-Reno	5		7				12	The Continuum-Reno	100.00	0.00		0.00	0
Therapy Management Group (TMG)-Las Vegas	13		22		2		37	Therapy Management Group (TMG)-Las Vegas	94.59	0.00		5.41	0
Therapy Management Group (TMG)-Reno	1		7		1		9	Therapy Management Group (TMG)-Reno	88.89	0.00		11.11	0
(blank)	2		8				10	(blank)	100.00	0.00		0.00	0
Grand Total	105	6	230	1	15	0	357	STATEWIDE TOTAL	93.84	1.96		4.20	0

I have a key role in all decisions related to early intervention services for my child and family.													
Program (number responses)	Agree	Strongly agree	Strongly Disagree	Undecided	(blank)	Grand Total	Program (response percentages)	Agree/Strongly Agree	Strongly Disagree/Disagree	Undecided	Blank		
Advanced Pediatric Therapies (APT)-Sparks	3	24		1		28	Advanced Pediatric Therapies (APT)-Sparks	96.43	0.00		3.57	0	
Capability Health and Human Services (CHHS)-Las Vegas	17	40				57	Capability Health and Human Services (CHHS)-Las Vegas	100.00	0.00		0.00	0	
Capability Health and Human Services (CHHS)-Reno		7				7	Capability Health and Human Services (CHHS)-Reno	100.00	0.00		0.00	0	
MD Developmental Agency (MDDA)-Las Vegas	1	3				4	MD Developmental Agency (MDDA)-Las Vegas	100.00	0.00		0.00	0	
NEIS- North East (Elko/Ely/Winnemucca)	4	8				12	NEIS- North East (Elko/Ely/Winnemucca)	100.00	0.00		0.00	0	
NEIS-Carson City	7	11		1		19	NEIS-Carson City	94.74	0.00		5.26	0	
NEIS-Reno	8	46		1		55	NEIS-Reno	98.18	0.00		1.82	0	
NEIS-South (Las Vegas)	20	62	1	1		84	NEIS-South (Las Vegas)	97.62	1.19		1.19	0	
Positively Kids-Las Vegas	6	17				23	Positively Kids-Las Vegas	100.00	0.00		0.00	0	
The Continuum-Reno	3	8			1	12	The Continuum-Reno	100.00	0.00		0.00	1	
Therapy Management Group (TMG)-Las Vegas	5	31		1		37	Therapy Management Group (TMG)-Las Vegas	97.30	0.00		2.70	0	
Therapy Management Group (TMG)-Reno	3	6				9	Therapy Management Group (TMG)-Reno	100.00	0.00		0.00	0	
(blank)	4	6				10	(blank)	100.00	0.00		0.00	0	

Grand Total	81	269	1	5	1	357		STATEWIDE TOTAL	98.31	0.28	1.40	1
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My early intervention service providers respect my family's cultural values and preferences.												
Program (number responses)	Agree	Disagree	Strongly agree	Strongly Disagree	Undecided	(blank)	Grand Total	Program (response percentages)	Agree/Strongly Agree	Strongly Disagree/Disagree	Undecided	Blank
Advanced Pediatric Therapies (APT)-Sparks	2	1	25				28	Advanced Pediatric Therapies (APT)-Sparks	96.43	3.57	0.00	0
Capability Health and Human Services (CHHS)-Las Vegas	17		40				57	Capability Health and Human Services (CHHS)-Las Vegas	100.00	0.00	0.00	0
Capability Health and Human Services (CHHS)-Reno			7				7	Capability Health and Human Services (CHHS)-Reno	100.00	0.00	0.00	0
MD Developmental Agency (MDDA)-Las Vegas	1		3				4	MD Developmental Agency (MDDA)-Las Vegas	100.00	0.00	0.00	0
NEIS- North East (Elko/Ely/Winnemucca)	4		8				12	NEIS- North East (Elko/Ely/Winnemucca)	100.00	0.00	0.00	0
NEIS-Carson City	8		11				19	NEIS-Carson City	100.00	0.00	0.00	0
NEIS-Reno	9		45		1		55	NEIS-Reno	98.18	0.00	1.82	0
NEIS-South (Las Vegas)	18		64	1	1		84	NEIS-South (Las Vegas)	97.62	1.19	1.19	0
Positively Kids-Las Vegas	5		17			1	23	Positively Kids-Las Vegas	100.00	0.00	0.00	1
The Continuum-Reno	2		8		1	1	12	The Continuum-Reno	90.91	0.00	9.09	1
Therapy Management Group (TMG)-Las Vegas	7		30				37	Therapy Management Group (TMG)-Las Vegas	100.00	0.00	0.00	0
Therapy Management Group (TMG)-Reno	1		7		1		9	Therapy Management Group (TMG)-Reno	88.89	0.00	11.11	0
(blank)	2		8				10	(blank)	100.00	0.00	0.00	0
Grand Total	76	1	273	1	4	2	357	STATEWIDE TOTAL	98.31	0.56	1.13	2

