



## **MEETING MINUTES**

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

**Date and Time of Meeting:** Thursday, October 21, 2021, 10:00 AM

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

Co-Chair Sherry Waugh welcomed the council and called the meeting to order at 10:10 a.m.

**Members Present:** Dawn Brooks, Valeria Gundersen, Kellie Hess, Sarah Horsman-Ploeger, Lisa Hunt, Robin Kincaid, Sandra LaPalm, Rhonda Lawrence, Janice Lee, Kate Osti, Sherry Waugh, Dr. Jenna Weglarz-Ward

**Members Absent:** Andre' Haynes, Kristin Hoxie, Crystal Johnson, Catherine Nielsen, Keana Sullivan

**Public Attendees:** Jessica Bland, Nevada Early Intervention Services (NEIS); Robert Burns, Therapy Management Group (TMG); David Cassetty, Department of Insurance (DOI); Abbie Chalupnik, Aging and Disability Services (ADSD); Karen Frisk, NEIS; Jessica Jersey, Capability Health and Human Services (CHHS); Jennifer Loiacano, TMG; Fran Maldonado, Department of Child and Family Services (DCFS); Yvonne Moore, Positively Kids; Julie Ortiz, Advanced Pediatric Therapies (APT); Cathleen Rexling, Department of Education (DOE); Jessica Roew, NEIS; Heike Ruedenauer-Plummer, ADSD; Rique Robb, ADSD; Karen Shaw, Public; Shannon Sprout, ADSD; Debra Stewart, MD Developmental Agency (MDDA); Brittany Toth, Public; Claribel Zecena, ADSD

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

**II. Public Comment:**

Brittany Toth, a parent who recently used Early Intervention Services addressed the council. Ms. Toth's son, Mikey, is just under two (2) years old and started the process in August 2021 to receive Early Intervention Services. Ms. Toth explained that they had their first Telehealth evaluation in September 2021. They are looking forward to getting started. Ms. Toth also talked about adding Early Intervention kids and the mandate to wear a mask to a future meeting. At under two (2) years of age, her child has a hard time keeping his mask on.

**III. Approval of the Minutes from the July 15, 2021 Meeting (Attachment Included)  
(For Possible Action):**

Ms. Waugh asked the council to review the minutes and provide any updates or changes.

**MOTION:** Approve the minutes from July 15, 2021 with edits noted.

**By:** Janice Lee

**Second:** Sandra LaPalm

**VOTE:** Passed

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

Due to lack of interest in being a co-chair, this item is being tabled to a future meeting in the hopes of additional participants.

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

a. **Subcommittee Strategic Plan review for future meetings**

Mary Garrison advised the council that the ICC and subcommittees will need to adjust all of their strategic plans and add new goals. This process was going to be done in person, but due to the increase of COVID-19 cases immediately after the July ICC meeting, a virtual meeting had to be scheduled. Ms. Garrison asked that each of the subcommittees during their next quarterly meetings, review their strategic plan and provide updates that can be shared with the ICC members in the next ICC meetings.

b. **Family Support Resource Subcommittee**

- i. Alternative Outreach to the Public in lieu of the Annual Calendar
- ii. Nominate and select new chair for the Interagency Coordinating Council (ICC) Family Support Resource Subcommittee **(For Possible Action)**

Dan Dinnell explained that the subcommittee attempted to have a meeting in October 2021, but they did not have quorum. Mr. Dinnell also shared that they are looking for a chair for the subcommittee. Mr. Dinnell explained that the subcommittee will move forward with revising any goals. Mr. Dinnell shared that the subcommittee would also like to adjust the calendar to be a day planner as a more useful tool for families to use.

c. **Child Find Subcommittee**

- i. Minutes from January 21, 2021 meeting-Information Only
- ii. Updated Child Find Activities Report

Mary Garrison informed the council that the Child Find Activities Report was updated to provide more accurate data regarding activities throughout the state. The previous report required manual manipulation, but the open field cells have been replaced with standard options. Shari Fyfe and Sherry Waugh shared that the subcommittee continues to meet quarterly, and will be looking at outreach materials from the Early Intervention programs in the next meeting to ensure contact information is consistent and includes the single point of entry.

d. **Equity Subcommittee**

- i. Review notes (Membership Interest, Representation, Goal Suggestions)
- ii. Nominate and select new chair for the Interagency Coordinating Council (ICC) Equity Subcommittee **(For Possible Action)**

Lori Ann Malina-Lovell shared with the ICC that the Equity Subcommittee had a lot of interest with over 20 individuals who attended. A list of people who want to be a member was provided to the council, with two (2) individuals who are interested in being co-chairs. Ms. Malina-Lovell explained the next meetings are scheduled for November 4, 2021 and December 2, 2021. Ms. Malina-Lovell stated that the co-chairs should be selected in the November meeting. Ms. Malina-Lovell explained that the attendees were provided opportunities to share their feedback about what equity efforts should be occurring in Nevada. The members want to tackle language, race, connectivity and support for disadvantaged communities. The goal for the next meeting is to finalize membership and develop a mission and vision statement. At this time, the Equity Subcommittee plans on meeting more frequently, then will move to quarterly meetings.

