

**Part C State Annual Performance Report (APR) for FFY 2009****Overview of the Annual Performance Report Development:**

Federal Fiscal Year 2009 is the same timeframe as State Fiscal Year 2010. This reporting period is for the time period of July 1, 2009 through June 30, 2010.

Information to support the development of this Annual Performance Report (APR) has been compiled from the various components of the general supervision system. This includes all phases of the Part C monitoring process, the Tracking Resources and Children (TRAC) child data collection system, collection and analysis of 618 data, and tracking of complaints. The IDEA Part C General Supervision process has been modified to ensure that in future APRs all programs will have findings issued in the same fiscal year as the data are generated. In previous years, program monitoring was a cyclical system with programs rotating through monitoring every three (3) years. In FFY 2009, Nevada revised the monitoring system to become an annual self-assessment process. Each early intervention program participated in self-assessment in the spring, which includes child record review, analysis of TRAC data, and review of complaint findings. Each program has developed a Quality Assurance team and the Part C Office contact who is lead for that program participated in the process. The program issues a self-assessment report to the Part C Office with their data, and Part C staff review and verify all components of the report and issue a letter of findings no later than June 30<sup>th</sup> of that year. In order to keep the monitoring process within one fiscal year, data are pulled from the first three (3) quarters of the year. Data from TRAC represent 100% of the children for that time period and data from child record reviews represents 10% of program enrollment. This selection is representative of the overall early intervention population. Data reflected in this APR are based on the fiscal year when the service data was generated from July 1, 2009 through June 30, 2010.

Throughout the course of FFY 2009, Nevada has presented data and other information relative to the State Performance Plan (SPP) and related activities to early intervention programs in all regions. Information regarding performance has also been reported to Nevada's Interagency Coordinating Council (ICC) including ICC Subcommittees, as appropriate. The Part C Lead Agency meets with all early intervention program managers and supervisors on a quarterly basis and relevant data regarding the status of performance relative to the SPP indicators is discussed when appropriate. The IDEA Part C Office personnel meet on a monthly basis to review critical issues and status of performance for each indicator.

Components of the SPP are included on the ICC agenda at each quarterly meeting. Each indicator of the APR was reviewed with the ICC for feedback and input prior to submission. A form for written feedback was also provided at that time. In addition, the APR was submitted to all early intervention program managers and supervisors for review and comment prior to submission. Subcommittees were formed to work on child outcomes and child find indicators of the SPP and to strategize around implementation of the activities and for data collection. Part C personnel participated in all of the technical assistance calls provided by OSEP related to APR development and submission. Three Part C staff attended the Western Regional Resource Center's (WRRC) technical assistance meeting related to the APR in November 2010. The State contacts with the National Early Childhood Technical Assistance Center (NECTAC) and the (WWRC) provided extensive technical support to the State in finalizing the APR. The IDEA Part C Office would like to express appreciation to everyone for their input and support for the ongoing development of this APR.

It is also noted during this reporting period Nevada has experienced the worst economic crisis in its history. Projections indicate this situation will continue for the State for the foreseeable future. Nevada's financial health is heavily dependent on tourism and when the national economy suffers, Nevada's revenue is severely impacted. The State's early intervention programs, like many others in the state, have been impacted through hiring freezes and the stresses of potential budget cuts. The need for support for early intervention services was recognized by both the Governor and the Legislature during the State 2009 legislative session and new funds were allocated. The bulk of those funds were made available in FFY 2009 and the increases for FFY 2010 were minimal. The State legislative session for the next

## APR Template – Part C (4)

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biennium will just be convening at the time of this report's submission, and the dollars allocated for early intervention services will not be known until the end of this session. However, in the Governor's State of the State address, he did advocate for full support for early intervention programs.

The APR will be posted on the Nevada Early Intervention Services website by May 1, 2011. Local report cards will be created for each region and will also be posted to the website by May 1, 2011. The website can be located at the State of Nevada website under: <http://health.nv.gov/BEIS.htm>. All reports are under the Publications tab. A news release will be created to report to the media on the release of the APR in June 2011 through the Department's Public Information Officer.

**Part C State Annual Performance Report (APR) for FFY 2009**

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

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

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

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

**Measurement:**

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

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

FFY	Measurable and Rigorous Target
FFY 2009	100%

**Nevada’s Definition of Timely Services:**

Early intervention services identified on the initial and subsequent Individualized Family Service Plans (IFSP) of an eligible child, including IFSP reviews, will be provided to the child and family as soon as possible following the family’s consent to implement the IFSP. Determination of whether or not services are provided in a timely manner will be based on:

- A. Initiation of new services within 30 days from the date the parents provided consent for the IFSP service; or
- B. The projected IFSP initiation date as determined by the IFSP team and indicated on the IFSP. This may include services such as periodic follow-up or service needed on an infrequent basis (ex. on a quarterly basis).

**Actual Target Data for FFY 2009**

Statewide: The percentage data for this indicator is taken from program monitoring conducted in FFY 2009. Statewide data for this reporting period is based on a selection of records from each of the State’s eight (8) early intervention programs. Results of this monitoring are:

- **190 child** records were reviewed that had new IFSP services added during the data period being reviewed
- **110 children** received all early intervention services on their IFSPs in a timely manner
- Percent =  $(110/190) * 100 = 58\%$

In FFY 2009, all early intervention programs in the State were monitored based on the revised monitoring process. The new process requires all early intervention programs statewide to participate in monitoring on an annual basis. Data were gathered through review of a selection of records for each agency which included initial and annual IFSPs as well as six month, annual and interim reviews. The data period covered was July 1, 2009 through March 31, 2010. The data showed 110 of the 190 records reviewed were compliant for timely initiation of all IFSP services. Four (4) of the 110 records each had only one (1) service delayed which was due to family circumstances. These circumstances included:

- Loss of contact with the family;
- Family cancelled appointment due to conflict with another appointment;
- Family no-showed for appointment; and
- Multiple appointments cancelled by the family.

The remaining 80 records were found to be noncompliant because at least one (1) service on the IFSP was delayed due to program issues. The primary reason for delays statewide was determined to be shortage in personnel. This is not always just related to financial issues but also to lack of qualified providers in Nevada. Additional funds for early intervention services became available July 1, 2009; however, the process of identifying new providers, working out provider agreements and working with the providers to ramp up to full capacity for providing services continued over the course of the year. The State continues to seek out and enroll early intervention service providers.

**Identification of Findings of Noncompliance in FFY 2009**

Data from monitoring of eight (8) programs are being reported for the period of FFY 2009. At the close of the monitoring process in June 2010, the following was found relative to Indicator 1:

- Two (2) programs were performing at 100% - no finding was issued;
- Two (2) programs had an ongoing finding of noncompliance from previous reporting periods (FFY 2005 and FFY 2006). One (1) program (from FFY 2005) has been verified to have subsequent correction of the noncompliance;
- One (1) program had an uncorrected finding of noncompliance from FFY 2008 but subsequent correction has been verified; and
- Three (3) programs had a finding issued for Indicator 1 as a result of FFY 2009 monitoring. Correction of these findings of noncompliance will be reported in the FFY 2010 APR, due February 1, 2012.

Eight (8) complaints related to timely initiation of service were filed during FFY 2009. All eight (100%) of the complaints were resolved at the local program level and the families withdrew the complaint. Part C issued no findings related to these complaints as the program provided timely resolution and individual child correction. The programs involved in the complaints were already identified as having a systemic finding related to implementation of timely services through the monitoring process.

**Correction of Noncompliance Related to Indicator 1:**

**Table 1.A: Identification and Correction of Noncompliance for FFY 2005 – FFY 2009**

FFY	Number of New Findings of Noncompliance Related to Indicator 1	Number of Findings for which Correction was Verified within One Year	Number of Findings for which Correction was Subsequently Verified (Date)	Number of Findings of Noncompliance Remaining
FFY 2005	1	0	1 (January 2011)	0
FFY 2006	2	1	0	1
FFY 2007	6	5	1 (January 2010)	0

<b>FFY 2008</b>	14	12	1 (December 2010)	1
<b>FFY 2009</b>	3	To be reported in the FFY 2010 APR		

**Correction of Noncompliance FFY 2008**

**Timely Correction of FFY 2008 Findings of Noncompliance (corrected within one year from identification of the noncompliance):**

Two (2) early intervention programs each had one (1) finding of noncompliance in Indicator 1 based on monitoring activities conducted in FFY 2008. One (1) program was verified to have timely correction for both individual child and systemic noncompliance. The other program continued to have noncompliance in monitoring conducted in FFY 2009; however, subsequent correction has been verified.

Twelve new findings of noncompliance issued in FFY 2008 were identified through complaint investigations. Eleven findings were the results of investigation of individual child complaints. Timely correction was verified for all individual children where a finding was issued based on complaint investigation. A twelfth finding was issued as a result of an administrative complaint filed on behalf of all children in the State. The root cause for all findings of noncompliance related to this indicator was determined to be the lack of available personnel to initiate services in a timely manner.

Nevada’s process for verification of correction of noncompliance includes follow-up to ensure each child’s services are provided, though late. A remedy for delay in services must be addressed for each child via an IFSP review meeting with the family. Details of the meeting and subsequent decisions are documented and signed by the parent(s) on an IFSP review page. Random file reviews are conducted to ensure plans for remediation are implemented as indicated in the agreement.

In addition, new data is collected for a period subsequent to the issuance of monitoring findings [typically one (1) month or one (1) quarter]. The Part C Office begins the process of data collection for tracking program progress within the first quarter from issuance of the finding and implementation of the program’s corrective action plan (CAP). The frequency of collecting new data for tracking correction is influenced by the level of noncompliance identified for a program and what is specified in their CAP. This data is obtained through a combination of tracking service timelines through the Tracking Resources and Children (TRAC) database and review of child records for verification. This process is also utilized to monitor the program’s progress in compliance with requirements to provide timely services for all eligible children enrolled in the program.

**Required Actions to Address Finding of Noncompliance Issued in FFY 2008 and Not Corrected in a Timely Manner:**

The one (1) remaining finding of noncompliance issued by the Part C Office in FFY 2008 is a result of investigation of the administrative complaint. This finding is based on a systemic issue and cannot be verified as corrected until the requirement for timely initiation of services for all children is met. To ensure correction for this finding, the Part C Office required the following:

- Conducting on-site focused monitoring to drill down into the data and explore additional causes of the on-going noncompliance with specific emphasis on program policies and procedures, staffing, supervision and timeliness of data reporting – the primary cause has already been identified as availability of personnel;
- Development of written policies and procedures to be implemented by all early intervention programs relative to implementing correction and remedy for all children whose services have not been initiated in a timely manner;
- Program participation in quarterly statewide management team meetings by all programs;

- Increased frequency of tracking delay in service initiation by programs from quarterly to monthly through the TRAC data system;
- Part C Office tracking of assignment of children to service provider agencies and weekly caseload reports;
- Increased frequency of monitoring progress on the implementation of the program's CAP activities developed as a result of program monitoring; and
- Establishing specific improvement benchmarks for individual early intervention programs.

**Correction of Noncompliance FFY 2007**

A total of six (6) new findings of noncompliance were issued by the Nevada Part C office in FFY 2007 for this indicator. One (1) finding was based on program monitoring and five (5) findings of non-compliance were based on investigation of individual child complaints.

All five (5) findings based on individual child complaints were corrected in a timely manner. Correction for each child and family for which the finding was issued, based on complaint investigation by the Part C Office, included a meeting between the family and the program to develop a written plan for correcting the identified noncompliance. A copy of the plan was submitted to the Part C Office for verification and follow-up data was collected by the Part C Office to verify that each plan had been fully implemented as specified. Upon verification, a letter of correction and closure was issued to the program.

The one (1) finding issued by the Part C Office as a result of program monitoring was not corrected in a timely manner. This finding was issued in April 2008 and a key factor in the finding was the failure of program personnel to maintain appropriate documentation. The program was required to develop a Corrective Action Plan (CAP) and a list of specific corrections for individual children was issued by the Part C Office. The Part C Office provided follow-up training and technical assistance to program personnel as specified in the CAP. The program did not achieve full correction of the noncompliance by April 2009. In June 2009, the program notified the Nevada Health Division they were withdrawing as an early intervention service provider effective July 2009.

The IDEA Part C Office worked in conjunction with the Health Division from July through August of 2009 to transition all children being served by the program to other early intervention service providers. The Part C Office also conducted verification to ensure correction of noncompliance for delay of initiation of services specified on the Individualized Family Service Plan (IFSP) had been addressed for all children identified through the monitoring process and still within the jurisdiction of the program at the time of program closure. When appropriate, the individual child correction was verified to have been completed by the receiving program. Final verification of correction for all children was completed by the Part C Office in January 2010.

Since the program withdrew as an early intervention service provider, it was not feasible to review updated data to determine that the requirement was being implemented for all children by that program as is the standard procedure implemented by the IDEA Part C Office. As a result, this finding was closed based on individual child correction and the closure of the early intervention program. The closure of this finding as "corrected" was reported in the FFY 2008 APR and acknowledged by OSEP on Page one (1) of the OSEP FFY 2008 APR Response Table.

**Required Correction for Previously Identified Noncompliance:****Remaining Findings of Noncompliance from FFY 2006**

One (1) early intervention program had one (1) finding of noncompliance identified for this indicator in FFY 2006. This finding was not corrected as of the submission of the FFY 2008 APR and remains uncorrected in this reporting period.

This early intervention program is located in the most populated region of the State. The Nevada State Demographer estimated approximately 76% of the State's population of children age birth to three (3) were residing in this region in FFY 2009. The Part C Office has verified the program is implementing required policies and procedures for ensuring correction for all individual children (services are provided

for each child, though late, and a remedy for delay is offered to the family). The ongoing noncompliance is systemic as it cannot be verified that the requirement for timely services is currently being implemented for all children.

The primary issue underlying the on-going noncompliance for this program has been identified as insufficient personnel capacity to serve the number of children being referred and the number determined eligible for early intervention services. The reduced capacity was directly linked to the State's budget crisis which resulted in restrictions on hiring. The program also experienced a decrease in workforce capacity for existing personnel due to the state mandate for one day furlough each month for all employees.

This program has operated under a CAP since the initial finding was issued in FFY 2006. The program's progress has fluctuated over time. Through the FFY 2009 monitoring process, it was determined the program had experienced significant slippage in Indicator 1 during the period from FFY 2008 to FFY 2009. Due to the low performance and the on-going noncompliance, the program was selected for focused monitoring in FFY 2010. Areas reviewed included program policies and procedures, staffing, supervision and timely updates of program data. The focused monitoring was conducted in October 2010 and the following issues were identified as additional root causes for the program's low performance in this indicator:

Policies and Procedures:

- The program assumed the role of "Point of Entry" for the state's most populated region effective August 2009. Allocation of new funds for early intervention services available July 1, 2009 were designated entirely for expansion of service capacity through community partners. In addition to providing on-going services for children and families, including compensatory services for children with delay in service initiation, the program continued to conduct all intake, evaluation/assessment, eligibility determination and developed initial IFSPs prior to transitioning children to community service providers. Since no new funds were allocated for additional personnel for the program, they assumed responsibility for additional work with no additional personnel.

Staffing:

- Lack of success in being able to hire therapists despite multiple attempts through multiple venues due to salary schedules not being competitive. The program has been able to establish a provider agreement with one community-based therapy group;
- The program has been able to fill some vacant state employee positions; and
- As children and families that had experienced delays were assigned to providers and compensatory services were required this impacted availability of caseloads for assigning new children to service providers.

Supervision:

- No issues were identified related to direct supervision that appeared to be significant to correction of noncompliance in this indicator.

Data:

- Some instances of untimely updates of data in TRAC were resulting in children who were not actually waiting for services showing up on monthly reports.

**New Activities Required for FFY 2010 as a Result of Focused Monitoring:**

**New Activities Required for Correction as a Result of Focused Monitoring:**

- Streamline the process of transferring referrals to community providers by transitioning families at the point of referral. This will reduce the burden on program personnel to perform eligibility determination and development of the initial IFSP;
- Meet with Part C Office contact to revise the program's CAP to identify more specific and immediate activities reasonably calculated to ensure correction of the noncompliance;

- Establish performance benchmarks for each quarter of FFY 2010 to ensure correction of the on-going noncompliance as soon as possible;
- Part C Office will continue to monitor assignment reports on a monthly basis and the program will be required to submit specific quarterly reports based on data gathered from child record reviews; and
- Monitor monthly caseload of community providers to ensure the maximum number of referrals can be transferred to ensure timely delivery of services.

**Remaining Findings of Noncompliance from FFY 2005**

One (1) early intervention program had one (1) finding of noncompliance identified in FFY 2005 for this indicator. The noncompliance was not corrected as of the submission of the FFY 2008 APR. The program has operated under a CAP for this Indicator since the finding was issued.

The root causes of the noncompliance were found to be rapid increase in the number of eligible children and shortage of personnel due to hiring freezes imposed as the State's budget crisis worsened. The program was given the opportunity to hire for some positions through a justification process which was often lengthy. In addition, personnel employed by the program, as State employees, were mandated to take one (1) furlough day per month beginning July 1, 2009.

Ongoing improvement was verified by the Part C Office; however, the program's noncompliance remained uncorrected in the FFY 2009 reporting period. The Part C Office contact maintained follow-up with the program including participating in some sessions of the internal Quality Assurance (QA) Team which meets twice monthly.