I know who to contact if I have a question or concern about my child's early intervention services.												
Program (number responses)	Agree	Disagree	Strongly agree	Strongly Disagree	Undecided	(blank)	Grand Total	Program (response percentages)	Agree/Strongly Agree	Strongly Disagree/Disagree	Undecided	Blank
Advanced Pediatric Therapies (APT)-Sparks	3	1	23		1		28	Advanced Pediatric Therapies (APT)-Sparks	92.86	3.57	3.57	0
Capability Health and Human Services (CHHS)-Las Vegas	15	2	37		3		57	Capability Health and Human Services (CHHS)-Las Vegas	91.23	3.51	5.26	0
Capability Health and Human Services (CHHS)-Reno		1	6				7	Capability Health and Human Services (CHHS)-Reno	85.71	14.29	0.00	0
MD Developmental Agency (MDDA)-Las Vegas	1		3				4	MD Developmental Agency (MDDA)-Las Vegas	100.00	0.00	0.00	0
NEIS- North East (Elko/Ely/Winnemucca)	4		8				12	NEIS- North East (Elko/Ely/Winnemucca)	100.00	0.00	0.00	0
NEIS-Carson City	6		13				19	NEIS-Carson City	100.00	0.00	0.00	0
NEIS-Reno	8	1	45		1		55	NEIS-Reno	96.36	1.82	1.82	0
NEIS-South (Las Vegas)	21		62	1			84	NEIS-South (Las Vegas)	98.81	1.19	0.00	0
Positively Kids-Las Vegas	5	1	17				23	Positively Kids-Las Vegas	95.65	4.35	0.00	0
The Continuum-Reno	4		7			1	12	The Continuum-Reno	100.00	0.00	0.00	1
Therapy Management Group (TMG)-Las Vegas	5		32				37	Therapy Management Group (TMG)-Las Vegas	100.00	0.00	0.00	0
Therapy Management Group (TMG)-Reno	1		8				9	Therapy Management Group (TMG)-Reno	100.00	0.00	0.00	0
(blank)	1		9				10	(blank)	100.00	0.00	0.00	0
Grand Total	74	6	270	1	5	1	357	STATEWIDE TOTAL	96.63	1.97	1.40	1

I understand our IFSP can be reviewed and revised by the team any time we choose.												
Program (number responses)	Agree	Disagree	Strongly agree	strongly Disagree	Undecided	(blank)	Grand Total	Program (response percentages)	Agree/Strongly Agree	Strongly Disagree/Disagree	Undecided	Blank
Advanced Pediatric Therapies (APT)-Sparks	4		24				28	Advanced Pediatric Therapies (APT)-Sparks	100.00	0.00	0.00	0
Capability Health and Human Services (CHHS)-Las Vegas	21	1	33		2		57	Capability Health and Human Services (CHHS)-Las Vegas	94.74	1.75	3.51	0
Capability Health and Human Services (CHHS)-Reno	1		6				7	Capability Health and Human Services (CHHS)-Reno	100.00	0.00	0.00	0
MD Developmental Agency (MDDA)-Las Vegas	1		3				4	MD Developmental Agency (MDDA)-Las Vegas	100.00	0.00	0.00	0
NEIS- North East (Elko/Ely/Winnemucca)	4		8				12	NEIS- North East (Elko/Ely/Winnemucca)	100.00	0.00	0.00	0
NEIS-Carson City	7		12				19	NEIS-Carson City	100.00	0.00	0.00	0
NEIS-Reno	11		42	1	1		55	NEIS-Reno	96.36	1.82	1.82	0
NEIS-South (Las Vegas)	24		57	1	2		84	NEIS-South (Las Vegas)	96.43	1.19	2.38	0
Positively Kids-Las Vegas	5		18				23	Positively Kids-Las Vegas	100.00	0.00	0.00	0
The Continuum-Reno	6		5			1	12	The Continuum-Reno	100.00	0.00	0.00	1
Therapy Management Group (TMG)-Las Vegas	9		28				37	Therapy Management Group (TMG)-Las Vegas	100.00	0.00	0.00	0
Therapy Management Group (TMG)-Reno	2		7				9	Therapy Management Group (TMG)-Reno	100.00	0.00	0.00	0
(blank)	2		8				10	(blank)	100.00	0.00	0.00	0
Grand Total	97	1	251	2	5	1	357	STATEWIDE TOTAL	97.75	0.84	1.40	1