**VI. Review and Discuss Target Setting for Annual Performance Report (APR)**

- a. **Target Setting and Federal Requirements Materials and Resources Review**
- b. **IDEA Part C Stakeholder APR Target Setting meeting – November 9, 2021, 10 a.m. – 11:30 a.m.**

Lori Ann Malina-Lovell addressed the council to discuss target setting for the annual performance report (APR). Ms. Malina-Lovell explained the APR is required for all Part C states and every five (5) to six (6) years the Office of Special Education Programs (OSEP) requires states to complete target setting for the federal requirements. Target setting activities involve stakeholders and we want to include all of the stakeholders on the ICC, Ms. Malina-Lovell explained. Ms. Malina-Lovell stated that a stakeholder meeting will also be held in November to discuss target setting further. This is an optional meeting for ICC members. What we do to complete the target setting requirements for OSEP is follow the technical assistance they provide us. Ms. Malina-Lovell shared a handout from OSEP technical assistance advisors. Ms. Malina-Lovell explained that she wanted to provide the introduction to target settings so when the November stakeholder meeting occurs the ICC will be more familiar with target setting requirements. The process should ensure that the rationale and methods for setting targets are analytically sound and clearly explained for optimal stakeholder input and involvement. Targets are the expected levels of performance or progress for each indicator. Targets are defined as percentage values and are based on analysis of past performance and other state contexts.

**Targets accomplish the following important functions:**

- Establish expectations for performance throughout the state
- Assist in assessing where the state's performance is strong, where performance is an issue, and where to focus improvement
- Provide motivation for improving performance and celebrating success
- Serve as guides for monitoring progress and determining if progress is on schedule and sustained over time

Ms. Malina-Lovell explained that the APR is due to OSEP February 1, 2022. Ms. Malina-Lovell shared that the Part C office will analyse trends and patterns that show Nevada's performance, where our strengths are, and where we need support to review during the November meeting. Ms. Malina-Lovell also explained that Part C will be looking at growth and change using historical data to calculate the average growth/change from year to year. This change can be calculated as a percent change improvement or a percentage point improvement.

**VII. IDEA Part C Information and Reports**

Lori Ann Malina-Lovell stated that the Part C office is trying to incorporate the Division of Early Childhood (DEC) recommended practices, especially for Early Intervention leadership. Leaders create a culture and the climate in which practitioners feel a sense of and want to support organization mission and goals. Ms. Malina-Lovell shared that the Part C Office has shared their Early Intervention Pumpkin Decorating Contest information.

- a. **By-laws, Robert's Rules of Order, and Open Meeting Law Manual (Information Only)**  
Ms. Mary Garrison explained that the By-laws, Robert's Rules of Order, and Open Meeting Law Manual were all provided in the handouts for the ICC's information and review.
- b. **Announcement regarding Dan Dinnell, IDEA Part C Family Resource Coordinator and Information & Referral Specialist**  
Ms. Malina-Lovell shared with the ICC that Dan Dinnell, IDEA Part C Family Resource Coordinator and Information & Referral Specialist would be retiring at the end of December 2021. Dan's last day with the state will be December 23, 2021.

c. **Update on the Nevada Pyramid Model Implementation**

Edie King shared that social-emotional development for the children in Nevada is a top priority. Research shows progress in the area of social-emotional development helps to increase the rate of progress in other development areas. We have our state Early Intervention programs that are all implementing the Pyramid Model, as well as community partners. Ms. King explained that we will be starting phase three (3) of the implementation, which will include other community partners. Ms. King shared that Early Intervention is looking forward to moving towards state wide implementation. Ms. King explained that the Part C office and Nevada Pyramid Model State Leadership Team is working with the Pyramid Model Consortium and Montana Part C office to do training modules for Pyramid Practices and Prevent, Teach, Reinforce for Families to support communication and social skills as well as reinforce positive behavior. These modules are expected in the next six (6) to nine (9) months depending on how it goes with the Pyramid Consortium. Ms. King stated that we will report further to the ICC in future meetings.

d. **Complaint Matrix**

Edie King shared that there are no new complaints to report on.

e. **ICC SFY22 Budget and 2022 ICC Calendar Quote**

Ms. Garrison shared the ICC SFY22 budget information and informed the ICC that the 2022 calendar will be ordered shortly.