The program submitted data in August 2010 verifying individual child correction had been completed for all children with delays in service initiation identified during the FFY 2009 monitoring process. The Part C Office made an on-site verification visit in November 2010 to review a selection of records for children with new services added to IFSPs in the month of September to verify the status on timely services and correction for individual children. At that time, 15 records were reviewed from the month of September and 12 of the 15 (80%) were compliant for timely initiation of all IFSP services. The Part C Office has since verified individual child correction for these children. At the end of the month of November the program was able to provide data showing no children were waiting for services in excess of the timeline specified on the IFSP (in most cases, 30 days from parent consent to implement the IFSP). Data was pulled again in December 2010 and, again, at that time no children were waiting for service initiation beyond the target start date on the IFSP. This verified systemic correction for the program. On January 6, 2011, the Part C Office issued a letter to the program notifying them they had achieved full correction of the noncompliance for this indicator. Correction was achieved through the following actions:

- In the 2009 Legislative session, the Legislature approved allocation of additional funds (a combination of State funds and ARRA funds) to increase the capacity for services through the early intervention system. All new funds were designated to expand services through community organizations. The State Health Division and state operated early intervention programs began the process of soliciting proposals from community providers as soon as the allocation was available.
- During the period from September 2009 through September 2010, the program supported the establishment and full enrollment of two new community partner programs in the region to expand resources for services for children and families. The program showed steady progress on correction of the noncompliance during this process. The first program initiated services in September 2009 and the second program started to enroll children as of July 1, 2010. Each program enrolled a minimum of 100 children within the first six months of operation as required by the provider agreement.
- Following the FFY 2009 monitoring process, the program established quarterly benchmarks for FFY 2010 in its CAP for Indicator 1.
- The program strengthened internal tracking and scheduling systems and implemented an internal QA Team to review status/progress in all areas of performance.

- Weekly data reports were generated internally and a monthly report on the number of children with delayed service initiation was generated both internally by this program and for all early intervention programs through the Part C Office.
- The Part C Office conducted periodic child record reviews with the program as well as reviewing child service status in the TRAC data system to ensure services were provided to children, though late. There was also monitoring to ensure the family had been offered compensatory services in the instances where there had been delay.

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2009:**

The overall percent of compliance (58%) reported for FFY 2009 is an improvement of 1% over the 57% reported in FFY 2008. It was determined the State's lack of significant progress in the percentage of compliance was linked primarily to slippage experienced by one program. This program was targeted for focused monitoring. The primary root cause of the noncompliance in this indicator has been determined to be lack of provider capacity to meet the need of the rapid increase in the number referrals and eligible children in the Part C system of services. Initially, the shortage of personnel was due to hiring freezes imposed as the State's budget crisis worsened. Programs were given the opportunity to fill some vacant positions through a justification process that was often lengthy.

In the 2009 Legislative session, the Governor, acknowledging the need for increasing the capacity of the early intervention system included additional funding in the budget presented to the Legislature. The Legislature approved this allocation of additional funds (a combination of State funds and ARRA funds) totaling \$9,071,785 over the next biennium to increase the capacity for services through the early intervention system. All new funds were designated to expanding services through community organizations. The total of the funds was not immediately available at the beginning of the fiscal year. A specific roll-out schedule was established by the Legislature for these funds beginning July 1, 2009.

The State Health Division and state operated early intervention programs (acting as regional offices and points of entry for children and families) began the process of soliciting proposals from community providers as soon as the allocation was available. Building on the four (4) existing early intervention programs, in FFY 2009, four new community provider agencies entered into a provider agreement with the State Health Division to establish and maintain a comprehensive early intervention program. Three of the programs are located in the Southern region and one is in the Northwest region. A fifth began service delivery in the Northwest region in July 2010. Each program is committed, by terms of the agreement, to enroll at least 100 children by the end of their first six (6) months of operation. All programs, both state operated and contract agencies, have continued to experience challenges with finding and retaining qualified personnel in some disciplines. Beginning July 1, 2009, early intervention service providers employed by the state, were required to take one (1) mandatory furlough day each month. While service capacity was expanded through community providers, this furlough requirement in effect, resulted in reduction of the availability of the workforce for early intervention services in the state operated programs.

The State has been successful in defining the issues resulting in systemic noncompliance for this indicator. Steps have been taken to ensure correction. While not always meeting the requirement of timely correction [within one (1) year of the issuance of a finding], it is evident consistent progress is being made by the majority of early intervention program.

The State has made substantial progress overall in this indicator reducing both the number of children who have delays in service initiation and the length of those delays. A system for ensuring correction for individual children is in place and functioning effectively. However, correction of the systemic noncompliance has not been achieved. Because the State's budget crisis continues and further cuts are projected for the future, there is some concern about potential impact for the early intervention system. The State Legislature has just come into session for the State 2011 – 2012 biennium. The Part C Office will monitor any activity related to early intervention services and continue to provide data support to the

lead agency administration to demonstrate the need to maintain progress that has been gained in correction of noncompliance in this indicator.

### State Performance Plan Activity Update

Activity 1: Develop budget requests for future legislative sessions documenting the need for additional personnel if data indicates regions cannot maintain timely service delivery. **This activity is ongoing.**

- *A request for allocation of additional funds to support early intervention services was included in the Governor's proposed budget for the current biennium. The Part C Office assisted the State Health Division, Bureau of Early Intervention Services (BEIS) in compiling data to support budget preparation and demonstrate the urgent need for additional resources. The Legislature approved this portion of the proposed budget and allocated approximately \$9 million in new funds for early intervention services over the next biennium - State Fiscal Year (SFY) 2010-2011. All new funds were designated for expanding early intervention services through partnerships with community-based providers. State operated programs continued to be funded at FFY 2008 capacity.*
- *A specific schedule for the roll-out of these funds was established by the Legislature. As demonstrated in earlier sections of this indicator, the incremental increase in service providers through the roll-out of new funds has clearly coincided with the improvement and correction of noncompliance, especially in the Northwest region. The roll-out began on July 1, 2009 and was as follows:*
  - *Southern Region: funds for 41 new children each month for July 2009 through February 2010, 42 additional children for the month of March 2010, 41 new children for the month of April 2010, 42 new children for May 2010 and 43 new children for the month of June 2010. The allocation for the FFY 2009 in the Southern region was to provide services to a total of 496 new children.*
  - *Northwest Region: funds for an additional 18 new children per month for July through October 2009, 17 additional children per month from November 2009 through May 2010 and an additional 18 children for the month of June 2010. In total, support was allocated for a total of 209 new children over the course of FFY 2009.*
  - *Northeast Region: five (5) additional children each month for the months of July and August 2009, six (6) additional children in the month of September and five (5) additional children each month from October 2009 through June 2010 for a total of 61 new children in FFY 2009.*
- *As the process of roll-out of funds began, the Part C Office tracked the list of eligible children who were not receiving timely services on a monthly basis to ensure there is a steady increase in the number of children being assigned to both new and existing service providers. Data from TRAC shows a total of 3,805 children were served statewide from July 1, 2009 to June 30, 2010. The following information describes the enrollment of new service providers across the state and the impact this has had on the State's ability to provide timely services. While the total number of children served did not increase from FFY 2008, the addition of new service providers substantially reduced both the number of children that have delays in service initiation and the length of time before services are initiated and resulted in at least one program with longstanding noncompliance achieving full correction.*

Southern Region:

  - *Three (3) new early intervention service providers were established in the Southern Region in FFY 2009. This resulted in 709 children who had not had timely initiation of services beginning to receive those services as well as compensatory services for the time services were delayed.*
  - *In the two (2) existing early intervention programs, one received expansion dollars and served a total of 275 children and provided compensatory services to children who had delayed initiation of services. This provider had served a total of 96 children in FFY 2008. The other existing program continued to serve as point of entry for all families in the region and assumed responsibility for determining eligibility and developing the initial IFSP prior to transferring families to new community provider programs. This program*

served a total of 1,537 children in FFY 2009 not including the children who were transferred to other programs.

Northwest Region:

- One (1) new early intervention service provider was added in the Northwest Region. Over the course of the year, this program served 162 children.
- The one (1) state-operated program served a total of 960 children. This does not include the children transferred to, and served by, the new service provider. Again, this program also acted as point of entry for the region and assumed responsibility for determining eligibility and developing the initial IFSP prior to transferring families to the new community provider.

Northeast Region:

- The existing early intervention program in the Northeast region has demonstrated the ability to meet requirements for all children relative to this indicator; therefore, no new service providers have been added in that region. Also, no new service providers have expressed interest in providing services in that area. This is the most rural region of the State. The Northeast program provided services to 162 children in FFY 2009.
- The Part C Office collaborated with the State Health Division in creating a checklist for ensuring potential new service provider agencies are able to meet all requirements for providing early intervention services. Program trends were monitored on a monthly basis to identify the length of time between service identification and service initiation. The Part C Office conducted a Technical Assistance review with all new service provider agencies after the first six (6) months of operation to verify understanding of requirements and status of internal procedures for meeting provisions of the provider agreement.
- The Part C Office and State Health Division representatives provided updated status reports to the Interagency Coordinating Council (ICC) and other interested parties on a regular basis. As part of the process of exploring systemic level changes which could support the State in coming into compliance in this indicator, the Part C Office worked with a subcommittee of the ICC for early intervention to gather and consider the pros and cons of instituting a sliding fee scale.

Activity 2: (Formerly activity 13) Create partnerships with community providers to establish comprehensive early intervention programs and to provide services to children when there is not a provider available to implement the services on the IFSP in the NEIS program. **This activity is ongoing.**

- In addition to enrolling new provider agencies to provide a comprehensive early intervention program, regional programs have established procedures for utilizing independent discipline specific resources through community-based providers, when services would otherwise be delayed due to the lack of availability on the caseload of an internal provider. The majority of early intervention service provider agencies operate some version of this option for families, most often when third party billing for services is an option. The Northwest program has assigned a dedicated service coordinator to work with families who were interested in this option to ensure appropriate coordination of services across agency lines as the family may continue to be enrolled for other services on the IFSP. Implementation of these procedures is based on parent agreement when third-party payment is an option.

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010**

**Revisions to Improvement Activities for FFY 2010**

Activity 3: Conduct on-site focused monitoring activities with early intervention programs that have ongoing noncompliance, demonstrate a low level of performance and/or when significant slippage is identified to determine the root causes of poor performance and failure to achieve timely correction of noncompliance. **This activity is ongoing.**

## APR Template – Part C (4)

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Justification: This is a new improvement activity for Indicator 1. This activity is being added to specify the criteria the Part C Office will utilize in selecting a program for focused monitoring relative to this Indicator.

All ongoing activities are being continued through FFY 2012.

**Part C State Annual Performance Report (APR) for FFY 2009**

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

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

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

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

**Measurement:** Percent = [(# of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings) divided by the (total # of infants and toddlers with IFSPs)] times 100.

FFY	Measurable and Rigorous Target
2009	96% of children received services in the home or community-based settings

**Actual Target Data for 2009:**

The following data are provided using the Tracking Resources and Children (TRAC) child data collection system as collected for 618 data on December 1, 2009.

Statewide: 1,892 children had an Individual Family Service Plan (IFSP) on December 1, 2009, of which 1,883 (99.5%) received their primary services in the home or community based settings.

Nevada’s performance in FFY 2009 of 99.5% exceeded the target for natural environments developed in the State Performance Plan (SPP) of 96%.

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2009:**

In FFY 2009 through the comprehensive self-assessment process, one (1) program had a finding in the area of natural environments and included failure to include appropriate justification in the child’s IFSP. This program is a new program and this was the first time they participated in the self-assessment process. Data for this indicator was from the December 1, 2009, 618 data report. Their performance on this indicator was at 69% and did not meet the state’s target of 96%. All other state programs were providing the majority of services within the natural environment of home and community settings. This program has developed a Corrective Action Plan (CAP) and the Part C Office will be working with them for correction within one (1) year of the finding.

Nevada has been providing the majority of services for all children within the natural environment for the past seven years. Through the IFSP process, the IFSP team including the family determines the appropriate location for service delivery which is within the child’s home or within the community.

Nevada’s IFSP form contains a page to be used by the team to provide justification if it is determined a specific service cannot be achieved in the natural environment. Natural environment justifications are monitored through child record reviews during the self-assessment process. In order to increase options for families within their local communities, regional programs have developed partnerships with a variety of community programs to provide natural learning opportunities for infants and toddlers. Unless there is an appropriate justification, the majority of all services are provided either in the home or a community setting. The majority of children in early intervention receive a combination of services within the home and community. Children may be receiving home visits from interventionists in addition to participating in community play groups. Because the reporting requirement for 618 data allows only one choice of setting, the primary service location is generally the home, which is not reflective of the variety of environments in which children are receiving services.

**Table 2.A.: The following table compares percentages from FFY 2005 to FFY 2009 in providing services within the natural environment.**

Program	FFY 2005	FFY 2006	FFY 2007	FFY 2008	FFY 2009
Statewide	98.5%	99.6%	99.5%	99.7%	99.5%

The activities below describe the types of partnerships that have been created to provide opportunities for children to receive early intervention in natural environments other than the home.

**State Performance Plan Activity Update**

**Activity 1: Development of Community Partnerships. This activity is ongoing.**

- There are currently 19 active play groups throughout the Southern region. These play groups are located at 17 different locations in the community. This allows families to participate in a play group within their local community, and promotes developing friendships with other families within the playgroup. Any new playgroups being developed are in process of developing Memorandums of Understanding.
- The Southern region plans to maintain the amount of groups to 20. Existing staff are leading playgroups as well as providing home based services, and participating on Multidisciplinary (MDT) teams. Keeping the groups to 20 will decrease staff burnout, assist with coverage and assure manageability.
- Two (2) programs in the Southern region have collaborated through the program’s child care center to offer playgroup opportunities within the child care program. This allows the early intervention children an opportunity to play with typically developing peers. Both programs have early intervention personnel who assist during the playgroup sessions.
- The Northwest region continued the Explore and Learn Playgroups with Family to Family Connection and expanded those playgroups to team with local community agencies including gymnastic programs, the Wee Read times at the library, and a local apartment complex. The Northeast and Northwest regions have a partnership with Early Head Start and provide services within that agency. The Northeast region is collaborating with a new Migrant Head Start program as well.
- The Northwest region has contracts with child care centers and home child care programs as early intervention partners and serves children within those programs as part of the natural environment.
  - New Playgroups have been developed including expanding into new areas. There are a total of 15 playgroups available to families.
  - During the next year, there are three (3) more proposed playgroups teaming with Family to Family Connection and Early Head Start.
  - Collaboration with Early Head Start through an expansion grant application to co-locate with early intervention. The construction plans were developed to ensure the classrooms meet Early Head Start requirements and the program will move into the early intervention program site by the beginning of FFY 2010.

- *The Early Intervention Partners Project continues to offer services supporting up to 31 children in child care centers in Reno, Carson, and Rural areas.*
- *American Indian Population— the Northwest program has contacted Indian Health Services to further collaborate with the local Native American tribes in order to serve more children.*

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010.**

All ongoing activities will be continued through FFY 2012.

Part C State Annual Performance Report (APR) for FFY09

Overview of the Annual Performance Report Development:  
See Page 1.

**Monitoring Priority: Early Intervention Services in Natural Environment**

**Indicator 3:** Percent of infants and toddlers with IFSPs who demonstrate improved:

- A. Positive social-emotional skills (including social relationships);
- B. Acquisition and use of knowledge and skills (including early language/communication); and
- C. Use of appropriate behaviors to meet their needs.

**(20USC 1416(a)(3)(A) and 1442)**

**Measurement:**

Outcomes:

- A. Positive social-emotional skills (including social relationships);
- B. Acquisition and use of knowledge and skills (including early language/communication); and
- C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B, and C:

- a. Percent of infants and toddlers who did not improve functioning = [(# of infants and toddlers who did not improve functioning) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
- b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
- c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it = [(# of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
- d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers = [(# of infants and toddlers who improved functioning to reach a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
- e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers = [(# of infants and toddlers who maintained functioning at a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

**Summary Statements for Each of the Three Outcomes**

**Summary Statement 1:** Of those infants and toddlers who entered or exited early intervention below age expectations in each Outcome, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.

**Measurement for Summary Statement 1:**

Percent = # of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in category (d) divided by [# of infants and toddlers reported in progress category (a) plus # of infants and toddlers reported in progress category (b) plus # of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in progress category (d)] times 100.

**Summary Statement 2:** The percent of infants and toddlers who were functioning within age expectations in each Outcome by the time they turned 3 years of age or exited the program.

**Measurement for Summary Statement 2:**

Percent = # of infants and toddlers reported in progress category (d) plus [# of infants and toddlers reported in progress category (e) divided by the total # of infants and toddlers reported in progress categories (a) + (b) + (c) + (d) + (e)] times 100. If a + b + c + d + e does not sum to 100%, explain the difference.