My family receives all the early intervention services that we agreed to on our IFSP.												
Program (number responses)	Agree	Disagree	Strongly agree	Strongly Disagree	Undecided	(blank)	Grand Total	Program (response percentages)	Agree/Strongly Agree	Strongly Disagree/Disagree	Undecided	Blank
Advanced Pediatric Therapies (APT)-Sparks	4		24				28	Advanced Pediatric Therapies (APT)-Sparks	100.00	0.00	0.00	0
Capability Health and Human Services (CHHS)-Las Vegas	19	3	31		4		57	Capability Health and Human Services (CHHS)-Las Vegas	87.72	5.26	7.02	0
Capability Health and Human Services (CHHS)-Reno	2		5				7	Capability Health and Human Services (CHHS)-Reno	100.00	0.00	0.00	0
MD Developmental Agency (MDDA)-Las Vegas	1		3				4	MD Developmental Agency (MDDA)-Las Vegas	100.00	0.00	0.00	0

NEIS- North East (Elko/Ely/Winnemucca)	4		8				12	NEIS- North East (Elko/Ely/Winnemucca)	100.00	0.00		0.00	0
NEIS-Carson City	7	1	11				19	NEIS-Carson City	94.74	5.26		0.00	0
NEIS-Reno	9	2	43			1	55	NEIS-Reno	94.55	3.64		1.82	0
NEIS-South (Las Vegas)	21		61	1		1	84	NEIS-South (Las Vegas)	97.62	1.19		1.19	0
Positively Kids-Las Vegas	6		17				23	Positively Kids-Las Vegas	100.00	0.00		0.00	0
The Continuum-Reno	5		6			1	12	The Continuum-Reno	100.00	0.00		0.00	1
Therapy Management Group (TMG)-Las Vegas	7		29			1	37	Therapy Management Group (TMG)-Las Vegas	97.30	0.00		2.70	0
Therapy Management Group (TMG)-Reno	1		8				9	Therapy Management Group (TMG)-Reno	100.00	0.00		0.00	0
(blank)	2		8				10	(blank)	100.00	0.00		0.00	0
Grand Total	88	6	254	1	7	1	357	STATEWIDE TOTAL	96.07	1.97		1.97	1

My early intervention services are provided in my preferred language or form of communication.													
Program (number responses)	Agree	Disagree	Strongly agree	Strongly Disagree	undecided	(blank)	Grand Total	Program (response percentages)	Agree/Strongly Agree	Strongly Disagree/Disagree	Undecided	Blank	
Advanced Pediatric Therapies (APT)-Sparks	3		25				28	Advanced Pediatric Therapies (APT)-Sparks	100.00	0.00		0.00	0
Capability Health and Human Services (CHHS)-Las Vegas	18	1	38				57	Capability Health and Human Services (CHHS)-Las Vegas	98.25	1.75		0.00	0
Capability Health and Human Services (CHHS)-Reno	1		6				7	Capability Health and Human Services (CHHS)-Reno	100.00	0.00		0.00	0
MD Developmental Agency (MDDA)-Las Vegas	1		3				4	MD Developmental Agency (MDDA)-Las Vegas	100.00	0.00		0.00	0
NEIS- North East (Elko/Ely/Winnemucca)	4		8				12	NEIS- North East (Elko/Ely/Winnemucca)	100.00	0.00		0.00	0
NEIS-Carson City	7		12				19	NEIS-Carson City	100.00	0.00		0.00	0
NEIS-Reno	9		46				55	NEIS-Reno	100.00	0.00		0.00	0
NEIS-South (Las Vegas)	19		64	1			84	NEIS-South (Las Vegas)	98.81	1.19		0.00	0
Positively Kids-Las Vegas	5		18				23	Positively Kids-Las Vegas	100.00	0.00		0.00	0
The Continuum-Reno	2		9			1	12	The Continuum-Reno	100.00	0.00		0.00	1
Therapy Management Group (TMG)-Las Vegas	4		33				37	Therapy Management Group (TMG)-Las Vegas	100.00	0.00		0.00	0
Therapy Management Group (TMG)-Reno	1		7			1	9	Therapy Management Group (TMG)-Reno	88.89	0.00		11.11	0
(blank)	2		8				10	(blank)	100.00	0.00		0.00	0
Grand Total	76	1	277	1	1	1	357	STATEWIDE TOTAL	99.16	0.56		0.28	1