Lori Ann Malina-Lovell shared that the Part C Office is receiving American Rescue Plan (ARP) funds from OSEP. More information regarding the plan for these funds will be available in January 2022. A Early Intervention system study which will include a provider rate study will be conducted as well as other improvements to Nevada's Early Intervention System.

Ms. Malina-Lovell explained that we remain in phase three (3) of the Early Intervention Services reopening. Nevada phase three (3) is hybrid approach services, which includes in person services which may occur in the family home or in the clinic. Telehealth and teleconference is also available. Programs are advised to ensure communicating with families and provide all of their service options. Part C has provided technical assistance to all of the programs and the system regarding how to have these conversations with families.

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

- Program Highlights
- Update on Early Intervention Re-Opening Phase
- New member biographies
- Update on system study and ARP funds
- Alternative Licensure Update
- AG Office Training for ICC

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

- January 11, 2022
- April 28, 2022

X. **Public Comment**

Lori Ann Malina-Lovell shared that Nevada's plan for the ARP funds was approved during this meeting.

XI. **Adjournment**

The meeting was adjourned at 11:49 a.m.

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](mailto: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 Williams 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. 5<sup>th</sup> 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/>

Steve Sisolak  
Governor

Richard Whitley, MS  
Director



## DEPARTMENT OF HEALTH AND HUMAN SERVICES

AGING AND DISABILITY SERVICES DIVISION  
*Helping people. It's who we are and what we do.*



Dena Schmidt  
Administrator

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### MEMORANDUM December 1, 2021

**TO:** All Nevada Early Intervention Service Providers and Community Partners  
**FROM:** DHHS, IDEA Part C Office, ADSD Administration, and ADSD Quality Assurance  
**RE:** Early Intervention Services Re-entry Plan, Effective December 1, 2021

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RR  
ABC  
XAD

The Department of Health and Human Services-Director's Office (DHHS), IDEA Part C Office, Aging and Disabilities Services Division (ADSD), and ADSD Quality Assurance (QA), have established a gradual, phased re-entry plan to safely resume face-to-face early intervention services. This memorandum serves as official release of the Early Intervention Services Re-entry Plan Phase 3.5 to allow for a gradual return to community settings to be scheduled on or after December 1, 2021.

As Nevada recovers from the pandemic, ADSD and IDEA Part C continue to take every precaution to keep our most vulnerable safe. The attached re-entry plan and protocols are meant for all Early Intervention (EI) providers across the State of Nevada and include the following guidance:

All Visit Types must be a result of an Individualized Family Service Plan (IFSP) discussion and based on the comfort level of the family and individual risk factors of the child/family, and meeting screening protocols.

- Virtual visits and limited in-clinic remain viable and evidence-based options and are intended to continue to mitigate risk of infectious disease.
- Home visits were incorporated in Phase 3 and continue to expand based on the comfort level of the family and meeting the screening protocols for risk mitigation.
- Community settings such as childcare, library, in person playgroups, etc., are incorporated with Phase 3.5 as a viable option. EI Teams must consider the community setting risk mitigation protocols as well as EI protocols for safe visits.
- Screening protocols remain an essential component of the re-entry plan across all visit types.
- Children 2-9 years of age are strongly encouraged to wear face coverings in public spaces, including in childcare and daycare settings.
- Participation limits for all visit types (in-clinic, home, outdoors, and community settings) are lifted in Phase 3.5.

Managers and supervisors of all EI programs are responsible for ensuring that direct service providers receive training and understand this information before implementing. All programs are required to adhere to the detailed guidance and visitor protocols attached as part of the re-entry plan. Please contact us as indicated below should you have questions.

Thank you,

**Abbie Chalupnik, MA**

Clinical Program Planner I

Nevada Department of Health and Human Services

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**Lori Ann Malina-Lovell, DrPH**

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CC:

Richard Whitley, DHHS Director

Rique Robb, Deputy Administrator-ADSD Child Services

Jennifer Frischmann, Agency Manager- ADSD Quality Assurance

Jeff Haag, ADSD Deputy Administrator (Interim IDEA Part C Oversight)

**Attachments:**

- Early Intervention Services Re-Entry Plan Phase 3.5 December 1, 2021
- Visit Protocols Phase 3.5 December 1, 2021

## NEIS South Quarterly Program Highlights

October 1, 2021 – December 31, 2021



### Report Areas:

1. Outreach Activities & Community Collaborations
2. Interagency Coordinating Council (ICC) Activities
3. Trainings

#### 1. Outreach Activities & Community Collaborations

Fall Festival Fair, CAPTA Collaboration with DFS

#### 2. Interagency Coordinating Council (ICC) Activities

#### 3. Trainings

*NEIS Staff attended the following:*

Mentor Training for new Development Specialists





Greetings from APT! Happy 2022! We hope the entire EI community is off to an amazing 2022 and we are so excited to see what this year brings for us all.