**Target Data for FFY 2009:**

**Targets and Actual Data for Part C Children Exiting in FFY 2009 (2009-10)**

Summary Statements	Targets FFY 2009 (% of children)	Actual FFY 2009 (% of children)
<b>Outcome A: Positive social-emotional skills (including social relationships)</b>		
1. Of those children who entered or exited the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they exited the program	72.7%	<u>68.3%</u> <del>67.8%</del>
2. The percent of children who were functioning within age expectations in Outcome A by the time they exited the program	32.6%	<u>40.2%</u> <del>39.8%</del>
<b>Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)</b>		
1. Of those children who entered or exited the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they exited the program	75.8%	<u>69.7%</u> <del>69.1%</del>
2. The percent of children who were functioning within age expectations in Outcome B by the time they exited the program	32.6%	<u>37.1%</u> <del>36.9%</del>
<b>Outcome C: Use of appropriate behaviors to meet their needs</b>		
1. Of those children who entered or exited the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they exited the program	78%	<u>71.1%</u> <del>71.5%</del>
2. The percent of children who were functioning within age expectations in Outcome C by the time they exited the program	32.6%	<u>41%</u> <del>39.8%</del>

Progress Data for Part C Children FFY 2009

<b>A. Positive social-emotional skills (including social relationships):</b>	<b>Number of children</b>	<b>% of children</b>
a. Percent of children who did not improve functioning	<u>64</u>	<u>0.6%</u> <del>0.5%</del>
b. Percent of children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	<u>298257</u>	<u>28.5%</u> <del>29.2%</del>
c. Percent of children who improved functioning to a level nearer to same-aged peers but did not reach	<u>320269</u>	<u>30.7%</u> <del>30.5%</del>
d. Percent of children who improved functioning to reach a level comparable to same-aged peers	<u>336280</u>	<u>32.2%</u> <del>31.8%</del>
e. Percent of children who maintained functioning at a level comparable to same-aged peers	<u>8471</u>	<u>8.0%</u> <del>8.1%</del>
Total	N= <u>1044884</u>	100%
<b>B. Acquisition and use of knowledge and skills (including early language/communication):</b>	<b>Number of children</b>	<b>% of children</b>
a. Percent of children who did not improve functioning	<u>42</u>	<u>0.4%</u> <del>0.2%</del>
b. Percent of children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	<u>294254</u>	<u>28.2%</u> <del>28.8%</del>
c. Percent of children who improved functioning to a level nearer to same-aged peers but did not reach	<u>359300</u>	<u>34.4%</u> <del>34.1%</del>
d. Percent of children who improved functioning to reach a level comparable to same-aged peers	<u>327273</u>	<u>31.3%</u> <del>31.0%</del>
e. Percent of children who maintained functioning at a level comparable to same-aged peers	<u>6052</u>	<u>5.7%</u> <del>5.9%</del>
Total	N= <u>1044884</u>	100%
<b>C. Use of appropriate behaviors to meet their needs:</b>	<b>Number of children</b>	<b>% of children</b>
a. Percent of children who did not improve functioning	<u>34</u>	<u>0.3%</u> <del>0.1%</del>
b. Percent of children who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers	<u>282237</u>	<u>27.0%</u> <del>26.9%</del>
c. Percent of children who improved functioning to a level nearer to same-aged peers but did not reach	<u>331292</u>	<u>31.7%</u> <del>33.1%</del>
d. Percent of children who improved functioning to reach a level comparable to same-aged peers	<u>369304</u>	<u>35.3%</u> <del>34.5%</del>
e. Percent of children who maintained functioning at a level comparable to same-aged peers	<u>5947</u>	<u>5.7%</u> <del>5.3%</del>
Total	N= <u>1044884</u>	100%

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2009:**

Progress data in FFY 2008 was utilized to establish Nevada's baseline and targets through FFY 2010 for measuring child outcomes. The data collected for infants and toddlers who received six (6) months or longer of early intervention services for 2009-2010 were collected using the Child Outcome Summary Form (COSF) 7-point rating scale. In FFY 2007 and FFY 2008 Nevada had five (5) agencies providing early intervention services and reporting data on child outcomes. At the end of FFY 2008 one agency notified the State they would no longer provide early intervention services and children served by the program transitioned to another provider. This reduced the existing early intervention provider agencies to four (4) at the end of FFY 2008. In FFY 2009, four (4) new agencies entered into agreement with the State to operate a comprehensive program of early intervention services. Therefore, progress data was reported by eight (8) early intervention programs in FFY 2009. The addition of the new early intervention programs has ~~not~~ had a ~~slight~~<sup>huge</sup> impact on the number of infants and toddlers reported statewide ~~as anticipated~~. In FFY 2009, Nevada is reporting ~~1044884~~ of ~~12884329~~ (81.66%) of infants and toddlers who exited services with a program length of six (6) months or longer. In FFY08, Nevada reported 69% of progress data for the infants and toddlers who received services for six (6) months or longer. This fiscal year, Nevada has a representation of 81%, which is a 12% increase compared to FFY08. Analysis of this year's data indicates ~~244448~~ infants and toddlers were not accounted for due to the following reasons:

- Received an entry ~~and were in the program for six months~~ but did not receive intervention for the entire six months timeframe due to loss of contact with families.
- Received an entry, however; they did not receive an exit due to a lack of internal tracking processes.

Since Nevada has such a narrow eligibility criteria, the workgroup's interpretation of the progress data last year was that it may not be an accurate reflection of the children served. It was anticipated that the progress data would be lower for children who exited early intervention services at age expectations across all three outcomes. In meeting with the stakeholders during this process, the group was more confident about the quality of the data for summary statement one (1) across all three outcomes, which is why the targets for FFY 2009 were set to remain the same as the baseline data with an increase of .1% in FFY 2010. In the process of reviewing summary statement two (2), the eligibility criteria and the exit reasons from Nevada's Tracking Resources and Children (TRAC) database were compared to the number of children exited at age expectations across all three outcomes. ~~Utilizing the Early Childhood Outcome (ECO) calculator to manipulate the data for further analysis.~~ By completing this review and utilizing the Early Childhood Outcome calculator to manipulate the data for further analysis, the workgroup was able to determine a more accurate percentage when setting the targets for summary statement two (2) for FFY 2009.

Comparing the targets set for FFY 2009 and the actual targets from this year's data, Nevada did not meet any of the targets set for FFY 2009 for summary statement one (1). However, the targets for summary statement two (2) were met in all three outcomes. It was anticipated that this year's data would be a more accurate reflection of the progress made by the infants and toddlers Nevada serves. The slippage demonstrated is reflective of what was expected for the measurement of child progress data. One of Nevada's improvement activities this year was to implement a revised version of Nevada's original COSF which is more user-friendly for staff. Local early intervention providers put a greater emphasis on training staff on utilizing the revised COSF and training staff in the area of age-appropriate development in order to appropriately compare Part C eligible children to typically developing peers, which has been an area of difficulty. With the implementation of the new form, staff are able to derive at more accurate ratings when measuring child progress, thus improving the quality of the data. Nevada is continuing to implement activities which put a greater emphasis on quality assurance for system improvements at the local program level. This is in an effort to identify any areas of concern when there is suspect data to ensure internal validity and reliability. For this reason, Nevada is re-establishing baseline and setting new targets through FFY 2012, utilizing FFY 2009 data.

Nevada is continuing to strive for a higher percentage of data for measuring infants and toddlers progress after receiving early intervention services. Based on the decisions made last fiscal year to effectively

improve Nevada's data collection system related to this indicator, a number of protocols were created. The protocols were developed to ensure all children who received services for six months or longer are having an entry and exit COSF completed. Although Nevada does not have 100% representation of all infants and toddlers in services for six (6) months or longer~~Despite the efforts to increase the representativeness of children in services for six months or longer~~, the number of children with progress data has increased from year to year~~is not reflective of the infants and toddlers served~~.

Now that the revised COSF has been implemented and staff are receiving ongoing training relative to ~~on~~ typical development, the focus of the early intervention programs will be to ensure that the protocols are implemented. Protocols have been developed to improve the state's efforts with increasing the representativeness of progress data to ~~This will~~ ensure that all children who have received services for six (6) months or longer are having an entry and exit COSF completed.

#### State Performance Plan Activity Update:

Activity 1: To improve the quality and accuracy of data, Nevada's Advisory Child Outcome Task Force reviews random samples of completed COSF forms to identify possible errors in the data submitted, as well as to identify reoccurring trends which leads to insufficient information being provided to support ratings. **This activity is ongoing.**

- *Nevada's Advisory Child Outcome Task Force continues to meet on a quarterly basis to review decisions made to date and make modifications as needed. During this time, the group also does quality assurance spot checks on random samples of completed COSF's submitted by each region. This activity also ensures that if there are trends re-occurring, staff are trained appropriately.*

Activity 2: To assist programs with ensuring children entering early intervention services have data entered at both entry and exit, crystal reports have been created. This information is sent to the early intervention programs on a monthly basis to assist them with keeping track of required entries and exits. **This activity is ongoing.**

*The following reports are being generated:*

- *Children entering services who will have a program length of six (6) months or longer,*
- *Third (3) birthdays of children who have received services for six (6) months or longer, and*
- *Exit reports for children who exited the program and have received services for six (6) months or longer.*

Activity 3: A protocol was developed to ensure that for children who leave early intervention services unexpectedly, the most current assessment information are utilized for determining outcome status regardless of when the child exits. **This activity is ongoing.**

- *Implementing this protocol and the use of the HAWAII allows early intervention providers to track progress data on a continuous basis and on all children even if they exit prior to their third birthday.*

Activity 4: Local early intervention programs have established an internal system for cross checking COSF forms, to ensure internal validity and reliability of the data. **This activity is ongoing.**

- *Periodically service providers will have quality assurance reviews by their supervisors during child assessment to evaluate the appropriateness and accuracy of scoring on the curriculum based assessment.*

Activity 5: Early intervention program staff who are familiar with the HAWAII continue to train all new staff on the administration of the HAWAII. **This activity is ongoing.**

- *All new staff that enters the early intervention system are properly trained on the administration and calculation of the assessment tool for the purposes of eligibility, documentation of child's strengths and needs, and progress towards achieving child outcomes.*
- *If a child has received six (6) months of intervention and the program loses contact with the family, the IFSP team will complete an exit COSF. The rating is based on the child's*

- *Chronological age, utilizing the most current evaluation/assessment information, progress notes, observations, etc. to determine an appropriate rating.*

Activity 7: The HAWAII curriculum-based assessment was selected. Each region has begun utilizing the HAWAII as part of the evaluation and assessment process. This curriculum based assessment is also being utilized for the purpose of program planning and documentation of child's strengths and needs, and progress toward achieving child outcomes, 2008-2012.

Activity 8: To ensure that an accurate level of progress data is being reported, a policy was developed that if a child has received six months of intervention and the program loses contact with the family, the IFSP team will complete an exit COSF. The rating will be based on the child's chronological age, utilizing the most current evaluation/assessment information, progress notes, observations, etc. to determine an appropriate rating. **This activity was completed FFY 2009.**

Activity 9: To eliminate a step in the process of submitting COSFs, programs are no longer required to provide copies of exit COSFs to the school district, unless a request is received. The progress data is not being utilized as initially intended by the LEAs. **This activity was completed FFY 2009.**

Activity 10: To ensure that an accurate number of exit COSFs are received to measure child progress, the timeline for completing exit COSFs was extended from 30 days prior to the child's third birthday and/or exit from the program to within 14 days following the child's third birthday and/or exit from the program. **This activity was completed FFY 2009.**

Activity 11: To assist staff with providing more accurate and complete data, the COSF has been revised. The form is more user-friendly and allows staff to utilize their time more efficiently. **This activity was completed FFY 2009.**

- *Nevada revised the original form that was being used in December 2009. The decision tree on the form has assisted staff with determining a more accurate rating based on the child's functional skills.*

Activity 13: Training in the area of typical development is being implemented at the local program level to ensure quality child outcome ratings. **This activity is ongoing.**

- *Local early intervention providers have implemented ongoing training with staff in the area of age appropriate development and measuring Part C eligible children against typically developing peers.*

### **Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010**

All ongoing activities are continuing through FFY 2012.

#### **Elimination of Activities**

The following activity is being eliminated as it is a duplication of another activity that has previously been implemented:

Activity 6: Nevada's ECO Advisory Task Force provides quality assurance spot checks from random samples of the COSFs submitted by each region to identify areas of concern, or reoccurring trends, 2007 – 2010.

Activity 12: A greater emphasis is being placed at the local program level to ensure internal validity and reliability of the data.

#### **Justification for Revised Targets**

Nevada is choosing to re-establish baseline and set new targets through FFY 2012. Based on the interpretation of progress data from last year, Nevada stakeholders believed that due to Nevada's narrow

# APR Template – Part C (4)

eligibility criteria, the data were not a representation of the infants and toddlers served. Nevada stakeholders believe data from this year are more reflective of what is expected for the measurement of child progress data based on the population Nevada serves. Nevada implemented improvement activities to reflect a more accurate representation of the children receiving early intervention services. A revised version of Nevada’s original COSF is being utilized, which has proven to assist staff with providing more accurate and complete data. Additional and ongoing training has also been implemented at the local program level. The focus is on typical development and the comparison of Part C eligible children to typically developing peers. Nevada’s baseline and targets are being re-established as follows:

<b>Baseline</b>	<p><b>Outcome A-</b></p> <ul style="list-style-type: none"> <li>• Summary Statement 1: <del>68.3%</del><b>67.8%</b></li> <li>• Summary Statement 2: <del>40.2%</del><b>39.8%</b></li> </ul> <p><b>Outcome B-</b></p> <ul style="list-style-type: none"> <li>• Summary Statement 1: <del>69.7%</del><b>69.1%</b></li> <li>• Summary Statement 2: <del>37.1%</del><b>36.9%</b></li> </ul> <p><b>Outcome C-</b></p> <ul style="list-style-type: none"> <li>• Summary Statement 1: <del>71.1%</del><b>71.5%</b></li> <li>• Summary Statement 2: <del>41%</del><b>39.8%</b></li> </ul>
<b>2010 (2010-2011)</b>	<p><b>Outcome A-</b></p> <ul style="list-style-type: none"> <li>• Summary Statement 1: <del>68.4%</del><b>67.9%</b></li> <li>• Summary Statement 2: <del>40.3%</del><b>39.9%</b></li> </ul> <p><b>Outcome B-</b></p> <ul style="list-style-type: none"> <li>• Summary Statement 1: <del>69.8%</del><b>69.2%</b></li> <li>• Summary Statement 2: <del>37.2%</del><b>37%</b></li> </ul> <p><b>Outcome C-</b></p> <ul style="list-style-type: none"> <li>• Summary Statement 1: <del>71.2%</del><b>71.6%</b></li> <li>• Summary Statement 2: <del>41.1%</del><b>39.9%</b></li> </ul>
<b>2011 (2011-2012)</b>	<p><b>Outcome A-</b></p> <ul style="list-style-type: none"> <li>• Summary Statement 1: <del>68.5%</del><b>68%</b></li> <li>• Summary Statement 2: <del>40.4%</del><b>40%</b></li> </ul> <p><b>Outcome B-</b></p> <ul style="list-style-type: none"> <li>• Summary Statement 1: <del>69.9%</del><b>69.3%</b></li> <li>• Summary Statement 2: <del>37.3%</del><b>37.1%</b></li> </ul> <p><b>Outcome C-</b></p> <ul style="list-style-type: none"> <li>• Summary Statement 1: <del>71.3%</del><b>71.7%</b></li> <li>• Summary Statement 2: <del>41.2%</del><b>40%</b></li> </ul>
<b>2012 (2012-2013)</b>	<p><b>Outcome A-</b></p> <ul style="list-style-type: none"> <li>• Summary Statement 1: <del>68.6%</del><b>68.1%</b></li> <li>• Summary Statement 2: <del>40.5%</del><b>40.1%</b></li> </ul> <p><b>Outcome B-</b></p> <ul style="list-style-type: none"> <li>• Summary Statement 1: <del>70%</del><b>69.4%</b></li> <li>• Summary Statement 2: <del>37.4%</del><b>37.2%</b></li> </ul> <p><b>Outcome C-</b></p> <ul style="list-style-type: none"> <li>• Summary Statement 1: <del>71.4%</del><b>71.8%</b></li> <li>• Summary Statement 2: <del>41.3%</del><b>40.1%</b></li> </ul>

Part C State Annual Performance Report (APR) for FFY 2009

Overview of the Annual Performance Report Development:  
See Page 1.

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

**Indicator 4:** Percent of families participating in Part C who report that early intervention services have helped the family:

- A. Know their rights;
- B. Effectively communicate their children's needs; and
- C. Help their children develop and learn.

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

**Measurement:**

- A. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family know their rights) divided by the (# of respondent families participating in Part C)] times 100.
- B. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs) divided by the (# of respondent families participating in Part C)] times 100.
- C. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn) divided by the (# of respondent families participating in Part C)] times 100.

FFY	Measurable and Rigorous Target
2009	A. Know their rights – 93% Target; B. Effectively communicate their children's needs -- 92% Target C. Help their children develop and learn-- 89% Target.

**Actual Target Data for FFY 2009:**

**A. Know Their Rights**

Statewide: **203** Families responded to this question on the family survey reporting early intervention services had helped their family know their rights. **196** responses out of **203** were Strongly Agree or Agree for a percentage, 203/196 = **97%**.

Nevada's performance in FFY 2009 of **96.5%** exceeded the target of 93%.

**B. Effectively Communicate Their Children's Needs**

Statewide: **203** Families responded to this question on the family survey reporting early intervention services had helped the family effectively communicate their children's needs. **190** responses out of **203** were Strongly Agree or Agree, 203/190 = 94%

Nevada's performance in FFY 2009 of **93.5%** exceeded the state target of 92%.

**C. Help Their Children Develop and Learn**

Statewide: **203** Families responded to this question on the family survey reporting early intervention services had helped their children develop and learn. **195** responses out of **203** were Strongly Agree or Agree, 203/195 = 96%.

Nevada’s performance in FFY 2009 of **96%** exceeded the state target for this indicator of 89%.

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2009:**

In FFY 2009, there were no changes made to the family survey. This year, 1,167 surveys were mailed in October 2010 to Nevada families whose children received early intervention services within all three (3) regions of the state. Every early intervention provider had surveys sent to their enrolled families. The survey was sent to families whose children had an active Individual Family Service Plan (IFSP) and had been receiving services for at least six (6) months. There were 60 surveys returned as undeliverable, which is comparable to last year. Some families have moved with no forwarding address, or the family’s contact information is not current in the data system.

The Part C Office has been moved to a newly created Division within the Department of Health and Human Services during this reporting period, The Office of Disability Services and the Aging Division were combined to create the Aging and Disability Services Division. As a result of this move, standard business processes had to be refined to meet new Division requirements. The subgranting process had changed and the learning curve of the new process caused a delay in granting funds to the University of Nevada, Reno (UNR) for the dissemination of the family survey. Due to the delay in the subgrant, the survey was mailed in the fall versus the spring. This created a tighter timeline for data collection for the Annual Performance Report (APR) deadline of February 1, 2011. As a result of this delay, Nevada was unable to do a second mailing of the survey to try and increase the number of surveys returned. The survey response consequently was down from the previous year. The survey return rate was 17.3% as compared with 23.1% from the previous year.

The subgrant developed with UNR was a two (2) year grant, and will assist with expediting the survey for the next reporting period. The survey will be disseminated in the spring to get back on schedule and it is anticipated there will be time to implement strategies to ensure as high a return rate as possible given a mailed survey format.