My IFSP team helps me know my parent rights regarding early intervention services (the procedural safeguards that are in the parent handbook).													
Program (number responses)	Agree	Disagree	Strongly agree	Undecided	(blank)	Grand Total		Program (response percentages)	Agree/Strongly Agree	Strongly Disagree/Disagree	Undecided	Blank	
Advanced Pediatric Therapies (APT)-Sparks	2		26			28		Advanced Pediatric Therapies (APT)-Sparks	100.00	0.00		0.00	0
Capability Health and Human Services (CHHS)-Las Vegas	16		38	3		57		Capability Health and Human Services (CHHS)-Las Vegas	94.74	5.26		5.26	0
Capability Health and Human Services (CHHS)-Reno	2		5			7		Capability Health and Human Services (CHHS)-Reno	100.00	0.00		0.00	0
MD Developmental Agency (MDDA)-Las Vegas	1		3			4		MD Developmental Agency (MDDA)-Las Vegas	100.00	0.00		0.00	0
NEIS- North East (Elko/Ely/Winnemucca)	4		8			12		NEIS- North East (Elko/Ely/Winnemucca)	100.00	0.00		0.00	0
NEIS-Carson City	7		12			19		NEIS-Carson City	100.00	0.00		0.00	0
NEIS-Reno	7	1	44	3		55		NEIS-Reno	92.73	7.27		5.45	0
NEIS-South (Las Vegas)	22		61	1		84		NEIS-South (Las Vegas)	98.81	1.19		1.19	0
Positively Kids-Las Vegas	6		17			23		Positively Kids-Las Vegas	100.00	0.00		0.00	0
The Continuum-Reno	5		5	1	1	12		The Continuum-Reno	90.91	9.09		9.09	1
Therapy Management Group (TMG)-Las Vegas	4		33			37		Therapy Management Group (TMG)-Las Vegas	100.00	0.00		0.00	0
Therapy Management Group (TMG)-Reno	1		8			9		Therapy Management Group (TMG)-Reno	100.00	0.00		0.00	0
(blank)	2		8			10		(blank)	100.00	0.00		0.00	0
Grand Total	79	1	268	8	1	357		STATEWIDE TOTAL	97.47	2.53		2.25	1

My early intervention providers have supported me in knowing how to help my child develop and learn.													
Program (number responses)	Agree	Disagree	Strongly agree	Strongly Disagree	Undecided	(blank)	Grand Total	Program (response percentages)	Agree/Strongly Agree	Strongly Disagree/Disagree	Undecided	Blank	
Advanced Pediatric Therapies (APT)-Sparks	4		22		2		28	Advanced Pediatric Therapies (APT)-Sparks	92.86	0.00		7.14	0
Capability Health and Human Services (CHHS)-Las Vegas	20	1	34		2		57	Capability Health and Human Services (CHHS)-Las Vegas	94.74	1.75		3.51	0
Capability Health and Human Services (CHHS)-Reno			6		1		7	Capability Health and Human Services (CHHS)-Reno	85.71	0.00		14.29	0
MD Developmental Agency (MDDA)-Las Vegas	1		3				4	MD Developmental Agency (MDDA)-Las Vegas	100.00	0.00		0.00	0
NEIS- North East (Elko/Ely/Winnemucca)	4		8				12	NEIS- North East (Elko/Ely/Winnemucca)	100.00	0.00		0.00	0
NEIS-Carson City	6	1	12				19	NEIS-Carson City	94.74	5.26		0.00	0
NEIS-Reno	10		44		1		55	NEIS-Reno	98.18	0.00		1.82	0
NEIS-South (Las Vegas)	17	1	63	1	2		84	NEIS-South (Las Vegas)	95.24	2.38		2.38	0
Positively Kids-Las Vegas	9		14				23	Positively Kids-Las Vegas	100.00	0.00		0.00	0
The Continuum-Reno	4		7			1	12	The Continuum-Reno	100.00	0.00		0.00	1
Therapy Management Group (TMG)-Las Vegas	12		24		1		37	Therapy Management Group (TMG)-Las Vegas	97.30	0.00		2.70	0
Therapy Management Group (TMG)-Reno	2		7				9	Therapy Management Group (TMG)-Reno	100.00	0.00		0.00	0