**Staff Development:** We have a meeting with Shriners this month to discuss as a team if we can support them in Northern Nevada with wheel chair assessments. We met with Shriner's for several workshops in 2021 and look forward to new collaborations in 2022! Several DSs attended the Birth – 3 conference and loved it! We have several new DSs so we have focused on new team member orientations for the past month.



**Autism:** APT is trained and administering the new ADOS-2 and ADOS-2 Toddler modules on a monthly basis. ADOS team members include Julie Ortiz (director/speech pathologist), Adriana Ferguson, (Bilingual SLP) and Tanya Glass, OT. We are back to providing ADOSs face to face in our clinic with proper precautions in place. This has made families very happy! We are now providing ABA services at APT! This program has kept us busy – but we are off to a great start!



**APT Team –** We are excited to welcome several new EI providers to our Team! We have 2 new DSs, one new PT and one new OT! We have been busy training and creating consistency among existing and new providers – we love teaching new individuals about EI in Nevada! It has been great getting back to face to face and in home visits with families – we have seen a positive return of excitement from families! Here's to another great EI year in 2022!


Check out our website for additional happenings! [www.aptkidsnevada.com](http://www.aptkidsnevada.com) Check out the link for resources and events!

## October-December 2021 Highlights

- Positively Kids Early Intervention Program currently is servicing 207 children throughout Las Vegas, NV. There are no children waiting for services or in compensatory status as of this reporting period.
- Congratulations to Developmental Specialist Desiree Corral for earning a Master's in Early Childhood Special Education this December.
- I am pleased to say that we were selected by Speedway Charities this past quarter as a grant recipient to help with supplies and toys for our pediatric programs.
- PK Social ETC provides daily structured cooperative play opportunities for 3–5-year-olds in addition to targeting school readiness, language building and behavior management! [PK Social Skills Group](#) Click the link to watch our PK Social clip to view our beautiful classroom space, meet our teacher, and listen to group enrollment details.
- This past quarter we participated in Trunk or Treat and the Harvesting Hope Fall Festival

### Trainings

- Steps to Building Verbal Imitation w/Toddlers with SLP Rivka Paris
- Physical Therapy training with Amy Brewster
- Occupational Therapy training with Rachel Kamin
- Social Media 101

Click the link to watch our Foundation for Positively Kids Breakfast with Santa 2.0 recap   
<https://youtu.be/8EMVUWGebmA>

We had so much fun planning and organizing this event! Huge shoutout to all of our amazing sponsors and team members who came together to make this day so special for 50+ families





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## **MEETING MINUTES**

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

**Date and Time of Meeting:** August 24, 2021  
11:33 a.m.

**Meeting was held through teleconference and at the following location:**

1000 East William St, Ste 101  
Carson City, NV 89701

I. **Call to Order and Roll Call:**

Sherry Waugh called the meeting to order at 11:33 a.m. A quorum of members was present; the meeting proceeded as scheduled.

**Members Present:** Marty Elquist, Karen Frisk, Sarah Horsman-Ploeger, Robin Kincaid, Marnie Lancz, Janice Lee, Yvonne Moore, Sarah Sills, Dr. Debra Vigil, Sherry Waugh, Jenna Weglarz-Ward

**Members Absent:** Patrice Gardner, Cherish King

**Part C Staff Present:** Mary Garrison, Shari Fyfe

II. **Public Comment**

No public comment was made.

III. **Review and Approve Minutes from the January 21, 2021 Meeting (For Possible Action)**

Mary Garrison mentioned that she will scroll through the minutes slowly but if anyone wants to review them at their own pace there is an attachment for the minutes in the invite. Ms. Garrison also mentioned that the meeting on January 21, 2021, ended due to loss of quorum so the minutes end at item five (5). Ms. Waugh asked if anyone had any corrections for the notes? If not, she would entertain the motion to approve the minutes. Ms. Kincaid asked for clarity regarding the name Lisa, and she doesn't recall anyone with the last name Lisa. Ms. Fyfe mentioned that she made the comment and Dr. Vigil was talking about getting a contact who professionalized in making advertisements. Ms. Waugh also asked to have Dr. Vigil's name updated from Ms. Vigil to Dr. Vigil.