**Table 2.A. Comparison of FFY08 Performance to State Target**

<b>Statewide</b>	<b>APR FFY 2008 Performance</b>	<b>SPP FFY 2009 Target</b>	<b>APR FFY 2009 Performance</b>
A. Know Their Rights	93%	93%	97%
B. Effectively Communicate Their Children Needs	94%	92%	94%
C. Help Their Children Develop and Learn	95%	89%	96%

Nevada exceeded the target for all three (3) of the indicator questions, and additionally improved performance on two (2) of the three (3) responses of families from the previous year. The overall response from families within the 90% percentile indicates families have a high confidence level in their early intervention services. Programs review family surveys annually to review their performance and comments from the parents. As a result programs may discuss issues with direct service personnel to ensure parent’s concerns are being addressed. It is hard to make a direct correlation of program activities to improvement as the survey response rate did not compare with FFY 2008. It will be easier to draw conclusions from next year’s survey results.

The complete survey report will be posted on Nevada’s website in February 2011. The survey results were disseminated to the Nevada Interagency Coordinating Council (ICC), regional programs, State Health Division Administration, Aging and Disability Services Division and the Department of Health and Human Services.

The ethnicity breakdown of the children for the families responding to the FFY 2009 survey is as follows:

**Table 2.B. Race/Ethnicity Breakdown of Surveys Sent (n – 1,167)**

Statewide	White	Hispanic or Latino)	American Indian or Alaska Native	Black or African American	Asian or Pacific Islander	Two or More Races
<b>Population Receiving Survey</b>	567/1167 (48.5%)	403/1167 (34.5%)	6/1167 (.51%)	104/1167 (8.9%)	77/1167 (6.6%)	10/1167 (.85%)
<b>Population Responded to Survey (n = 203)</b>	115/203 (56.6%)	57/203 (28%)	1/203 (.4%)	11/203 (5.4%)	16/203 (7.8%)	3/203 (1.5%)
<b>Percent returned within Race Ethnicity Group</b>	115/567 (20%)	57/403 (14%)	1/6 (16.6%)	11/104 (10.5%)	16/77 (20.7%)	3/10 (30%)

The rates of return within race and ethnicity groups varied this year and were slightly lower than last year due to the overall decrease in the survey rate of return. In analyzing the data, the lowest level of return was within the Black or African American rate category. This has traditionally been a low response category. The Part C Office will ask the Child Find Committee to review this data and to assist regions with strategies for increasing involvement from this population for next year’s survey.

Surveys were sent in both English and Spanish to all families. The second largest ethnic group within Nevada is the Hispanic or Latino population. There were 403 families of the total survey population identified as Hispanic or Latino which is 34.5% of the survey population. The return rate for this group was 28% of the total survey response which was only 2% lower than the previous year. The survey was representative of all geographic regions and responses did come from all race and ethnic groups.

**Table 2.C. Survey Return by Region**

Surveys Returned Total	Southern Region	Northwestern Region	Northeastern Region
<b>203</b>	<b>139/203 = 68%</b>	<b>57/203 = 28%</b>	<b>7/203 = 21%</b>

**State Performance Plan Activity Update**

Activity 1: Analyze the data from the survey to ensure it is representative of the state population including race/ethnicity, geographic region, and age population. **This activity is ongoing.**

- *The survey has been developed so English and Spanish are on every survey mailed. At this time, it has not resulted in a higher return rate, but does give families the option of responding to the survey in the language they feel most comfortable with.*
- *Data is analyzed to ensure representation from each county in the state, each early intervention program, and race/ethnicity groups.*

Activity 2: The results of the family survey were presented to the ICC for **review and analysis for program improvement**. The survey results were also reviewed with program administrators and supervisors. Early intervention programs are encouraged to review parent comments to determine if there are areas for program improvement. **This activity is ongoing.**

- *The family survey was presented to the ICC on January 20, 2011. The ICC had no suggestions for any changes to the family survey at this time. The survey has been changed*

*several times and UNR has suggested retaining the current survey for purposes of comparison from year to year. There was discussion on whether the survey should have an undecided category as it generally counts negatively toward program percentages. UNR will investigate what the current literature is suggesting related to Likert scales and four (4) response categories versus five (5).*

- *There was a suggestion by program staff that a follow-up phone call to families reminding them of the survey could contribute to higher return rates. UNR will explore the feasibility of this suggestion.*

Activity 3: The UNR Center for Excellence in Disabilities continues to **develop, disseminate, receive and analyze the data**, from the annual family survey and submit final report to Part C. **This activity is ongoing.**

- *UNR through reviewing literature on surveys suggested they would look at sending post cards to families before the survey was sent to advise them to watch for the survey, and then after the survey was mailed to remind them to complete the survey. This would be a new approach in an attempt to increase family response.*

Activity 4: Develop strategies for outreach to underrepresented populations from survey analysis at the statewide quarterly management meeting. Part C, Regional Programs, 2006-2012, **This activity is ongoing.**

- *The Part C office will ask the Child Find Committee to add this to their agenda for next year.*

Activity 5: The survey will be distributed using two delivery methods, mail and internet survey. Families will be given a choice of how to respond. Each survey will be given an identifying number to ensure families can respond one (1) time per child, 2009-2012. **This activity is ongoing.**

- *For this survey, an online option was given to families in addition to the mail in option. This was the second time this option was offered and only two (2) families responded online. The Part C Office will meet with UNR to determine if there is a more effective way to reach out to families regarding the online option.*

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010**

All ongoing activities are continuing through FFY 2012.

Part C State Annual Performance Report (APR) for FFY 2009

Overview of the Annual Performance Report Development:  
See Page 1.

Monitoring Priority: Effective General Supervision Part C / Child Find

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

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

Measurement:

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

FFY	Measurable and Rigorous Target
2009	The target established for this reporting period is .75%

Actual Target Data for FFY 2009:

The following data are generated through the Tracking Resources and Children (TRAC) child data collection system as collected for 618 data on **December 1, 2009**.

Statewide: On December 1, 2009, a total of 253 infants statewide, ages birth to one (1) year, had an Individualized Family Service Plan (IFSP). This number divided by the U.S. Office of Special Education Programs (OSEP) projection of 40,286 for the 2009 State’s total population of infants, birth to age one (1), indicates .63% of the infant population had an IFSP, (253/40,286 = .63%).

Nevada did not meet either the established State Performance Plan (SPP) target of .75% for the birth-to-1 year population served in FFY2009, the national average of 1.03% or the national target of 1%.

Table 5.A. OSEP General Population Estimates for Nevada, Infants Ages Birth to One (1) Year

Year	Population Estimate	Change in Population (+/-)	Percent of Change (+/-)
2006	37,901	+3,715	+10.87%
2007	40,917	+3,016	+7.96%
2008	40,346	-571	-1.40%
<b>2009</b>	<b>40,286</b>	<b>- 60</b>	<b>- .15%</b>

Table 5.A. reflects OSEP’s projections for the State’s overall population of infants ages birth to one (1) year from 2006 through 2009.

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

Year	# Infants with IFSP	Change in # w/IFSP	% Population Serve	Percent of Change (+/-)
2006	255	+93	.67%	
2007	372	+ 117	.91%	+ 45.88%
2008	263	-109	.65%	- 29.30%
<b>2009</b>	<b>253</b>	<b>-10</b>	<b>.63%</b>	<b>- 3.80%</b>

Table 5.B. reflects the State's status based on the number of infants reported as having an IFSP on December 1 of each year from 2006 through 2009. This table shows there was a slight reduction in the number of infants, ages birth to one (1) year, reported in the December 1, 2009 Child Count compared to the December 1, 2008 count.

#### **Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2009**

As reflected in Table 5A and 5B above, there was reduction in both the projected number of infants in the general population and the number of infants identified as having an IFSP on December 1 from 2008 to 2009. The percent of reduction was higher in the number of infants with an IFSP (3.80%) than the change for the general population (.15%).

The Part C Office utilized population estimates for the overall population of infants under the age of one (1) year issued by the State Demographer's Office to identify the percent of that population residing in each region of the State. That percentage was applied to the population estimate issued by OSEP to project a percent served for each region of the state. The OSEP projections are a statewide number and are not broken down by county or region. This analysis shows the region with slippage in this indicator is the Southern region. Based on the calculations noted above, the number of children and percent of population served are as follows:

- Northeast Region:
  - Child Count: The Northeast region reported seven (7) children with an active IFSP on December 1, 2009; an increase of one (1) child over the number reported on December 1, 2008.
  - Percent of population served: Nevada State Demographer projections for 2009 indicate 3.02% of the State's birth-to-1 population resides in the Northeast region. Utilizing OSEP population projections, the general population for the Northeast region would be 1,217 and the percent of population served would be .58%. This is a slight improvement over the percent of population reported in FFY2008.
- Northwest Region:
  - Child Count: The Northwest region reported 81 infants with an active IFSP on December 1, 2009; an increase of 12 children over the number reported on December 1, 2008.
  - Percent of population served: Nevada State Demographer projections for 2009 indicate 21.08% of the State's birth-to-1 population resides in the Northwest region. Utilizing OSEP population projections, the general population for the Northwest region would be 8,491 and the percent of population served would be .95%. This is a slight improvement over the percent of population reported in FFY2008.
- Southern Region:
  - Child Count: The Southern region reported 165 infants with an active IFSP on December 1, 2009; a decrease of 23 infants over the number reported on December 1, 2008.
  - Percent of population served: Nevada State Demographer projections for 2009 indicate 75.9% of the State's birth-to-1 population resides in the Southern region. Utilizing OSEP population projections, the general population for the Southern region would be 30,579 and the percent of population served would be .54%. This represents slippage from the percent of population served in FFY2008.

The ICC Child Find Subcommittee reviewed data from various sources related to trends in population changes in the general population of infants under the age of one (1) year in the State. This data was reviewed to explore the possibility of a correlation between reduction in the general population and the number of eligible infants. Data reviewed included:

- The Office of Health Statistics and Surveillance for Nevada shows that birth counts in the state fell by 2,398 from 2007 to 2008 (from 41,175 to 38,777). Counts for 2009 are not available at this time.

- Anecdotal reports from local physicians, pediatricians and health clinics suggest, due to the State's economic climate, fewer families are choosing to have children and those with children are visiting doctor's offices and local health clinics less frequently than in the past.
- OSEP Table C-13 showed a decrease in the number of infants in the general population for 2008 to 2009. As shown in Table 5-A, this trend in reduction of the projected population of infants under the age of 1 year has been consistent for the past two years.

While there are reported decreases in the general population, analysis of referral data for infants under the age of one (1) year shows an increase in the total number of referrals in FFY2009 over FFY2008. The total number of infants under the age of one (1) year referred in FFY2009 was 1,724 and represented 36% of the total referrals received in that timeframe. In FFY2008 the number of referrals of infants under the age of one (1) year was 1,410; 32% of the total referrals for that year.

Comparison of the population trend data and the referral data for FFY 2009 does not appear to suggest a direct relationship in the slippage in the number of eligible infants reported for FFY 2009. The increase in the number of referrals does, however, suggest public awareness and child find efforts were effective in increasing the number of referrals. Data shows the greatest increase in referrals was in the third and fourth quarters of the fiscal year which could not have impacted the December 1, 2009 child count. Preliminary analysis of the December 1, 2010 counts indicates a significant rebound (by 119 infants) in this indicator for the FFY 2010 reporting period. This indicates that the increased attention to this indicator had a positive impact in the last half of the fiscal year.

To date, no specific cause for slippage in this indicator in the FFY2009 reporting period has been identified. The Part C Office with the assistance of the ICC Child Find Subcommittee will continue to explore factors potentially impacting the State's performance in identifying infants in need of early intervention services. Areas targeted for further exploration include:

- The appropriateness of referrals;
- The eligibility determination process;
- The impact of expanding outreach activities as a result of adding new service providers; and
- The impact of the emphasis on correction of non-compliance in timely initiation of services, especially in the past year.

Specific attention will continue to be paid to this indicator, especially in the Southern region, during the FFY 2010 monitoring process. A target review of the status of relationships with each individual referral source has also been initiated.

### State Performance Plan Activity Update

Activity 1: The State will continue to monitor and expand provider and personnel capacity to ensure it is sufficient to meet the needs of potentially eligible and eligible children and families in the State. **This activity is ongoing but is amended (See section on revisions).**

- *The State Legislature, in the 2009 session, appropriated \$5,170,785 of new state general fund dollars for early intervention services for the next biennium (FFY 2009-2010). With the addition of the American Recovery and Reinvestment Act (ARRA) funds, \$9,071,785 in new funding was allocated for early intervention services. Since the emphasis for these funds was to expand service delivery through agreements with community providers, this will also help to expand the awareness of the availability of early intervention services. Provider agreements were established with four new provider agencies during this reporting period. Each new provider agency enrolled has assigned a representative to the ICC Child Find Committee and will distribute public awareness materials to their contacts and activities. Since the greatest increase in performance clearly occurred in the last half of the fiscal year, it is likely that the increase in resources for outreach related to this activity contributed to the improvement.*

Activity 2: Local early intervention (EI) programs maintain ongoing Child Find and Outreach activities to educate primary referral sources about the availability of early intervention consistent with the State Child Find Plan. **This activity is ongoing.**

- Early intervention programs specifically targeted communications with hospitals and pediatricians in this reporting period to identify infants under the age of one year in need of early intervention services.
- All EI programs are required to submit quarterly reports on public awareness/child find related activities conducted at the local level. The reporting format requires early intervention programs to differentiate activities specifically targeting identification of infants under the age of one year. This is a standard data collection process and is linked to the program's Self-Assessment/Monitoring process. Quarterly child find reports are compiled and presented to the ICC Child Find Subcommittee for **review and recommendations**. During this reporting period, **representatives** from four new EI provider agencies were added to the ICC Child Find Committee.
- Standard public awareness materials are provided to service providers by the Part C Office for distribution at local events. **Programs were contacted** prior to the end of the state fiscal year to generate an inventory list of materials available and/or needed for the upcoming year. One new item distributed during this reporting period included "tattoos" of the system's Teddy Bear logo. These are used at health fairs and other events to assist with name recognition in the community. The process of updating the system's brochures and reviving the production of a developmental milestones card used previously were initiated during this reporting period. Printing and distribution will begin in FFY 2010.
- The ICC Child Find Subcommittee focused specifically on the declining numbers in the birth-to-1 population in this reporting period. Data on general population trends, referrals and eligibility were reviewed but no one definitive reason for the decline has been established to date.

Activity 3: Collaboration with hospitals and neonatal intensive care units to ensure early referrals for infants potentially eligible for EI services. **This activity is ongoing.**

- Hospitals and pediatricians have been identified as generally more relevant to referrals of infants under the age of one year. They are included in data collection as a primary referral source. Instances of activities related to outreach to hospitals were reported in quarterly child find reports for this reporting period by the majority of early intervention programs. While there are no neonatal units located in the very rural Eastern region of the State, many families in that area seek health care through hospitals in Salt Lake City, Utah. The early intervention program in that region has established relationships with hospitals in Salt Lake City and receives referrals for children that live in the Northeast region.

Activity 4: Develop and issue public service announcements to inform the general public about EI Services. **This activity is ongoing.**

- The Part C Office continues to pursue the process for developing **Public Service Announcements** regarding red flags for developmental delays to ensure the general public is aware of early intervention services. Examples from other states and programs were reviewed and the activity was explored with the Public Relations Office for the Department. Production has not yet occurred but will continue to be pursued. The State Health Division continues to maintain information on the availability of early intervention services and contact information on their website.

#### **Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010**

##### **Activity 1 in the SPP 2010 stated:**

"Nevada Legislative session for State FY 2006-2007 increased funds for additional direct service personnel, each regional site will recruit and hire additional staff to support increasing the provision of services to children under the age of one in order to meet targets, 2005-2006, Regional Program Managers."

**This activity is being revised as follows:**

Activity 1: The State will continue to monitor and expand provider and personnel capacity to ensure it is sufficient to meet the needs of potentially eligible and eligible children and families in the State. 2009-2012 Nevada State Health Division and IDEA Part C Office

*Justification for revision: The goal of the State is to expand early intervention services through community based service providers. The Legislature has specifically allocated funds for expansion through community providers and has not provided any increase in State funds to increase positions in the State operated programs.*

**Activities 8 and 9 in the SPP 2010 stated:**

*“Activity 8: Explore the possibility of beginning the intake process within the hospital for children within the neonatal intensive care units, 2006, Regional Program Managers.*

*Activity 9; Maintain agreements with the regional hospitals regarding referral procedures for children within the neonatal intensive care units, 2006-2010, Regional Program Managers.”*

**These activities are being consolidated to read as follows:**

**Activity 3:** (Revised) Maintain collaboration with hospitals and neonatal intensive care units to ensure early referrals for infants potentially eligible for EI services. 2006-2012 Early Intervention Provider Agency Program Managers

*Justification for revision: The revision of these activities is intended to broaden the scope of the activities to not only include the specific actions previously stated but to also include other aspects of collaboration that may be appropriate under this activity.*

All ongoing activities are continuing through FFY 2012.

Part C State Annual Performance Report (APR) for FFY 2009

Overview of the Annual Performance Report Development:

See Page 1

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

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

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

Measurement:

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

FFY	Measurable and Rigorous Target
2009	The target established for this reporting period is <b>1.89%</b>

**Actual Target Data for FFY 2009:**

The following data are generated through the Tracking Resources and Children (TRAC) child data collection system as collected for 618 data on **December 1, 2009**.

Statewide: On December 1, 2009 a total of **1,892** infants and toddlers in Nevada, ages birth to three (3) years, had an active Individualized Family Service Plan (IFSP). This number divided by the U.S. Office of Special Education Programs (OSEP) estimate of 122,929 (Table C-13) for the general population of infants and toddlers, birth to age 3, in the state indicates that **1.54%** of the population was served ( $1892/122,929 = 1.54\%$ )

Based on the December 1, 2009 Child Count, the State did not meet either the established State Performance Plan (SPP) target of 1.89%, the national target of 2% or the national average of 2.67% of the birth to three (3) year old population. Nevada ranked 49<sup>th</sup> in 2009 for the percent of population served compared to the 50 states and the District of Columbia.