(blank)	1		9				10	(blank)	100.00	0.00	0.00	0
Grand Total	90	3	253	1	9	1	357	STATEWIDE TOTAL	96.35	1.12	2.53	1

My early intervention providers give me information about other activities and services in the community that may help me and my child (for example, childcare, play groups, WIC, etc.).												
Program (number responses)	Agree	Disagree	Strongly agree	Strongly disagree	Undecided	(blank)	Grand Total	Program (response percentages)	Agree/Strongly Agree	Strongly Disagree/Disagree	Undecided	Blank
Advanced Pediatric Therapies (APT)-Sparks	4	2	19	1	2		28	Advanced Pediatric Therapies (APT)-Sparks	82.14	10.71	7.14	0
Capability Health and Human Services (CHHS)-Las Vegas	14	10	28	1	4		57	Capability Health and Human Services (CHHS)-Las Vegas	73.68	19.30	7.02	0
Capability Health and Human Services (CHHS)-Reno		1	5		1		7	Capability Health and Human Services (CHHS)-Reno	71.43	14.29	14.29	0
MD Developmental Agency (MDDA)-Las Vegas	1		3				4	MD Developmental Agency (MDDA)-Las Vegas	100.00	0.00	0.00	0
NEIS- North East (Elko/Ely/Winnemucca)	3	1	8				12	NEIS- North East (Elko/Ely/Winnemucca)	91.67	8.33	0.00	0
NEIS-Carson City	3	1	12		3		19	NEIS-Carson City	78.95	5.26	15.79	0
NEIS-Reno	14	1	34		6		55	NEIS-Reno	87.27	1.82	10.91	0
NEIS-South (Las Vegas)	26	8	45		5		84	NEIS-South (Las Vegas)	84.52	9.52	5.95	0
Positively Kids-Las Vegas	6	1	15	1			23	Positively Kids-Las Vegas	91.30	8.70	0.00	0
The Continuum-Reno	4		5		2	1	12	The Continuum-Reno	81.82	0.00	18.18	1
Therapy Management Group (TMG)-Las Vegas	11	4	18		4		37	Therapy Management Group (TMG)-Las Vegas	78.38	10.81	10.81	0
Therapy Management Group (TMG)-Reno			7		2		9	Therapy Management Group (TMG)-Reno	77.78	0.00	22.22	0
(blank)	2		8				10	(blank)	100.00	0.00	0.00	0
Grand Total	88	29	207	3	29	1	357	STATEWIDE TOTAL	82.87	8.99	8.15	1

Early intervention services help me feel comfortable in supporting my child in developing positive relationships with other children and adults.												
Program (number responses)	Agree	Disagree	Strongly agree	Strongly disagree	Undecided	(blank)	Grand Total	Program (response percentages)				Blank
Advanced Pediatric Therapies (APT)-Sparks	5		20	1	2		28	Advanced Pediatric Therapies (APT)-Sparks	89.29	3.57	7.14	0
Capability Health and Human Services (CHHS)-Las Vegas	18	3	32		4		57	Capability Health and Human Services (CHHS)-Las Vegas	87.72	5.26	7.02	0
Capability Health and Human Services (CHHS)-Reno		1	6				7	Capability Health and Human Services (CHHS)-Reno	85.71	14.29	0.00	0
MD Developmental Agency (MDDA)-Las Vegas	1		3				4	MD Developmental Agency (MDDA)-Las Vegas	100.00	0.00	0.00	0
NEIS- North East (Elko/Ely/Winnemucca)	3	1	8				12	NEIS- North East (Elko/Ely/Winnemucca)	91.67	8.33	0.00	0
NEIS-Carson City	7	1	11				19	NEIS-Carson City	94.74	5.26	0.00	0
NEIS-Reno	12	1	38		4		55	NEIS-Reno	90.91	1.82	7.27	0
NEIS-South (Las Vegas)	24	5	48		7		84	NEIS-South (Las Vegas)	85.71	5.95	8.33	0
Positively Kids-Las Vegas	7		14		2		23	Positively Kids-Las Vegas	91.30	0.00	8.70	0
The Continuum-Reno	3		7		1	1	12	The Continuum-Reno	90.91	0.00	9.09	1
Therapy Management Group (TMG)-Las Vegas	13	2	21		1		37	Therapy Management Group (TMG)-Las Vegas	91.89	5.41	2.70	0
Therapy Management Group (TMG)-Reno	3		6				9	Therapy Management Group (TMG)-Reno	100.00	0.00	0.00	0
(blank)	2		8				10	(blank)	100.00	0.00	0.00	0
Grand Total	98	14	222	1	21	1	357	STATEWIDE TOTAL	89.89	4.21	5.90	1