**MOTION:** Approve the January 21, 2021 meeting minutes with edits noted

**BY:** Dr. Debra Vigil

**SECOND:** Marnie Lancz

**VOTE:** PASSED

IV. **Child Find Self-Assessment Workgroup Update (For Possible Action)**

- a. State Fiscal Year 21 (SFY21) Annual Report and Future Quarterly Child Find Reporting
- b. Longevity of Indicator 6

c. County, Population, Child Find Activities, and Referral Numbers

Ms. Fyfe presented the group with the Child Find summary page for each quarter and Ms. Garrison will inform the group on this report. Ms. Garrison mentioned that most of the Early Intervention (EI) programs have been sending quarterly reports and within the reports we can get raw data on a spreadsheet and create an activity report for each quarter. The report displaying now is for State Fiscal Year (SFY) 2021 which ended June 30, 2021, and it gives cumulative information for the year under each activity sheet as you go through the quarters. Ms. Garrison presented the report as it currently stands. The fourth (4) quarter data was shown. The information is somewhat convoluted, but it is a lot of information being filled out by programs and there is a tab for each quarter that they input each child find activities they have completed. The report asks for the date of the activity, if it is an ongoing partnership, the frequency, the setting, the county, any specific population group, the method, number of attendees. There's a section that asks if it's specific to birth to one (1) or if it is all-inclusive for birth to three (3), and the type of activities (what was the outreach information). Ms. Garrison mentioned that she will scroll down because each section columns L through O have a key that was provided when the report was created, and they indicate the type of outreach with a number. For example, under the Public Awareness Code section a one (1) is for sib shop, two (2) is for fairs etc. The reports are submitted on a quarterly basis, and because of COVID there was a drop in Child Find activities. For some of the entries the programs put no activities due to COVID. Ms. Fyfe asked if the group had any questions about the report? She mentioned that Ms. Garrison and herself have been holding discussions on how to improve the report because IDEA Part C wants to do what is required by the law. One of the issues Ms. Garrison ran into is when she receives the report it is not consistent and there are twelve programs that are completing the spreadsheet with each person completing it differently. People will put different names for the counties, or all counties, or statewide. Under the ongoing partnership/collaborations section people will put wording instead of answering yes or no. The dating format is never consistent, and Ms. Garrison presented another section where it is difficult to get consistency. Under the types of materials distributed if someone is doing outreach activities, they could be providing brochures and fact sheets. When people are putting that in, they are putting multiple numbers because they are providing different types of materials, and when you go to the cumulative activity sheet it is difficult to have excel calculate that information and give accurate data. Ms. Garrison explained that she must go back and change the fields that are already created and updated by the programs. Ms. Garrison looked at what is being requested, Ms. Fyfe and Ms. Garrison looked at what is required by federal law and came up with a spreadsheet to provide to programs going forward. The spreadsheet does have a lot of the same information that is presented on the old report. Ms. Garrison highlighted sections in yellow that might be options to eliminate. The information highlighted is not on the activity sheets, and typically it is inconsistent depending on who is filling out the form. Ms. Garrison asked the group if they would agree to removing setting, specific population group, and method/s from the spreadsheet? If not, why should they remain, and would the group want to see that information in the reporting? Ms. Garrison created drop down menus and check boxes for the fields so no matter who fills out the report, the information would remain consistent. Some of the fields have a drop-down menu in which you can select more than one option and excel will combine them so both options will show in the field. Ms. Garrison mentioned if the group agreed to the new format, then the report could move forward for this quarter going forward which would be at the end of September 2021 in which Part C would be requiring the programs to submit their quarterly child find report.

Ms. Kincaid commented that she loves the drop-down menus and that is an excellent way to ensure consistency. Ms. Kincaid mentioned that she needs more information on the area of setting to understand what Ms. Garrison was trying to accomplish by have that in there? And how does that (the highlighted fields) influence the decisions that the group has discussions about? Ms. Garrison responded that she's sharing the information under setting and the group can keep it but what Part C is trying to figure out is if the information is truly needed. Ms. Garrison presented the information was shown under the highlighted sections to the group so they can see if it is needed. Ms. Kincaid mentioned that she thinks setting is essential for the purposes of discussion and the group would lose valuable information if setting was removed, and the report would not have a lot of meaningful information without setting. Ms. Garrison stated that she would not create options for the settings field

and that it would remain a freehand option for individuals to enter information. Ms. Kincaid suggested that Ms. Garrison could give people some guidance by showing that the information came from a flyer for example, so people aren't creating a setting based off what they remember. For example, instead of someone just putting Head Start, they are putting Head Start of Northeastern Nevada since it tells the location of the activity, which the group needs for covering the State in any way, shape, or form. Ms. Garrison told the group that she could show them the old report which has instructions in comparison to the new one. Ms. Garrison suggested that she could have a message populate that explains what information should go in that field if the group believes that would be helpful. Ms. Kincaid responded by agreeing with Ms. Garrison's suggestion and that it would reduce a lot of difficulties that Ms. Garrison had in the past.