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for 2009:**

The State had a decrease in the number of eligible infants and toddlers, age birth to three (3) years, in this reporting period. The number of infants and toddlers reported to have an IFSP on December 1, 2008 was 2,052 compared to 1,892 reported on December 1, 2009. This is a decrease of 160 children over the number reported for December 1, 2008.

**Table 6.A. OSEP General Population Estimates, Infants and Toddlers Ages Birth to Three (3)**

Year	# General Population	+/- Change From Previous Year	% Change From Previous Year
2006	111,945	+8,028	+7.78%
2007	119,218	+7,273	+6.5%
2008	121,331	+2,113	+1.77%
<b>2009</b>	<b>122,929</b>	<b>+ 1,598</b>	<b>+1.32%</b>

Table 6.A. provides data on Nevada’s population growth for infants and toddlers, age birth to three (3) years, from FFY 2006 to FFY 2009 as indicated by general population estimates released annually by OSEP.

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

Year	# Infants with IFSP	+/- Number w/IFSP	% Population Served	+/- % of Change From Previous Year
2006	1,520	+103	1.36%	Maintained
2007	1,986	+ 466	1.67%	+30.6%
2008	2,052	+66	1.69%	+ 3.32%
<b>2009</b>	<b>1,892</b>	<b>-160</b>	<b>1.54%</b>	<b>- 8.46%</b>

Table 6.B. reflects the statewide trend in the number and percent of infants and toddlers, age birth to 3, with an IFSP on December 1<sup>st</sup> from 2006 thru 2009.

The number and percent of population of infants and toddlers, age birth to three (3), with an IFSP on December 1 increased between FFY 2006 and FFY 2008. In FFY 2009 the number fell by 160 representing a change of a negative 8.46% from FFY 2008.

Data were reviewed on a regional basis to evaluate performance for each geographic region of the State. Projections for the general population of infants and toddlers under the age of three (3) years, issued by the State Demographer’s office, were utilized to identify the percent of the total populating residing in each region. This percentage was then applied to the estimated total population issued by OSEP.

Analysis by region shows that:

- Southern Region: the total number of infants and toddlers, ages birth to three (3), reported with an IFSP on December 1, 2009 decreased by 144 (11.38%) from the count reported for December 1, 2008. Neither state nor national performance targets for percent served in the birth to three (3) category were achieved in the Southern region. Percent served was 1.36%.
- Northwest Region: the total number of infants and toddlers, ages birth to three (3), reported with an IFSP on December 1, 2009 decreased by 15 (2.64%) from the count reported for December 1, 2008. Both state and federal targets for performance for percent served in the birth to three (3) category were exceeded in the Northwest region. Percent served was 2.13%
- Northeast Region: the total number of infants and toddlers, ages birth to three (3), reported with an IFSP on December 1, 2009 decreased by one (1) (1.35%) from the count reported for December 1, 2008. The percent served in the Northeast region met the state target of 1.89% but did not meet national target (2%) for percent served in the birth to three (3) category. Percent served was 1.98%.

As reflected in Table 6.B., Nevada had slippage in the number of infants and toddlers, age birth to three (3), with an IFSP reported December 1, 2009. There was slippage in all regions of the State; however, the greatest percentage of slippage was in the Southern region. Preliminary data for December 1, 2010 suggests the State has made a significant rebound (increasing by 452 children) in the number of children to be reported for the FFY 2010 reporting period.

**Table 6.C. New Referrals Statewide, Ages Birth to Three (3)**

	FFY 2007	FFY 2008	FFY 2009	Difference from '08 to '09	% Change From '08 – '09
Total New Referrals	4,172	4,147	4,734	+ 587	+14.15%

Table 6.C. reflects the trend in total new referrals from FFY 2007 – FFY 2009. FFY 2009 performance is compared to FFY 2008 to evaluate the number and percent of change.

Data from primary referral sources are reviewed on a quarterly basis and at the close of the state fiscal year. As in previous years, the trend in the top three referral sources continued in FFY 2009. Data for these sources are reflected in the table below.

**Table 6.D. Top Primary Referral Sources for FFY 2009**

Referral Sources	# of Referrals	% of Total Referrals	Change From FFY 2008	% of Change
Medical Community (Hospitals, Physicians and Pediatricians, Public and Community Health Facilities and Other Health Care Providers)	2386	50.40%	+510	+ 27.19%
Parents/Other Friends/Relatives	1132	23.91%	- 97	- 7.89%
Social Service Agencies	1021	21.57%	357	+ 53.77%

The number and percent of total referrals to early intervention increased substantially – by 587 children - in FFY 2009. This suggests public awareness and child find efforts were effective. Data shows the greatest increase in referrals was in the third and fourth quarters of the fiscal year which could not have impacted the December 1, 2009 child count.

While it is not a child-per-child comparison, exit data shows a total of 2,279 children referred to early intervention exited without an IFSP in FFY 2009. Comparison of the data from FFY 2008 to FFY 2009 indicates that seven (7) more children were exited without an IFSP because they moved, 41 more exited due to loss of contact with the family, 41 more families chose not to access services and 164 more CAPTA referrals exited without and IFSP.

Members of the ICC Child Find Subcommittee suggested other possible areas for review in further exploring the reasons behind the decline in number of eligible children in the December 1 count could include:

- The appropriateness of referrals;
- The eligibility determination process; and
- The impact of the emphasis on correction of non-compliance in timely initiation of services, especially in the past year.

Again, it is evident the status of the economy has impacted the rate of population growth in the State. The greater Las Vegas area has experienced one of the highest foreclosure rates in the nation. The Nevada State Demographer reported the State’s population has fallen by approximately 70,000 residents from 2009 to 2010 with about 50,000 of those being from Clark County in the Southern region. The State Demographer’s short term projections also indicate the downward trend will continue with a net loss of almost 54,000 people by 2014. It is yet to be determined how this will impact the number of eligible children and percent of population served in the future.

The performance status in this indicator will continue to be explored on a regional basis during the 2011 monitoring process.

**State Performance Plan Activity Update**

A full statement of the activities calculated to result in improvement for this indicator is included in the State Performance Plan which is available on the State's website at <http://health.nv.gov/beis.htm>. Activities specifically implemented for this reporting period are indicated below.

Activity 1: State Legislature to allocate funds for positions to meet the growing need due to population growth. ***This activity is ongoing but is being amended (see section on revisions).***

- *The State continued to experience extreme budget crisis during the FFY 2009 reporting period. The State Legislature, in the SFY 2009 session, appropriated \$5,170,785 of new state general fund dollars for early intervention services for the next biennium (FFY 2009-2010). With the addition of the American Recovery and Reinvestment Act (ARRA) funds, \$9,071,785 in new funding was allocated for early intervention services. The State Health Division continued to pursue public/private partnerships to expand early intervention provider resources through the additional funds allocated. However, some vacant personnel positions in the State operated programs were either frozen or eliminated.*

Activity 2: Community education opportunities will be provided to referral sources regarding early intervention (EI) services to promote appropriate referrals. ***This activity is ongoing.***

- *Analysis of the Race/Ethnicity Data for December 1, 2009 indicated a decline in the number of infants and toddlers from the Native American Community. Therefore, during this reporting period, a representative from the Native American community was added to the ICC membership. In addition, the Part C Office has participated in the Annual Convention of the Inter-Tribal Council of Nevada, the Annual American Indian/Alaska Native Education Summit hosted by the State Department of Education, and the American Indian Disability Talking Circle. Information was also presented at the Annual Roundtable of Tribal Administrators that are recipients of Child Care Development Funds and at the Nevada Indian Commission Education Advisory Committee for Native American and Alaska Natives.*
- *All EI programs engage in a variety of public awareness and child find activities at the local level and are required to submit a quarterly report to the Part C Office on these activities. These activities support the overall State Child Find Plan and include activities designed to educate the public and primary referral sources on the availability of early intervention services. A variety of activities were reported to target identification of children in the birth to three (3) population in need of early intervention services in this reporting period. Statewide examples include:*
  - *Participation in community activities with local organizations to distribute public awareness materials and information about early intervention services such as events hosted by the Rotary Club, Knights of Columbus, County/Community Social Service Providers groups,*
  - *Posting public awareness information in local businesses (ex. Wal-Mart) and participating in events hosted by local businesses;*
  - *Participation in local activities to promote awareness of specific disability areas such as March of Dimes Walks, Autism Walk, Grant a Gift Autism Foundation 5K Walk, Center for Independent Living Disability Awareness Fair, information sessions on Fetal Alcohol Syndrome (FAS), Foundation Fighting Blindness, Siblings-Parents-Respite-Support and the Dual Sensory Impairment Conference;*
  - *Providing educational opportunities for various groups on early intervention and related issues including presentations to various University/College classes and local conferences (Great Basin College, University of Nevada Reno, Nevada Association for the Education of Young Children,*
  - *Targeted meetings and/or trainings with personnel in local hospitals, NICUs (including participating in grand rounds and NICU support teams) and local pediatrician offices,*
  - *Collaboration with other agencies/organizations for screening events (ex. child care programs, local schools);*
  - *Coordinating activities with other state/national events designated for recognition of child related issues (Ex. Week of the Young Child); and*

- *Collaboration with various community organizations to allow children and families in early intervention services to participate in community playgroups including:*
  - *Family-to-Family,*
  - *Early Head Start,*
  - *Local Libraries,*
  - *Child Care Programs,*
  - *Community activity organizations (gymnastics, swimming groups),*
  - *Early Learning Centers in local High Schools,*
  - *City and County Recreation Centers,*
  - *Family Resource Centers*
  - *Salvation Army, and*
  - *Military Base programs*

Activity 3: Disseminate Child Find Materials to community referral sources to assist them in making referrals to early intervention services. ***This activity is ongoing.***

- *Informational documents and other child find related materials are developed and purchased through the Part C Office and made available to local programs for distribution. Both the Part C Office and local programs participate in distribution of these materials. Examples of materials include brochures, posters, temporary “tattoos” with the program logo, and pens. Programs are polled to determine what types of materials are needed and are most effective for their areas. Since these materials are provided with IDEA federal funding, the state budget crisis did not impact the availability of these resources.*

Activity 4: Develop Public Service Announcements (PSAs) regarding red flags for developmental delays to ensure public awareness of early intervention services. ***This activity is ongoing.***

- *The Part C Office continues to pursue the process for developing Public Service Announcements regarding red flags for developmental delays to ensure the general public is aware of early intervention services. Examples from other states and programs were reviewed and the activity was explored with the Public Relations Office for the Department. Production has not yet occurred but will continue to be pursued. The State Health Division continues to maintain information on the availability of early intervention services and contact information on their website.*

Activity 5: Provide training for child care providers around red flags for developmental delays and the availability of early intervention services. ***This activity is ongoing.***

- *The Child Find Subcommittee reviewed new State Regulations for licensed child care providers. These regulations require developmental screening for all children enrolled and that the program have an educational plan to meet the needs of the children. Personnel in local early intervention programs have conducted a variety of trainings for childcare personnel regarding early intervention services, screening, and referral procedures. This has been provided as direct training and technical assistance to child care program personnel and also as part of the process of implementing the IFSPs of individual children in the child care setting. The percent of referrals from child care providers increased slightly during this reporting period. The TRAC Data system does not delineate where the parents who self-refer learned about EI services. Clarification was issued to EI programs in this reporting period to ask the parent how they learned about EI services and code the referral source based on their response. A reduction in the number of referrals attributed to parents and an increase in numbers for other referral sources suggest that this guidance is being implemented. Traditionally, child care programs report that they have given the family information about the EI system and suggested that the parent make the initial contact.*

Activity 6: Memorandums of Understanding (MOU) with local school districts will include partnering for local child find activities including screening. ***This activity is ongoing.***

- *The Lead Agency maintains, and is in process of updating, a Cooperative Agreement with the State Education Agency. This agreement includes a provision that both agencies will “encourage collaborative screening efforts including the development and use of jointly recognized screening instruments, joint participation in screening activities, and other processes agreed upon at the*

*local level.” Regional program personnel, through quarterly Child Find reports, have documented collaboration with local school systems in joint child find activities during this reporting period.*

Activity 7: Collaborate with other community providers to offer screenings at their program locations or events. ***This activity is ongoing.***

- *Early intervention programs statewide have documented participation in numerous collaborative efforts with other community agencies to promote identification of infants and toddlers with disabilities. A list of examples follow, however, this is by no means an exhaustive list but provides some idea of the broad spectrum of collaboration across the state.*
  - *The Northeast region has a strong working relationship with Head Start and the Family Resource Centers as well as providing individual screenings.*
  - *The Northwest region has established a relationship with the University of Nevada, Reno for internship for students in the Early Childhood Special Education Program as well as strong relationships with the Neonatal Intensive Care Units (NICUs) at local hospitals. They also maintain relationships with child care providers and often provide screenings for children enrolled in child care programs.*
  - *The Southern region, through collaborative relationships, established numerous community play groups where eligible children are able to participate with typically developing peers. These playgroups are so popular there are waiting lists for typically developing children to participate. Programs in the Southern region have also established relationships with numerous medical providers and with the University of Nevada, Las Vegas to support the identification of infants and toddlers with disabilities.*
  - *All programs also report a working relationship with the personnel associated with the Division of Child Family Services (DCFS).*

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010**

**Activity 1 in SPP 2010 stated:**

*“Nevada Legislative session for State FY 2006-2007 increased funds for additional direct service personnel, each regional site will recruit and hire additional staff to support increasing the provision of services to children under the age of one in order to meet targets, 2005-2006, Regional Program Managers.”*

**This activity is being amended as follows:**

Activity 1: The State will continue to monitor and expand provider and personnel capacity to ensure it is sufficient to meet the needs of potentially eligible and eligible children and families in the State. ***This activity is ongoing.***

*Justification for revision: The goal of the State is to expand early intervention services through community based service providers. The Legislature has specifically allocated funds for expansion through community providers and has not provided any increase in State funds to increase positions in the State operated programs.*

All activities that are ongoing will be continued through FFY 2012.

Part C State Annual Performance Report (APR) for FFY 2009

Overview of the Annual Performance Report Development:

See Page 1

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

**Indicator 7:** Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C’s 45-day timeline.

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

**Measurement:**

Percent = [(# of infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting was conducted within Part C’s 45-day timeline) divided by the (# of infants and toddlers with IFSPs evaluated and assessed for whom an initial IFSP meeting was required to be conducted)] times 100.

Account for untimely evaluations, assessments, and initial IFSP meetings, including the reasons for delays.

FFY	Measurable and Rigorous Target
2009	100% of eligible infants and eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C’s 45-day timeline.

**Actual Target Data for FFY 2009**

The following data are provided using the Tracking Resources and Children (TRAC) child data collection system for the period of July 1, 2009 through March 31, 2010. All programs are on an annual self-assessment which involves reviewing data from TRAC and child record reviews. In order to have programs provide data and findings to be issued within the same reporting period, Part C is pulling three quarters of data for program monitoring. Data pulled from TRAC is on all children with an active IFSP during that three quarter time period and is reflective of the population of early intervention for the full fiscal year.

Statewide: **1,238** infants and toddlers were evaluated and found eligible for Part C services, which included evaluation, assessment and the development of the IFSP. Of those, **275** had documented exceptions that the 45-day timeline could not be met due to family circumstances and **382** did not meet the 45-day timeline due to program circumstances. There were **856** infants and toddlers who were evaluated, found eligible and an IFSP was developed within the 45-day timeline, this includes the **275** with documented family exceptions, which is **69%**.

The list of documented family circumstances for not meeting the 45-day timeline included the following:

- Family cancelled appointments
- Child was hospitalized or ill

- Parent could not schedule the appointment within 45 days
- Parent had a medical emergency or was ill
- Referral was made while child was still in the Neonatal Intensive Care Unit

**Table 7.A: 45-Day Timeline Exceptions**

Total N=1238	Compliant with the 45-Day Timeline	Total Compliant – Delay Due to Family Circumstances	Delay in IFSP Program Reasons
N	856/1238	275/856	382/1238
Percent	69%	32%	30.8%

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2009:**

**Progress and Slippage FFY 2009**

During the self-assessment process of FFY 2009, all programs were monitored. There was only one (1) program that had a finding in this indicator. The compliance percentage for this section is taken from the Tracking Resources and Children (TRAC) data system and is representative of all children for whom an initial IFSP was developed during the timeframe reviewed. Cumulative data for the first three quarters of SFY 2010 shows a total of sixty-seven (67) initial IFSPs were developed by the program. Sixty-five (65) or 97% were compliant with the 45-day requirement. Two (2) did not meet the timeline due to program circumstances. One (1) of these was a result of delay in transfer of the referral by another early intervention program. Individual child correction has been achieved for these children as they both have an IFSP in place, though late.

The following table shows there was increased slippage from FFY 2008 to FFY 2009.

**Table 7.B. Statewide Data on 45-day Timeline**

Number and Percent of IFSPs Completed within 45-Days	FFY 2004	FFY 2005	FFY 2006	FFY 2007	FFY 2008	FFY 2009
Statewide	318 25.0%	783 67.1%	1,596 92.5%	1,752 94.1%	1,559 91.3%	1238 69%

**\*FFY 2009 is representative of three (3) quarters of data which was the data selection point for program monitoring purposes and is representative of the full year’s enrollment in early intervention.**

**Ongoing Noncompliance from FFY 2008**

The ongoing noncompliance was attributable to two (2) programs, one north and one south. The northern program was at 99% performance and this was reflective of one child’s record. The child had an IFSP although late and the staff member is no longer employed by the agency. The program subsequently corrected to 100% on August 3, 2010. The southern region had on-going noncompliance for one (1) year in this indicator and was the primary reason for the statewide slippage. As a result, they were selected for a focused monitoring to determine the underlying causes of the slippage. Through meeting with the supervisor and intake staff at the program, it was determined parts of the established procedures were not being followed. Staff were unclear about scheduling MDT appointments and were not always scheduling within the specified timeframe. It was also noted staff were not correctly identifying if the delay was due to family circumstances.