My early intervention providers help me identify learning activities that I can do throughout the day with my child.												
Program (number responses)	Agree	Disagree	Strongly agree	Strongly Disagree	Undecided	(blank)	Grand Total	Program (response percentages)	Agree/Strongly Agree	Strongly Disagree/Disagree	Undecided	Blank
Advanced Pediatric Therapies (APT)-Sparks	4		22		2		28	Advanced Pediatric Therapies (APT)-Sparks	92.86	0.00	7.14	0
Capability Health and Human Services (CHHS)-Las Vegas	16	1	38		2		57	Capability Health and Human Services (CHHS)-Las Vegas	94.74	1.75	3.51	0
Capability Health and Human Services (CHHS)-Reno		1	6				7	Capability Health and Human Services (CHHS)-Reno	85.71	14.29	0.00	0
MD Developmental Agency (MDDA)-Las Vegas	1		3				4	MD Developmental Agency (MDDA)-Las Vegas	100.00	0.00	0.00	0
NEIS- North East (Elko/Ely/Winnemucca)	4		8				12	NEIS- North East (Elko/Ely/Winnemucca)	100.00	0.00	0.00	0
NEIS-Carson City	8		11				19	NEIS-Carson City	100.00	0.00	0.00	0
NEIS-Reno	14		38		3		55	NEIS-Reno	94.55	0.00	5.45	0
NEIS-South (Las Vegas)	23	2	54	1	4		84	NEIS-South (Las Vegas)	91.67	3.57	4.76	0
Positively Kids-Las Vegas	7		16				23	Positively Kids-Las Vegas	100.00	0.00	0.00	0
The Continuum-Reno	4		6		1	1	12	The Continuum-Reno	90.91	0.00	9.09	1
Therapy Management Group (TMG)-Las Vegas	12		23		2		37	Therapy Management Group (TMG)-Las Vegas	94.59	0.00	5.41	0
Therapy Management Group (TMG)-Reno	2		7				9	Therapy Management Group (TMG)-Reno	100.00	0.00	0.00	0
(blank)	2		8				10	(blank)	100.00	0.00	0.00	0
Grand Total	97	4	240	1	14	1	357	STATEWIDE TOTAL	94.66	1.40	3.93	1

IDEA Part C Family Survey Comments SFY2021

Analysis of Written Responses

Program	Positive	Challenges	Mixed
Advanced Pediatric Therapies (APT)	6	2	0
MDDA	2	2	1
The Continuum	3	2	0
Capability health and Human Services (CHHS) - North	0	0	0
Capability Health and Human Services (CHHS) - South	9	3	4
Nevada Early Intervention Services (NEIS), Northeast	4	1	0
Nevada Early Intervention Services (NEIS), Carson City	5	3	2
Nevada Early Intervention Services (NEIS), Northwest, Reno	7	2	6
Nevada Early Intervention Services (NEIS), South	30	1	9
Positively Kids	10	0	0
Therapy Management Group (TMG) - North	2	0	0
Therapy Management Group (TMG) - South	10	4	6
No Answer (No Program Information Given)	1	0	1
Totals	89	20	29
Percentage	64.5%	14.5%	21%

Telehealth Only Responses

Program	Positive	Challenges	Mixed
Advanced Pediatric Therapies (APT)	0	1	1
MDDA	0	1	0
The Continuum	0	2	0
Capability health and Human Services (CHHS) - North	0	0	0
Capability Health and Human Services (CHHS) - South	1	1	3
Nevada Early Intervention Services (NEIS), Northeast	0	1	0
Nevada Early Intervention Services (NEIS), Carson City	0	2	1
Nevada Early Intervention Services (NEIS), Northwest, Reno	0	2	3
Nevada Early Intervention Services (NEIS), South	0	1	1
Positively Kids	0	0	1
Therapy Management Group (TMG) - North	0	0	0
Therapy Management Group (TMG) - South	1	0	3
No Answer (No Program Information Given)	0	0	0
Totals	2	11	13
Percentage	8%	42%	50%