Dr. Vigil had a few questions the first one being that each program fills out a spreadsheet, correct? Then programs send it to Ms. Garrison who has to go through it all? Ms. Garrison answered yes and that is where the issues come from with so many programs filling out the form differently. Dr. Vigil mentioned that she doesn't know if this is the appropriate venue for this discussion since there are early intervention providers present so she would be interested in their feedback. It almost seems like for efficiency's sake that it would be nice to have a fillable form so programs can select an option and then it automatically populates into a spreadsheet. Dr. Vigil stated that she doesn't know if this discussion is an offline conversation so she can show Ms. Garrison what she has done with some other venues to collect information from various programs. Ms. Garrison responded that she thought about that and for example all the programs have the TRAC user form and anytime that someone needs to be deactivated from the TRAC system or added, or if their roles need to change there is very specific fields on them and somebody goes and selects what is needed with all the information that is required and then they send it to Part C. The problem that Ms. Garrison ran into is that the programs would have to complete a form every time an activity is done. Ms. Garrison mentioned to the group to correct her if she is wrong, but she believes when the report is due the programs collect information from staff to complete. The concern is if the programs did the reports as the activities happened it would be fine, but the programs might grow weary if all the activities could not go on one (1) report that everything is entered onto. This might require feedback from individuals who fill out this form that are on this call.

Ms. Lancz mentioned that she has done the form for twelve years and her staff does activities and sends her their reports monthly and she compiles it all together to complete the report. Ms. Lancz likes the new report since it is simpler, and she agrees with Ms. Kincaid that the setting column should be kept but she would get rid of the other two highlighted fields. Ms. Garrison responded with a suggestion that she could come up with a reference guide for any turnover with contact information for people to reach out to if they need additional training and an explanation of what each field is and what is expected in them. Another suggestion would be to schedule some trainings with whomever would be filling out the reports. Ms. Fyfe asked if it would be helpful to see what activities are being done instead of just having where they are being done. Ms. Kincaid mentioned that specific population and method/s should stay on the report since she looked at the report that Part C sent out in December 2020, and she believes that it is helpful information. Some of that information told the group if the population was parents, whether it was a health fair, whether it was a combination of general education and children with disability, etc. Ms. Kincaid realizes that there could be inconsistency and there could be somewhat of a drop down for the fields. Ms. Moore agreed with Ms. Lancz, that she pulls all the information together as a calendar item at the last second sometimes. Ms. Moore agrees that participating in a meeting with all programs is needed. Ms. Garrison mentioned that she is showing the report with the instructions for specific populations and method/s as the form is done today and a drop-down menu can be added to those fields as well and the group can provide Ms. Garrison with feedback on what the options can be. Ms. Garrison mentioned that it doesn't have to be a drop-down menu unless the group wants the information automatically transferred to the activity report that is created with all the data. Ms. Garrison asked the group if they would like for her to add drop-down menus to the highlighted fields and keep the unhighlighted sections with the updated menu options?

Ms. Frischmann asked what if there was a random community event? Ms. Garrison responded that she added a “once” option in the drop-down menu for frequency. Ms. Lee asked if the title ‘Settings’ should be changed to ‘Events’ or ‘Venue’ to make it more specific and more informative to other programs? Ms. Garrison asked the group if she could get some suggestions on what the column should be named? Ms. Lancz responded with the settings her team uses, which is pediatrician’s office, or childcare center, or family services so she doesn’t know if it should be named targeted population or something like that. Ms. Lancz also mentioned that the columns seem to be too small, and she had to readjust them when she needed to add text to the fields. Ms. Garrison responded that she formatted the columns so people could expand the fields and wrap text that is entered. Also, she mentioned removing population and method so specific population could be added to the setting with different wording depending on the opinion of the group. Ms. Frisk mentioned that she completes this report for the northeast, she compiles the information, but it is difficult since employees may list the same event, but the information is different. Also, Ms. Frisk thinks the distribution of materials need to be updated with a different list because social media is the main source of information, not brochures. Ms. Frisk does not know how the group is coming up with different materials, but she mentioned that she put together an internal workgroup and hopes to provide that statewide to all the early intervention providers and get their feedback on it. Ms. Frisk hopes to present the workgroup to the ICC once she gets feedback. Ms. Garrison responded that she understood because doctor’s offices are moving more to telehealth, which patients are preferring. They are also pulling brochures in favor of social media. Ms. Garrison mentioned that she would like to make that field more inclusive to the different types of materials of distribution. Ms. Lee asked does it make sense to specify the type of information shared versus the type of material that is distributed? Ms. Lee said instead of brochures and fact sheets, it could be developmental milestones and typical development, or information on how to access services. Ms. Garrison agreed with Ms. Lee that the specifics of the information being distributed is important as well, and she will make updates to the drop-down based on feedback.