The Nevada State Legislature increased funding for early intervention services during this fiscal year, but all increases were designated for community partner agencies and the State programs did not get an increase of funding or any additional positions. The increased funding was provided on a monthly incremental basis anticipating each program would need to hire additional staff and ramp up to serve more children. While the community partners had been funded to serve children, the state program was still doing all of the intake, evaluation/assessment, eligibility determination and initial IFSP on all children in that region without any additional staff, which contributed to the slippage. The funding increase began July 1, 2009 and was implemented monthly throughout the fiscal year. The new funding was designated for community provider programs, however the State program in the south was able to hire staff positions which had been frozen over the past year. At the same time the southern region experienced shortages within the disciplines of occupational and speech therapy which impacted their multidisciplinary process. The hiring freeze was lifted but it took six months to bring positions on board, and in addition, they had staff resignations simultaneously. The net gain of new staff often ended up replacing existing staff during portions of the year.

The program has now instituted new policies and procedures that are reasonably calculated to reach full compliance. One of the challenges in the southern region is the amount of turnover in the child population. Families are referred to the program but there is a tremendous amount of no shows, cancellations and trying to chase families to meet timelines. The program was able to establish new procedures for cancellations and established a cancellation list of families interested in being called for an earlier appointment. This has assisted the program with meeting the 45-day timeline.

**Subsequent Correction of Non-compliance FFY 2008:**

**Table 7.C: Identification and Correction of Non-compliance**

FFY	Number of Findings of Noncompliance Related to Indicator 7	Number of Findings for which Correction was Verified within One Year	Number of Findings for which Correction was Subsequently Verified (Date)	Number of Findings of Noncompliance Remaining
FFY 2008	5	3	2 (1 <sup>st</sup> and 2 <sup>nd</sup> Qtr FFY 2010)	0
FFY 2009	1	To be reported in the FFY 2010 APR		

The program in the northern region whose performance was at 99% demonstrated subsequent correction in the first quarter. The Part C Office verified this data and notified the program in August 2010 correction had been achieved. The program with ongoing non-compliance from FFY 2008 which caused the severe slippage in this indicator has subsequently corrected to 100% in FFY 2010. Through focused monitoring and the implementation of improvement activities, the program in the southern region demonstrated subsequent correction in the second quarter. This correction was verified by the Part C Office and the program was notified in January 2011. As a result of correction of noncompliance, the state is at 100%-compliance within the area of 45-day timeline.

Current data from the State’s data tracking system, which is run on a quarterly basis for this indicator, in conjunction with program monitoring through child record reviews was utilized to verify the correction of non-compliance and to ensure all eligible infants and toddlers were evaluated, assessed and had an IFSP within 45-days. In verifying corrections, Nevada ensured all early intervention programs were correctly implementing the 45-day timeline by reviewing updated data. All children, whose timeline was not met, have received initial evaluations, assessments and IFSP meetings, although late, unless the child was no longer within the jurisdiction of the State.

All referrals from October through December 2010 have been analyzed and the program is now performing at 100% on the 45-day timeline. At the beginning of FFY 2010, all of the community providers

began to receive new referrals and were responsible for the 45-day process of evaluation/assessment, eligibility and IFSP development. This has tremendously eased the burden from the State program which has contributed to their ability to have full correction on the 45-day timeline requirement.

### State Performance Plan Activity Update

Activity 1: Explore the use of centralized evaluation teams to expedite eligibility determination and IFSP development, 2006, Program Managers. ***This activity is ongoing.***

- *Within each region there are core entry MDTs to determine eligibility and these are standing weekly appointments. In the Southern region, there are approximately 75 MDTs weekly. In addition, the State programs have moved to an electronic scheduling system. This has created more internal efficiency for assigning staff to MDTs and to reassign staff if someone is out sick or on vacation versus cancelling the MDT meeting. The scheduling system also allows for greater flexibility in slotting families into cancelled appointments.*
- *The Program Manager meets with the scheduling team two (2) or more times a month to rectify problems and increase data collection and accuracy.*
- *New developmental specialists are assigned a mentor who will guide and teach them how to complete the MDT process.*
- *Increased efforts of inputting clearer documentation in the TRAC database regarding contact with families and staff to help eliminate scheduling errors as well as proper coding for exceptions.*
- *The southern region has instituted new policies and procedures with the Multidisciplinary (MDT) and scheduling Team which has assisted with compliance on the 45-day timeline*
- *To eliminate the high rate of no shows the Southern region has been facing, the evaluation and development of the IFSP is being combined into one slot for some MDTs. Families who have participated has had a higher sustained engagement rate with the program.*

Activity 2: The State of Nevada is limited in what can be provided in the way of incentives. ***This activity is ongoing.***

- *The Health Division and the Part C Office provide a variety of program acknowledgements through newsletters, Fast Notes from program managers, and recognition at weekly and quarterly management meetings in an effort to recognize the hard work of all staff related to correction of non-compliance. At the regional program level, staff are kept apprised of the progress achieved and how their activities contributed to the overall correction within this indicator.*

### Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010

#### New Activity Added in FFY 2009

Activity 3: The Part C Office is conducting focused monitoring on the Southern region state program to drill down into the data and determine the root causes of the non-compliance. Part C Staff and Program Quality Assurance Team, 2010-2011

- *Due to the severe slippage in program performance from last year, the program areas being reviewed as part of focused monitoring include: program policies and procedures, staffing, supervision and data.*
- *Data for the 45-day timeline is pulled on a monthly basis to ensure the new policies and procedures that have been instituted had been reasonably calculated to reach full compliance.*
- *The Part C Office met with the program onsite to provide technical assistance and clarification of required documentation and proper coding.*

Part C State Annual Performance Report (APR) for FFY 2009

Overview of the Annual Performance Report Development:

See Page 1

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

**Indicator 8:** Percent of all children exiting Part C who received timely transition planning to support the child’s transition to preschool and other appropriate community services by their third birthday including:

- A. IFSPs with transition steps and services;
- B. Notification to LEA, if child potentially eligible for Part B; and
- C. Transition conference, if child potentially eligible for Part B.

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

**Measurement:**

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

Account for untimely transition conferences, including reasons for delay.

FFY	Measurable and Rigorous Target
2009	100%

**Actual Target Data for FFY 2009:**

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

Statewide: The Part C Office implemented a monitoring process requiring all early intervention programs to complete an annual self-assessment. The compliance percentage for this indicator was derived from child record review data from all eight (8) early intervention programs. Of the 148 children exiting Part C, 145 children exited with appropriate transition plans. Percent = 145/148 x 100 = 98%.

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

Statewide: The compliance percentage for this indicator was derived using the Tracking Resources and Children (TRAC) child data collection system. In completing the 618 data for Table 3,

Report on Infants and Toddlers Exiting Part C Programs, Nevada used the categories under Program Completion from the November 1, 2009 submission (2008-2009) to calculate the number of children exiting Part C and potentially eligible for Part B. There were 1,012 children who were potentially eligible for Part B services and 965 children exiting Part C where notification to the LEA occurred through the Part C Office. The Part C Office verified the remaining 47 children had been notified at the local program level, which resulted in 100% compliance.  $\text{Percent} = 1,012/1,012 \times 100 = 100\%$ .

School districts where there were no children potentially eligible received notifications that stated there were no children in their district who were potentially eligible for Part B during the reporting period.

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

Statewide: The Part C Office implemented a monitoring process requiring all early intervention programs to complete an annual self-assessment versus doing cyclical monitoring. These data represent the first three quarters of data, from July 1, 2009 through March 31, 2010 from TRAC, and is representative of the population of early intervention for the full fiscal year. Additionally, there were four (4) new early intervention providers during this period. Three (3) programs had findings in this indicator. Of the 746 children exiting Part C who were potentially eligible for Part B, 661 children had the appropriate transition meeting. For the 85 children who did not hold an appropriate transition meeting, the delay for 48 children was the result of family exception and for 37 children the delay was due to program error. The total child records compliant include the 48 children with delays due to family exceptions.  $\text{Percent} = 709/746 \times 100 = 95\%$ .

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2009:**

**8A. Progress and Slippage**

**FFY 2009**

The monitoring process was changed from a cyclical monitoring process in FFY 2008 to requiring a comprehensive annual self-assessment of all early intervention programs in FFY 2009. Four (4) new early intervention programs began providing services during FFY 2009 bringing the total number of providers across the State to eight (8).

Beginning in FFY 2009, all programs completed a self-assessment in conjunction with the Part C Office which involved reviewing data from TRAC and child record reviews. The total number of child records pulled in FFY 2008 was from one (1) program and the number was small (13) so a true comparison from FFY 2008 to 2009 is not possible. For FFY 2009, the Part C Office determined data from the first three quarters of the fiscal year (July 1, 2009 – March 31, 2010) would be used for monitoring purposes. A selection of records from this period was reviewed to evaluate the transitioning planning process. This resulted in a larger, more comprehensive selection of records than the previous year and was a more representative percentage of the early intervention population than reported in the previous year.

Each early intervention program developed a Quality Assurance (QA) Review team. The QA team, with a Part C staff member, conducted the child record reviews. The number of child records reviewed for FFY 2009 monitoring was 148 and 145 (98%) of those records contained all of the required steps and services in the Transition Plan. Two (2) of the eight (8) programs did not meet compliance with this indicator and as a result were issued a finding of noncompliance. Both had performance above 95% and were not required to provide corrective action plans (CAP) for this indicator. The programs were required to correct the noncompliance for individual children, including convening a meeting with the family to review the transition plan, unless the child had left the program's jurisdiction. The programs were also notified that all noncompliance must be corrected as

soon as possible but no later than one year from notification. Verification for correction will be completed through review of the child records cited and additional child records to ensure child and system compliance.

**FFY 2008**

Monitoring activities were completed for one (1) program in FFY 2008 utilizing data from July 1, 2008 through February 28, 2009. This program was the only program monitored for performance based on data relative to the FFY 2008 reporting period. This program was the first program to fall under the revised monitoring process which is designed to ensure findings are issued within the same fiscal year as the data being reported. As reported in the FFY 2008 APR, this program was found to be in compliance for Indicator 8.A. Data for the program was derived from child record review and showed thirteen (13) out of thirteen (13) records (100%) were in compliance for Indicator 8.A.

Three (3) early intervention programs were monitored relative to Indicator 8.A. in the fourth quarter of FFY 2007. These monitoring activities utilized data from January through June of 2008 (FFY2007). However, the written findings of non-compliance were not issued by the Nevada Part C Office until the FFY2008 reporting period. The data for these programs were not reflected in the FFY 2008 APR as it was applicable to the previous reporting period. A finding was issued to each of the three programs in FFY 2008 as reflected in Table 8.A. below. Two of the (2) programs were verified to have corrected the noncompliance in a timely manner. One (1) program did not correct the noncompliance in a timely manner though tremendous progress was made in the year for correction (from 62% to 99%). The program was verified to have subsequent correction to 100% in November 2010.

In the process of developing the FFY 2009 APR, the Part C Office discovered there had been a typo in Table 8.A. of the FFY 2008 APR. The table had indicated four (4) findings of non-compliance were issued in for FFY 2008. This number should have been three (3) as reflected in Table 8.A. below.

**Table 8.A. Findings and Correction of Noncompliance**

FFY	Number of Findings of Noncompliance Related to Indicator 8.A	Number of Findings for which Correction was Verified within One Year	Number of Findings for which Correction was Subsequently Verified (Date)	Number of Findings of Noncompliance Remaining
FFY 2009	2	Correction to be reported in FFY 2010		
FFY 2008	3*	2	1	0

\* The three findings reflected in this table were based on monitoring activities conducted in FFY 2007. The data period covered in the monitoring activities fell within the FFY 2007 reporting period and was, therefore not applicable to the FFY 2008 reporting period. Findings from this monitoring were issued in the FFY 2008 reporting period.

In order for Nevada to verify a program has corrected noncompliance: 1) the program must provide documentation verified through child record review that all children of transitioning age had a transition plan with steps and services; 2) program managers must review additional child data to determine whether the program continues to be in compliance with the requirement of the indicator; and 3) Part C Office will verify all child-specific noncompliance is corrected and if the child is no longer in the jurisdiction of the State, that additional records are pulled to ensure the program is implementing the transition plan requirements and reporting correction through review of corrective action reports and the annual self-assessment process.

**8.B. Progress and Slippage**

Nevada determined for Indicator 8.B. the notification to the LEA would be done at the state level rather than at the local program level. This is not a compliance requirement for local programs as the Data are sent from the Part C Office utilizing the TRAC database.

**Table 8.B. Findings and Correction for Noncompliance**

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

The Part C Office developed a two step process to verify every potentially eligible child transitioning to Part B will be included on the LEA notification. Exit Data are cross-walked with the LEA notification list. The notification is sent to the LEAs on a quarterly basis for all children potentially eligible for Part B. Through conversation with Nevada’s Part B Office, it was determined that due to Nevada’s narrow definition of eligibility, all children in Nevada’s early intervention system are potentially eligible for Part B services. Children who are not included on the notification list because of late entry into the system are notified by the local program. Through the TRAC data system, each quarter the Part C Data Manager verifies every child has had notification to the school district. As a result the State is 100% compliant for Indicator 8B.

**8. C. Progress and Slippage**

During FFY 2008, these data were the result of monitoring of one (1) early intervention program. FFY 2009 was the first time the Part C Office used the TRAC data collection system to obtain the data for the compliance indicator, therefore the data from FFY 2008 and FFY 2009 cannot be accurately compared to each other.

Using the TRAC child data collection system in completing the 618 data for Table 3, Report on Infants and Toddlers Exiting Part C Programs, Nevada used the categories under Program Completion from the November 1, 2009 submission (2008-2009) to calculate the number of children exiting Part C and potentially eligible for Part B. The Part C Office pulled three quarters of data for the monitoring for all children with an active IFSP who exited during that time period. This proved to be a representation of the population of early intervention for the full fiscal year

**Table 8.C. Findings and Correction on Noncompliance**

FFY	Number of Findings of Noncompliance Related to Indicator 8.C	Number of Findings for which Correction was Verified within One Year	Number of Findings for which Correction was Subsequently Verified (Date)	Number of Findings of Noncompliance Remaining
FFY 2008	0		NA	
FFY 2009	3		Correction will be reported in FFY 2010	

In FFY 2009, all programs reported data on this indicator through a self-assessment process; therefore, the data represented a larger population of children transitioning. These data represent the first three quarters of data, from July1, 2009 through March 31, 2010 from TRAC. Three (3) of eight (8) programs had findings in this indicator, with the two (2) largest programs having the majority of children who did not receive a transition meeting within the required timeframe. One program had a

compliance percentage of 84%, with 327 records out of 390 documenting timely transition meetings. The second program had a compliance percentage of 89% with 167 of 188 records. The third program had a compliance percentage of 98% with 44 of 45 records meeting the requirement. Also during this period, the largest programs were receiving all referrals and completing the evaluation, eligibility determination and IFSP before transferring to community programs, which may have contributed to the difficulty of meeting the requirement. In FFY 2010, all programs will be receiving their own referrals. There were also four (4) new programs that began providing services during this period.

In order for Nevada to verify a program has corrected the noncompliance: 1) the program must provide documentation, which is verified through child record review, that all children potentially eligible for Part B services had a transition; 2) all child-specific non-compliance is corrected and if the child is no longer in the jurisdiction, that correction is verified by the review of additional records to ensure implementation of the transition requirement; 3) Part C Office will verify through the TRAC data collection system all children potentially eligible for Part B services had a transition conference; and 4) program managers must review child data to determine the program continues to be in compliance with the transition requirements of this indicator.

#### **Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2009:**

Activity 1: Part C continues to implement a process to notify the LEAs on a quarterly basis of all children potentially eligible for Part B. In addition, the local early intervention programs notify the LEAs on a per child basis during the transition process from Part C to Part B, so children that are missed in the Part C statewide report are captured at the local program level with parental consent.

##### **This activity is ongoing**

- *The Part C Data Manager pulls data of children exiting who are potentially eligible for Part B services quarterly, including the previous three months and the following three month time period. This overlap was created to ensure the LEA receives notification for all children even those that may have been late referrals and only in the program for a short period of time.*
- *The local early intervention programs notify the LEAs on a per child basis during the transition process from Part C to Part B, so children missed in the Part C statewide report are captured at the local program level with parental consent.*
- *New providers have also developed policies and procedures to ensure local school districts are notified of potentially eligible children. The Northwest and Northeast regions have developed a tickler system; a list of children who will be transitioning from early intervention two months before the required 90 days*

Activity 2: Regularly scheduled meetings are held between local programs and the local school district representatives to ensure timely transition and data sharing. **This activity is ongoing.**

- *Early intervention programs in the Southern region continue to meet quarterly with school district staff and transition liaisons to ensure timely transition meetings. Through the collaborative effort of the early intervention programs in the south and Clark County School District (CCSD) personnel, CCSD has reached compliance with having Individualized Education Programs (IEPs) completed and held prior to the child's third (3) birthday. This improvement has been attributed to the diligent efforts of the early intervention programs to notify CCSD of upcoming transitioning children six to seven months prior to a child's third birthday. Family Specialists employed by Nevada Early Intervention Services (NEIS) South partnered with a school district transition teacher to provide training for families regarding the IEP process.*
- *In the Northwest region. Supervisors from this program meet with the school district representatives two times per month to ensure timely transition.*
- *The program in the Northeast region had an early childhood teacher with the local school district complete an internship with the program. This has helped to improve the working relationship between the early intervention program and local school district.*

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010- *[If applicable]***

**New activity added in FFY 2009**

Activity 3: The Part C Office will collaborate with the Nevada Department of Education to update the existing Memorandum of Understanding, which will serve as a model for local early intervention programs and school districts. Part C Coordinator and 619 Coordinator, FFY 2009-2012.