Ms. Fyfe mentioned that the Child Find numbers are not from these reports, the report is just to let the group know what they are missing. Ms. Fyfe mentioned that Child Find is a requirement in the contract with all programs, and the group is trying to get back to what is required and where the holes are in reaching people. Ms. Fyfe mentioned that there are more documents from the December one (1) count 2020 compared to 2019 to share. Ms. Fyfe suggested that the programs should share what materials should be distributed during Child Find, and the group can look at that to make sure it has consistency. Ms. Fyfe mentioned that the group is looking to see if materials have the single point of entry number or are people just putting their business number. Ms. Fyfe asked the group if they wanted to add her suggestion of having programs provide samples of what they are distributing to the next Child Find agenda? Ms. Waugh shared her concern about the amount of time spent on this topic and most of the meeting time is gone. Ms. Waugh asked the group if they want to go forward with Ms. Garrison’s revision and see what the providers feel about it? Ms. Lee asked if it made sense to have a survey to send to the providers about what materials and information to use for distribution not to descend from the group vote that Ms. Fyfe asked for? Ms. Garrison mentioned that the group can move forward with the revisions for the report except for the names of the materials for distribution in which she can gather through trainings and then update the report if the group approves.

Ms. Moore asked Ms. Garrison to clarify the agenda in the notes for this meeting the purpose of the report, on whether it’s required and if people are using it. Ms. Garrison replied that this will be included in the minutes.

There was a quorum check and Dr. Vigil had to leave due to another meeting taking place, but the group still had quorum.

Ms. Fyfe presented a document from the Child Find Self-Assessment Workgroup with Ms. Waugh, Ms. Lee, Ms. Garrison, Ms. Fyfe, and Dr. Vigil unable to attend the last meeting. Ms. Fyfe showed the group what Part C reports to the Office of Special Education Programs (OSEP). Ms. Fyfe shared if Child Find



does not meet the targets, then there will be a corrective action plan. As of 2006, the State of Nevada was rated 40<sup>th</sup> out of 50 states in early intervention, so OSEP required a corrective action plan, which required early intervention to show these reports to OSEP. Ms. Fyfe informed the group that the required reports continued for the next three (3) years in which NV rated 45<sup>th</sup> out of 50 until 2008. Then NV went to 49<sup>th</sup> out of 50 in 2009, however all the activities for Child Find were supposed to end in 2012, which they have not. There have not been any more corrective action plans required by OSEP, and NV then ranked 30<sup>th</sup> for 2012, 32<sup>nd</sup> for 2013, and 38<sup>th</sup> for 2014 out of 50 for the next few years since the target was met. OSEP raised the target last year to 2.46% based on birth (0) to three (3), with NV at 3.1% of the population.

Ms. Kincaid commented that in NV EI history the state has suffered with waiting lists during those years. Ms. Fyfe presented a graph that showed the Child Find activities broken down by county, population, and referrals for the first three (3) quarters of 2021. Ms. Fyfe thought it was useful to show the group this new breakdown graph instead of four (4) different spreadsheets, and then presented the group with a graph showing where the referrals came from. The IDEA Part C Child Find policy was then presented to the group which shows the purpose of the group in accordance with the law.

**V. Update on IDEA Part C Differentiated Monitoring Services and Supports (DMS)**

Ms. Fyfe shared what OSEP is monitoring through DMS, specifically Nevada for this protocol. Nevada is one of the first cohorts to be monitored and OSEP is looking at Nevada's Part C office, how Part C monitors programs, and how Part C follows up on non-compliance. There will be feedback from OSEP and there might be a corrective action plan based on their findings. Ms. Fyfe presented the entire layout of IDEA Part C monitoring for the programs to show that OSEP monitors Part C just like Part C monitors the programs. Ms. Kincaid asked if any of the monitoring is in person, or is it sent electronically to OSEP? Ms. Fyfe responded that the information is sent through the mail and email, also Team's meetings have taken place. Ms. Fyfe believes it will be in person at some point once travel becomes safe.