- *The Program Managers and the Director of Special Education and staff for rural counties met to develop specific written procedures to support the MOUs developed and further ensure timely transition in the rural areas.*

All ongoing activities will be continued through FFY 2012.

Part C State Annual Performance Report (APR) for FFY 2009

Overview of the Annual Performance Report Development:

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

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

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

**Measurement:**

Percent of noncompliance corrected within one year of identification:

- a. # of findings of noncompliance.
- b. # of corrections completed as soon as possible but in no case later than one year from identification.  
Percent = [(b) divided by (a)] times 100.

**States are required to use the “Indicator C 9 Worksheet” to report data for this indicator (see Attachment A).**

FFY	Measurable and Rigorous Target
FFY 2009	100%

**Actual Target Data for FFY 2009:**

- a. **31** findings of noncompliance were made in FFY 2008.
- b. **25** corrections were verified to be completed as soon as possible but in no case later than one year from identification.  
Percent = 25 divided by 31 x100 or **81%**

**Subsequent Correction**

Five (5) additional findings identified in FFY 2008 were subsequently corrected. This brings the overall correction of findings of noncompliance issued in FFY 2008 to 30 of 31 or 96.8%.

In addition, one (1) program with longstanding noncompliance (since FFY 2005) in Indicator 1 achieved correction of noncompliance. The correction was verified outside this reporting period but the correction is being reported in the interest of closing out this finding of noncompliance.

Attachment 1: Part C Indicator C 9 Worksheet

INDICATOR C-9 WORKSHEET

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY 2008 (7/1/08 through 6/30/09)	(a) # of Findings of noncompliance identified in FFY 2008 (7/1/08 through 6/30/09)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification	# of Findings of noncompliance identified in FFY 2008 (7/1/08 through 6/30/09) subsequently corrected
1. Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	2	2	1	1
	Dispute Resolution: <u>Complaints</u> , Hearings	2	12	11	0
2. Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	NA	NA
	Dispute Resolution: <u>Complaints</u> , Hearings	0	0	NA	NA
3. Percent of infants and toddlers with IFSPs who demonstrate improved outcomes	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	NA	NA
	Dispute Resolution: <u>Complaints</u> , Hearings	0	0	NA	NA
4. Percent of families participating in Part C who report that early intervention services have helped the family	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	NA	NA

**APR Template – Part C (4)**

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY 2008 (7/1/08 through 6/30/09)	(a) # of Findings of noncompliance identified in FFY 2008 (7/1/08 through 6/30/09)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification	# of Findings of noncompliance identified in FFY 2008 (7/1/08 through 6/30/09) subsequently corrected
	Dispute Resolution: Complaints, Hearings	0	0	0	NA
5. Percent of infants and toddlers birth to 1 with IFSPs	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	NA	NA
6. Percent of infants and toddlers birth to 3 with IFSPs	Dispute Resolution: Complaints, Hearings	0	0	NA	NA
7. Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	4	4	2	2
	Dispute Resolution: Complaints, Hearings	1	1	1	0
8. Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including:	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	3	3	2	1
A. IFSPs with transition steps and services;	Dispute Resolution: Complaints, Hearings	0	0	NA	NA
8. Percent of all children exiting Part C who received timely transition planning to support the child's	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	NA	NA

**APR Template – Part C (4)**

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY 2008 (7/1/08 through 6/30/09)	(a) # of Findings of noncompliance identified in FFY 2008 (7/1/08 through 6/30/09)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification	# of Findings of noncompliance identified in FFY 2008 (7/1/08 through 6/30/09) subsequently corrected
transition to preschool and other appropriate community services by their third birthday including:  B. Notification to LEA, if child potentially eligible for Part B; and	Dispute Resolution: Complaints, Hearings	0	0	NA	NA
8. Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including:  C. Transition conference, if child potentially eligible for Part B.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	NA	NA
	Dispute Resolution: Complaints, Hearings	0	0	NA	NA
OTHER AREAS OF NONCOMPLIANCE: Evaluation and Assessment	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	3	3	3	NA
	Dispute Resolution: Complaints, Hearings	0	0	NA	NA
OTHER AREAS OF NONCOMPLIANCE: IFSP Development and Implementation	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	3	3	2	1

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY 2008 (7/1/08 through 6/30/09)	(a) # of Findings of noncompliance identified in FFY 2008 (7/1/08 through 6/30/09)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification	# of Findings of noncompliance identified in FFY 2008 (7/1/08 through 6/30/09) subsequently corrected
	Dispute Resolution: Complaints, Hearings	0	0	NA	NA
OTHER AREAS OF NONCOMPLIANCE: Procedural Safeguards	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	2	2	2	0
	Dispute Resolution: Complaints, Hearings	0	0	NA	NA
OTHER AREAS OF NONCOMPLIANCE: Data Accuracy	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	1	1	1	0
	Dispute Resolution: Complaints, Hearings	0	0	NA	NA
<b>Sum the numbers down Column a and Column b</b>			<b>31</b>	<b>25 (81%)</b>	<b>5</b>

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

**Describe the process for selecting Early Intervention Service (EIS) programs for Monitoring:**

At the beginning of FFY 2008, Nevada had five (5) early intervention programs across the state. In June 2009, one (1) program provided notice to the State they were withdrawing as an early intervention service provider. Phase-out for this provider was completed in August 2009. Correction of any noncompliance for individual children served by the agency was verified by the Part C Office and reported in the FFY 2008 Annual Performance Report (APR) submitted February 2010.

In FFY 2008, the Part C Office completed the last phase of monitoring on a 2-year cycle. Findings were issued to three (3) programs in FFY 2008 based on monitoring activities conducted in FFY 2007. One (1) additional program was on schedule for monitoring activities in FFY 2008. This program was the first to be monitored under the revised monitoring process initiated in FFY 2009. The schedule for monitoring this program was moved to the new timeline established in the revised monitoring process. This required the program to complete a Self-Assessment (SA) and submit the results to the Part C Office not later than May 31, 2009. The previous submission timeline had been October/November.

The Part C Office requested, and received, technical assistance from the National Early Childhood Technical Assistance Center (NECTAC) and the Western Regional Resource Center (WRRC) in reviewing and revising its system of general supervision. The process involved a group of stakeholders from across the state.

Under the new monitoring process, all programs are monitored on an annual basis. Program performance continues to be monitored through the Tracking Resources and Children (TRAC) database in the compliance areas where sufficient data is available. This includes data on the provision of services in natural environments and compliance with the 45-day timeline for convening the Individual Family Service Plan (IFSP) meeting after referral. For FFY 2009, the Part C Office also began monitoring data on timeliness of transition conferences for children who are transitioning to Part B through the TRAC database. For some areas (ex. timely initiation of services), monitoring includes a combination of data from the TRAC system and child record reviews. For compliance areas where needed data cannot be accessed through TRAC, a selection of a minimum of ten (10) percent of child records across all service coordinators are reviewed for data collection purposes. The new process also requires programs to maintain an internal Quality Assurance (QA) Team process and the Part C Office contact person interacts with this team on a regular basis.

For those indicators where sufficient data is not accessible through TRAC, all early intervention providers were required to conduct an annual SA in collaboration with the Part C Office beginning in FFY 2009. A final report was compiled by each program and submitted to the Part C Office not later than May 31, 2010. A review and verification of data was conducted by the program’s Part C Office contact prior to issuing a written notice of findings to a program. This notice was issued to all programs not later than June 30, 2010. The notice of findings included a citation of the regulatory requirement for which the program had been noncompliant.

Once findings have been issued in writing, the Part C Office does periodic follow-up to track progress, provide technical assistance and verify correction. In indicators where the program’s performance is found to be less than substantially compliant (94% or below), a finding is issued and the program must generate a written Corrective Action Plan (CAP) in conjunction with the Part C Office that identifies underlying issues contributing to the failure to meet requirements. Program CAPs must include strategies to change policies and procedures, as appropriate, and identify persons responsible for ensuring implementation of stated activities, targets, and projected timelines for correction. If the program is found to be performing at 95% to 99%, a finding is issued in writing but the program is not required to develop a formal CAP. The program is notified all noncompliance must be corrected as soon as possible but no later than one year from written notification.

The Part C Office grouped individual instances of noncompliance related to the same requirement into one finding for which the program must demonstrate compliance. See indicators 1, 7, 8A, 8B, and 8C for more details on the data source/process used to verify correction for each of these indicators. The Part C Office also conducts focused monitoring in areas where the level of noncompliance is significant or where inadequate information has been presented based on the SA process.

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2009:**

**Timely Correction of FFY 2008 Findings of Noncompliance (corrected within one (1) year from identification of the noncompliance):**

1. Number of findings of noncompliance the State made during FFY 2008 (the period from July 1, 2008, through June 30, 2009) (Sum of Column (a) on the Indicator C 9 Worksheet)	<b>31</b>
2. Number of findings the State verified as timely corrected (corrected within one year from the date of notification to the EIS programs of the finding) (Sum of Column (b) on the Indicator C 9 Worksheet)	<b>25</b>
3. Number of findings <u>not</u> verified as corrected within one year [(1) minus (2)]	<b>6</b>

**Correction of FFY 2008 Findings of Noncompliance Not Timely Corrected (corrected more than one year from identification of the noncompliance) and/or Not Corrected:**

4. Number of FFY 2008 findings not timely corrected (same as the number from (3) above)	<b>6</b>
5. Number of FFY 2008 findings the State has verified as corrected beyond the one-year timeline (“subsequent correction”)	<b>5</b>
6. Number of FFY 2008 findings <u>not</u> yet verified as corrected [(4) minus (5)]	<b>1</b>

Nevada has made significant progress in timely correction of noncompliance in this reporting period. A total of thirty-one (31) new findings of noncompliance were issued in FFY 2008. Of the thirty-one (31), twenty-five (25) or 81% were verified to have been corrected within one (1) year from the date of identification (by FFY 2009). This represents continuous improvement in the percent of timely correction of findings verified by the State from 42% in FFY 2007 to 67% in FFY 2008 and 81% in FFY 2009.

Subsequent **correction of five (5) additional findings** issued in FFY 2008 has been verified. This included correction for one (1) program in Indicator 1 (timely initiation of IFSP services), two (2) programs in Indicator 7 (45-days to the initial IFSP meeting), one (1) program in Indicator 8.A. (Transition Planning) and one (1) program in the State category of IFSP Development and Implementation. During the process of revising the general supervision system, it was determined this state category was duplicative; therefore, it is not included in the current monitoring process. These subsequent corrections bring the overall correction performance to 96.8% (30 of 31).

The one (1) remaining area of noncompliance identified in FFY 2008 and not yet corrected is in the following area:

- Indicator 1: One (1) finding; statewide administrative complaint; there was verification of individual child correction for this complaint; however, it could not be verified that this requirement was being implemented for all children in the state

**Describe the specific actions the State took to verify the correction in FFY 2009 of findings of noncompliance identified in FFY 2008:**

The monitoring process includes verification of individual child correction. A list of all child records with identified noncompliance are maintained by the Part C Office and periodic verification is conducted to ensure individual correction has occurred and the date on which it occurred. In the situation where the program had failed to meet a required timeline the Part C Office verified, through data from the TRAC data system or by on-site record review, the activity was conducted though late and, if appropriate, a remedy was discussed with the family. Programs who have not met required timelines must also demonstrate through future data the requirement is being implemented for all children. In verifying correction of any noncompliance which occurred, the Part C Office reviews updated data, again through the data base or on-site record reviews, to ensure the program is correctly implementing the specific regulatory requirement.

When the Part C Office has verified the program is meeting requirements for all children enrolled in the area for which a finding was issued, a letter of correction is issued. The verification process includes review of data from the TRAC database or on-site record reviews as described above. Internal processes and systems are also reviewed to ensure they are reasonably designed to ensure maintenance of the correction.

**Actions Taken if Noncompliance Not Corrected**

Programs with findings in FFY 2008 not corrected in a timely manner were required to update the identification of root causes and CAPs for FFY 2010. Specific focus was placed on these areas and in some instances establishment of specific benchmarks was required. More frequent review (either monthly or quarterly) of data was implemented to determine whether progress was being made. Two (2) programs were scheduled for focused monitoring to further explore root causes so a more targeted action plan could be developed.

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

Two (2) programs were identified as having noncompliance with this indicator in FFY 2008. One (1) program was verified through TRAC data review and child record reviews to have corrected in a timely manner. The second program did not correct in a timely manner but was verified through follow-up to have subsequently corrected the noncompliance.

In the case of the administrative complaint, correction hinges on all early intervention programs in the State coming into full compliance with the requirement for timely initiation of services on the IFSP. Each of the programs targeted for focused monitoring as a result of FFY 2009 monitoring were reviewed in this area. In addition, verification visits conducted with programs to address other compliance areas have also included a review of data for this Indicator. Monthly data reports are generated for all early intervention programs on the number of children who have experienced a delay in services and are presented to Lead Agency Administration. In addition, as a provision for the new funding allocation, the Department of Health and Human Services (DHHS) is required to report to the Legislative Council Bureau on a semi-annual basis on the status of correction for this indicator. Monthly management calls and quarterly statewide meetings continue to be conducted with all programs.

**APR Indicator 7:** Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.

Four (4) programs had a finding of noncompliance relative to the 45-day timeline as reported in the FFY 2008 APR. Two (2) programs corrected the noncompliance in a timely manner and two (2) programs subsequently corrected. One of the two (2) programs subsequently corrected had maintained 99% compliance for each of three previous quarters and based on new data pulled in July 2010, the program was determined to be at 100% compliance and a letter of correction was issued.

The second program with subsequent correction did not demonstrate correction of the noncompliance within a year of the notified finding and experienced some slippage. The program was selected for a focused monitoring to determine the underlying causes of the slippage within this indicator. Through meeting with the supervisor and intake staff, the Part C Office was able to determine the primary underlying causes to be:

- Some program personnel were not following established procedures;
- Some program personnel were unclear about scheduling Multidisciplinary Team (MDT) appointments and were not always scheduling within the specified timeframe; and
- The program experiences a high level of turnover in the child population. Families are referred to the program but there is a tremendous amount of no shows, cancellations and trying to schedule and reschedule families to meet timelines;
- Personnel were not correctly identifying when the delay was due to family circumstances; and
- While new State allocation available July 1, 2009 was designated for funding community partners to serve children, the program continued to serve as intake point for the region. These activities, including all intake, evaluation/assessment, eligibility determination and developing the initial IFSP, were performed by the program, at existing personnel capacity since no new funds were allocated for additional personnel in State operated programs. The lack of additional personnel to perform these activities contributed to the slippage as well.

The program has now instituted new policies and procedures which are reasonably calculated to support the program in attaining and maintaining full compliance for this Indicator. The program was able to establish new procedures for cancellations and established a list of families interested in being called for an earlier appointment when a cancellation occurred. The Program manager meets with the scheduling team two (2) or more times a month to rectify problems and increase data collection and accuracy. New developmental specialists are assigned a mentor who will guide and teach them how to complete the Multidisciplinary Team (MDT) process.

At the beginning of FFY 2010, all of the community providers began to receive new referrals and were responsible for the 45-day process of evaluation/assessment, eligibility and IFSP development. This has tremendously eased the burden from the State program which has contributed to their ability to improve performance on the 45-day timeline requirement.

The Part C Office continues to pull data for the 45-day timeline for this program monthly in follow-up of the focused monitoring. All of the referrals from October through December 2010 have been analyzed and the program is now performing at 100% on the 45-day timeline and has been notified of correction.

**APR Indicator 8:** Percent of all children exiting Part C who received timely transition planning to support the child’s transition to preschool and other appropriate community services by their third (3) birthday including:

- C. IFSPs with transition steps and services;

Three (3) programs each had a finding of noncompliance in this indicator in FFY 2008. Two (2) programs were verified to have corrected the noncompliance in a timely manner. One (1) program did not correct the noncompliance in a timely manner though tremendous progress was made in the year for correction (from 62% to 99%). The program was verified to have subsequent correction to 100% in November 2010.

**Correction of Any Remaining Findings of Noncompliance from FFY 2006 or Earlier Response to OSEP FFY 2008 State Performance Plan (SPP)/APR Response Table issued June 3, 2010: Reporting on Correction of Previous Noncompliance**

In the FFY 2008 SPP/APR Response Table issued June 2010, OSEP required Nevada to provide data in the FFY 2009 APR demonstrating, (1) the State timely corrected noncompliance identified in FFY 2008 and (2) the remaining two findings of noncompliance identified in FFY 2006 (one finding) and FFY 2005 (one finding) were not reported as corrected in the FFY 2008 APR in accordance with IDEA section 635(a)(10)(A), 34 CFR §303.501, and OSEP Memo 09-02

**Remaining Findings of Noncompliance from FFY 2006**

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

This finding was a result of program monitoring of one (1) program. The State reported less than 100% correction for this indicator in its FFY 2008 APR and did not report the remaining FFY 2006 findings were subsequently corrected:

1. Number of remaining FFY 2006 findings noted in OSEP’s June 2010 FFY 2008 APR response table for this indicator	1
2. Number of remaining FFY 2006 findings the State has verified as corrected	0
3. Number of remaining FFY 2006 findings the State has NOT verified as corrected [(1) minus (2)]	1

**Actions Taken if Noncompliance Not Corrected**

One (1) finding of noncompliance identified in FFY 2006 was not corrected as of the submission of the FFY 2008 APR and remains uncorrected in this reporting period.

The primary issue underlying the on-going noncompliance for this program was identified to be insufficient capacity to serve the number of children being referred and the number determined eligible for early intervention services due to shortage of personnel. The inability to obtain sufficient personnel was directly impacted by ongoing decline in the State’s budget and the availability of qualified providers in the State.

The DHHS prepared a budget requesting additional funding for the early intervention system and presented it to the Governor for the then upcoming biennium (SFY 2010-2011). The Governor included the request for increased funding in the budget presented to the Legislature and additional funds were allocated for early intervention services. These funds became available on July 1, 2009 and were designated specifically for expansion of service capacity through provider agreements with community based providers. Since this time, the State Health Division, the entity responsible for administration of direct early intervention services for the State, has entered into provider agreements with three (3) new community providers in the region covered by this program. The three (3) new providers began enrolling children in August 2009. The provider agreement required each service provider to serve a minimum of

100 children and to attain full capacity within 180 days of entering into the agreement. This brought the total number of early intervention programs in the region to five (5).