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

Ms. Waugh concluded that we have our standard list of agenda items and asked the group for additional agenda items. Ms. Kincaid wanted the project assist numbers pre-COVID and through COVID to see how families are reaching out. Also, Ms. Kincaid wanted to know if hospital contacts have dissipated through COVID, and if early intervention needs to develop relationships with hospitals again. Ms. Fyfe mentioned that EI is in phase III (3) of the re-entry plan, with information on how to deal with COVID and hybrid options being available to families. Ms. Waugh wants Child Find materials added to the agenda for the next meeting. Ms. Frisk informed the group that she wants to make posters for doctors' offices and hospitals that have EI information and the QR code, she wants to present that at the next meeting for feedback.

**VII. Schedule Future Meetings (For Possible Action)**

Tuesday, November 16, 2021, 11:30 a.m. – 1:00 p.m.

**VIII. Public Comment**

No public comment was made.

**IX. Adjournment**

The meeting was adjourned at 1:01 p.m.

## ICC Equity Subcommittee

From Abbie: Mission Statements typically are related to the present activity of the Subcommittee. Vision Statements typically are regarding the aspirations of the Subcommittee of what we hope to achieve.

### Mission Statement (critical work):

- Identify unique and diverse needs of the families we serve
- Identifying and committing to work together
- Use the data to direct or redirect resources in NV once we identify underrepresented groups
- Address family concerns related to equity
- Parent input once mission and vision is created
- Incorporate “commitment” in mission statement
- Pledge commitment to incorporate equity
- Education and training for staff on equity and diversity (goal in strategic plan as well)
- Safety for staff while ensuring services are provided in underserved areas

### Vision Statement (what we would like to see happen):

- Include family component in vision and mission
- Represent diversity of NV
- Every child to receive equitable services- those who aren't receiving services due to geographic location and critical shortages
- Cultivating a climate of equity
- Safety for staff while ensuring services are provided in underserved areas



#### Notes:

- Provide concerns from families in future meetings
- Public comment during meetings to also address those concerns (members or public body)
- Mistrust of medical professionals needs to be addressed
- Differentiate the difference between the Equity and Child Find Subcommittee
- The Department recommends that States address how the COVID-19 pandemic has increased the disparity in accessing early intervention services and create systems to identify and address these inequities. With funding from the American Rescue Plan for IDEA Part C, now is the time for States to implement infrastructure changes and enhance implementation capacity to support EIS providers in implementing evidence-based practices to address the disparities in the State's early intervention system from screening, eligibility, and service delivery all the way through transition. These activities could include improving data systems so they can be used to help identify and measure equity challenges and ensure that families with limited English proficiency, families from low-income backgrounds, and families of color have access to high-quality early intervention services through targeted outreach, resources, and supports. Building a strong equitable system also requires a diverse workforce with the capacity to effectively support families with a variety of backgrounds
- Mobilize and join the movement to identify oppressive system inequities, as equal partners, with all families, practitioners, and personnel; to improve access to service, balance and diversify the workforce for underrepresented races, and shift the focus to immediate relief for all races, abilities and human expression
- Disperse statements and OSEP Return to School Roadmap to front line staff working with families

#### Thoughtful Collection and Use of Data

- The absence of full representation of all babies and families in national and state data limits the extent to which inequities can be fully addressed. Development of policies that advance equity and direct resources where they are most needed requires access to comprehensive data that are

collected and reported in a consistent manner across states. Most important, wherever possible, data should be disaggregated by key subgroups at the federal, state, and local levels. It is particularly important that data collection efforts focus on identifying and addressing challenges in reporting on children and families in all racial and ethnic groups, including those for which there has been under-reporting due to smaller population sizes.

- [Addressing Bias and Advancing Equity in State Policy • ZERO TO THREE](#)
- [Return to School Roadmap: Provision of Early Intervention Services for Infants and Toddlers with Disabilities and their Families under Part C of the Individuals with Disabilities Education Act \(IDEA\) \(PDF\)](#)
- Identify and respond to oppressive system inequities as equal partners, with all families, practitioners, and personnel; to improve access to service, balance and diversify the workforce for underrepresented races, and shift the focus to immediate relief for all races, abilities and human expression.

## ICC Budget SFY22

Description	YTD Cost
Stipend:	\$250.00
EI Calendar:	\$6,102.25
<b>Total:</b>	<b>\$6,352.25</b>