As a result of enrolling new service providers, some progress has been made in reducing the number of children for whom services are delayed as well as reduction in the length of delay. Although not all children are receiving all required services that have been identified as needed, some services have been initiated timely. The program has pursued recruitment of private therapy providers, especially Speech Therapists, through a number of venues to no avail. The new service providers have faced some of the same issues of hiring and retaining qualified personnel experienced by the State operated program. The Part C Office tracks the assignment of children to services and monitors capacity of each program on a regular basis to ensure timely assignment of children to providers.

The Part C Office has worked with the early intervention programs to establish a process for verifying correction for all individual children who have had delayed initiation of IFSP services. Upon assignment to a service provider, an IFSP review is held for all children and compensatory services or other appropriate remedy is offered to the family for any delay in initiation of a service. An agreement is reached by the program and the family and the Part C Office randomly monitors to see that agreements are implemented. The program has not yet been able to demonstrate it is meeting the requirement for timely initiation of IFSP services for all children and/or all services. However, the process of recruiting and establishing new service provider agreements continues.

The Part C Office continued to monitor underlying issues through interviews with early intervention personnel, communication with administrators for early intervention at the State level, and tracking data through the TRAC data system including number of referrals, number of new IFSPs and assignment of individual children to service providers. It was also determined the lack of progress toward correction in this indicator warranted more intense focused monitoring including more extensive and frequent data review and analysis. The program was notified it had been selected for focused monitoring in June 2010 following the FFY 2009 monitoring process. The focused monitoring was scheduled for FFY 2010. The frequency of program SA has been increased to annually, as well as monthly monitoring of individual child assignments to services through the TRAC data system. The program is required to report progress in this indicator to the Part C Office on a quarterly basis.

**Remaining Findings of Noncompliance from FFY 2005**

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

The State reported less than 100% correction for this indicator in its FFY 2008 APR and did not report the remaining FFY 2006 findings were subsequently corrected:

1. Number of remaining FFY 2005 findings noted in OSEP’s June 2010 FFY 2008 APR response table for this indicator	1
2. Number of remaining FFY 2005 findings the State has verified as corrected	1
3. Number of remaining FFY 2005 findings the State has NOT verified as corrected [(1) minus (2)]	<b>0</b>

**Describe the specific actions that the State took to verify the correction in FFY 2009 of findings of noncompliance identified in FFY 2005:**

The State’s definition of timely initiation of IFSP services was proposed in the State Performance Plan (SPP) submitted to the US Office of Special Education Programs (OSEP) in December 2005. The SPP was accepted, as written, by OSEP in March 2006. Baseline data reported in the SPP represented one program. At that time, the program was found to be noncompliant based on the proposed criteria for timely initiation of services (30 days from the parent’s consent to implement the IFSP or as determined by the IFSP team). The program has been under a CAP since that time. The root causes of the noncompliance were found to be rapid increase in the number of eligible children and shortage of personnel due to hiring freezes imposed as the State’s budget crisis worsened. The program was given

the opportunity to hire for some positions through a justification process that was often lengthy.

In the 2009 Legislative session, the Governor, acknowledging the need of the early intervention system, included additional funding in the budget presented to the Legislature. The Legislature approved this allocation of additional funds (a combination of State funds and ARRA funds) to increase the capacity for services through the early intervention system. All new funds were designated to expand services through community organizations. The State Health Division and state-operated early intervention programs began the process of soliciting proposals from community providers as soon as the allocation was available.

The program continued to have noncompliance through this process of developing new resources but showed steady improvement. The program supported the establishment and full enrollment of two (2) new community partner programs in the region from September 2009 through July 2010. The Program strengthened internal tracking and scheduling systems and implemented an internal QA Team. Weekly data reports were generated internally and a monthly report on the number of children with delayed service initiation was generated both internally by this program and for all early intervention programs through the Part C Office.

The Part C Office conducted periodic child record reviews with the program as well as reviewing child service status in the TRAC data system to ensure services were provided to children, though late. There was also monitoring to ensure the family had been offered compensatory services in the instances where there had been delay. The Part C Office acknowledged a system was in place and operational to ensure correction for individual children in its June 30, 2010 verification and response to the program's SA process. The program also established specific performance targets in its CAP following the FFY 2009 monitoring process.

While not within the timeframe covered in this reporting period, data compiled on December 20, 2010 showed no child enrolled in this program had delays in initiation of IFSP services that exceeded the 30-day timeline requirement or as specified by the IFSP team. The Part C Office issued a letter of correction to the program on January 6, 2011.

#### **Critical Activities Implemented During This Reporting Period:**

Activity 1: Develop written monitoring guidelines and procedures for Part C monitoring outlining procedures for implementation, definitions of relevant terms, compliance requirements, and timeline for correction. Distribute guidelines and procedures to all early intervention programs. Procedures will include the provision that any program determined, through state general supervision procedures, to be performing at 95% or above in a specific compliance category will be issued a finding but will not be required to generate a written CAP for that area. The program must correct all individual child noncompliance and continue to work toward 100% compliance or compliance with the State established target, as appropriate. Program performance found to be below 95% will result in a finding of noncompliance and will require a written plan to correct the noncompliance as soon as possible, but in no case, later than one (1) year from identification. Programs will be required to submit interim progress reports as determined by the Part C Office. ***This activity is ongoing.***

- *In FFY 2008 through FFY 2009 the Part C Office phased in full implementation of the revised system of general supervision developed through a stakeholder process and with support from the National Early Childhood Technical Assistance Center (NECTAC) and the Western Regional Technical Assistance Center (WTRC) as reported in the FFY 2008 APR. Procedural documents were updated and shared with early intervention service providers through quarterly statewide meetings and on-site technical assistance with the program's Part C Office contact.*
- *A sub-grant has been established between the State Health Division, which has designated responsibility for administrative oversight of the operation of all early intervention programs, and the Aging and Disability Services Division with specific language requiring all early intervention programs to comply with IDEA Part C requirements. Concerns related to the performance of any individual program will be issued to both the individual program and the State Health Division by the Part C Office for collaboration in determining appropriate action to be taken.*

- *On-site technical assistance reviews were conducted with all new early intervention programs by the Part C Office within the first six (6) months of operation*
- *All early intervention programs have established an internal QA team process that reviews program data, at a minimum, on a quarterly basis. More frequent reviews are recommended, or may be required, for areas identified as problematic relative to compliance with IDEA Part C. The program's Part C Office contact has participated in QA team processes in a technical assistance role.*
- *Documentation for the basis of all findings, including a roster of individual child records requiring correction, is maintained by the program, as well as in the Part C Office. The Part C Office will track this information as part of the process of verification of correction of the noncompliance.*

Activity 2: The general supervision system, including program monitoring, will be evaluated on an annual basis to determine what aspects are most effective and where changes may be appropriate. Input will be provided by system stakeholders. ***This activity is ongoing.***

- *Data for this period indicates implementation of an increased schedule of monitoring (every early intervention program is required to conduct SA in collaboration with the Part C Office on an annual basis) is more effective for ensuring timely correction of identified noncompliance.*

Activity 3: In collaboration with the State Health Division, the Part C Office participates in a readiness review of all new providers through a checklist created by Part C staff to ensure programs ability to comply with IDEA Part C regulations. ***This activity is ongoing.***

- *Four (4) new community based programs entered provider agreements with the State Health Division in FFY 2009 as early intervention service providers. The Part C Office designates a contact person for each program which, along with designated personnel within the State Health Division's regional office, participated in the program's completion of the readiness checklist prior to initiating service delivery. Copies of Part C Office required documents and ongoing training and technical assistance was provided. The Part C Office completed an on-site technical assistance review with each program within the first six (6) months of operation and all programs completed their first SA process March through May of 2010.*

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010 (if applicable):**

All ongoing activities are continuing through FFY 2012.

**Part C State Annual Performance Report (APR) for FFY 2009**

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

See Page 1.

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

**Indicator 10:** Percent of signed written complaints with reports issued that were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.

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

**Measurement:** Percent = [(1.1(b) + 1.1(c)) divided by 1.1] times 100.

FFY	Measurable and Rigorous Target
2009	100% of all complaints were resolved within 60 day timeline

**Actual Target Data for FFY 2009:**

Statewide: There were eight (8) complaints filed during the reporting period. All eight (8) complaints were withdrawn by the family as being resolved at the local program level and therefore not requiring Part C investigation.  $8/8 \times 100 = 100\%$  resolution within the 60 day timeline.

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2009:**

**FFY 2009**

All eight (8) of the complaints filed in FFY 2009 were related to timely delivery of services. The programs that had the complaints filed against them already had system findings related to compliance with this indicator. The early intervention programs when notified of the complaint worked closely with families to determine if the complaint could be resolved internally. Part C staff were assigned to each complaint and spoke with both the program and the parents regarding the issues. In each instance the program was able to resolve the complaint prior to completion of complaint investigation therefore Part C ensured that all complaints were resolved within the 60 day timeline. Part C staff verified all eight (8) children had services in place and the remedy for the delay of service had taken place. In each instance the parent signed a form rescinding their complaint as the issue was resolved to their satisfaction. Part C did not engage in a systemic review of the programs where complaints were filed as both programs had ongoing noncompliance related to the issue and were already working on correction through a Corrective Action Plan (CAP).

The Part C office has been at 100% compliance on this indicator since the first APR report with the exception of FFY 2008 as described below. The procedures that have been put in place are effective and ensure that all complaints are investigated and findings issued within the 60 day required timeline.

**FFY 2008**

There was an administrative complaint filed in FFY 2008 regarding timely delivery of services. This extension was reported in the last APR and the Part C Office's performance was noted at 90% due to the administrative complaint not being completed within 60 days. This complaint was extremely complex and Part C requested an extension on the complaint investigation timeline as the 60 day timeline could not be met. There were three programs statewide that had to be investigated and over 300 children involved in this complaint. Findings were issued to three programs related to individual child records. Part C verified correction for each individual child took place within the year of the finding. The systemic issue however has not been closed as timely delivery of service is still an ongoing compliance finding for one program in the state. Indicator one (1) and Indicator nine (9) speak to the issue of the ongoing noncompliance.

**State Performance Plan Activity Update**

Activity 1: Part C maintains an existing **electronic matrix to track complaints** from the date received through the 60 day timeline for completion. The timeline for each complaint is monitored by the Part C Coordinator to ensure Part C staff assigned to investigate the complaint complete the process within the specified timeframe. **This activity is ongoing.**

- *Part C has developed a process for assigning and tracking every complaint that comes into the system. Part C staff are designated as lead for the complaint and a tracking log is kept on each complaint. This log includes the date the complaint was received, who was assigned, the issues to be investigated and the date the report is due. The log also tracks what child and system findings there were, and what corrective action the program must implement as a result to ensure correction of noncompliance as soon as possible, but no later than one year from identification. The log also tracks when the correction has been completed and the date of closure on the complaint. This log is shared with the ICC at quarterly meetings*
- *Each complaint finding report is reviewed by the Part C Coordinator and when final is also reviewed by the State Attorney General's office prior to being released to the family and the program.*
- *Part C created a form that parents must sign if they wished to rescind a complaint. This form signed form was submitted to the Part C staff responsible for the complaint investigation. The Part C staff spoke with parents to ensure the correction had taken place for their child. The rescind form is logged into the complaint log and retained within the complaint folder.*

Activity 2: Timeline for each complaint is monitored by the Part C Coordinator to ensure that Part C staff assigned to investigate the complaint complete the process within the specified timeframe. **This activity is ongoing.**

- *The Part C Coordinator meets with staff weekly to get progress reports on existing complaint investigations, the timeline is tracked through the log sheet, and tracking via Outlook calendar function.*
- *Part C has developed a **formal process for extending the timeline** for completing the complaint investigation based on exceptional circumstances, in the FFY 2008 this process was utilized for the administrative complaint that was filed*

Activity 3: Provide training to all direct service personnel on the procedural safeguards including the complaint system, and how each staff members work directly impacts the program and the importance of IDEA compliance. **This activity is ongoing.**

- *Every new staff member hired attend New Employee Orientation training where procedural safeguards are covered, including complaints, mediation, and the due process system.*
- *Verification of staff understanding of procedural safeguards is implemented through the self-assessment process child record review.*

Activity 4: Final complaint investigation reports will be shared with all staff through monthly team meetings to ensure staff understand compliance issues and can learn through past mistakes. **This activity is ongoing.**

- As part of correction action for program findings, all new policies that are developed as a result of findings are disseminated to all program to ensure they are aware that the finding is due to a complaint investigation and of the policy change or clarification required to ensure compliance in the future.

Activity 5: Part C maintains the complaint tracking system to ensure that **program corrections** are completed as soon as possible, but not later than one year from identification. Part C staff also provides follow-up to verify that system corrections have been completed. Each region has designated one person as the lead within their agency to submit corrective action reports and to follow the complaint to completion. **This activity is ongoing.**

- *There is one program that has ongoing noncompliance related to the administrative complaint that was filed in FFY 2008. This program is undergoing a focused monitoring to assist with identifying the root causes preventing correction. The ongoing noncompliance is related to Indicator 1 Timely Delivery of Services. Indicator 1 and Indicator 9 identify the enforcement and activities that are in process to ensure correction of the ongoing noncompliance.*

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010** *[If applicable]*

All ongoing activities are continuing through FFY 2012.

**Part C State Annual Performance Report (APR) for FFY 2009**

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

See Page 1

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

**Indicator 11:** Percent of fully adjudicated due process hearing requests that were fully adjudicated within the applicable timeline.

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

**Measurement:** Percent = [(3.2(a) + 3.2(b)) divided by 3.2] times 100.

FFY	Measurable and Rigorous Target
2009	100%

**Actual Target Data for FFY 2009:**

Because of this lack of hearing requests, the measurement formula cannot be applied for this indicator.

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2009:**

There were no due process hearing requests filed in FFY 2009, so there were no due process requests that had to be adjudicated within the applicable timeline. Because no due process requests were filed in FFY 2009, no explanation of progress or slip-page is required.

Nevada Part C follows the Part B Due Process Hearing regulations. There were no due hearing process requests during this reporting period.

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010 *[If applicable]***

When activities are required for this indicator all proposed targets will be extended through FFY 2012.

Part C State Annual Performance Report (APR) for FFY 2009

Overview of the Annual Performance Report Development:

See Page 1.

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

**Indicator 12:** Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements (applicable if Part B due process procedures are adopted).

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

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

FFY	Measurable and Rigorous Target
2009	Targets through FFY 2012 to be determined once baseline data are available.

**Actual Target Data for FFY 2009:**

There were no due process hearing requests filed in FFY 2009. Because of this lack of hearing requests, the measurement formula cannot be applied for this indicator.

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FY 2009:**

There were no resolution sessions held in FFY 2009 due to the lack of due process hearing requests that were filed in this reporting period. Because no resolution sessions were held in FFY 2009, no explanation of progress or slippage is required.

Nevada Part C follows the Part B Due Process Hearing regulations.

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010 *[If applicable]***

When activities are required for this indicator all proposed targets will be extended through FFY 2012.

Part C State Annual Performance Report (APR) for FFY 2009

Overview of the Annual Performance Report Development:

See Page 1

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

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

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

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

FFY	Measurable and Rigorous Target
2009	Targets through 2012 will be determined once baseline data are available

**Actual Target Data for FFY 2009:**

One (1) mediation request was submitted during FFY 2009 and was withdrawn by the parent. No mediation sessions were held during FFY 2009.

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2009:**

There was one (1) mediation request during this reporting period. The child was attending Early Head Start and the family gave a release of information to discuss the issue with their family service provider. Upon discussion with the family service provider, it was discovered they had requested mediation in error and had wanted to file a complaint instead. We advised them to withdraw the mediation request and to submit a letter of complaint. By the time the family service provider had the discussion with the parent, the issue had been resolved at the local program level to their satisfaction and they chose not to file a complaint. As a result, there were no mediations held in this reporting period FFY 2009, Nevada cannot report on progress or slippage for this reporting period. Baseline will be established when there are 10 or more mediation requests.

A system for requesting mediation is in place, with a pool of trained mediators.

**Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010 *[If applicable]***

When activities are required for this indicator all proposed targets will be extended through FFY 2012.

Part C State Annual Performance Report (APR) for FFY 2009

Overview of the Annual Performance Report Development:

See Page 1

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

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

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

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

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

States are required to use the “Indicator 14 Data rubric” for reporting data for this indicator (See Attachment B.)

FFY	Measurable and Rigorous Target
2009	<ul style="list-style-type: none"> <li>a. Submitted on or before due dates --<b>100%</b></li> <li>b. Accurate, including covering the correct year and following the correct measurement. --<b>100%</b></li> </ul>

**Actual Target Data for FFY 2009:**

- a. Part C submitted 618 data reports Table 1 and 2 by February 1, 2010 and Table 3 and Table 4 on November 1, 2010. The Annual Performance Report (APR) for Federal Fiscal Year (FFY) 2009 was submitted by the due date of February 1, 2011. Utilizing the Scoring Rubric for Indicator 14, Nevada scored **100%** on this indicator.
- b. Part C has implemented numerous procedures to assure data are valid and reliable as identified in the activities below; Nevada scored **100%** on this indicator.

**Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that Occurred for FFY 2009:**

Nevada has met its compliance target of 100% for this indicator in both FFY 2008 and FFY 2009. Because of this, we cannot evaluate progress or slippage for this reporting period.

Data accuracy is ensured through key components of the statewide mandated forms and the Tracking Resources and Children (TRAC) data collection system. The front-end of the TRAC application has features for identifying ‘data anomalies,’ including restricted drop-down lists for data fields which minimize

data errors due to typographical error or submission of spurious information. Data is reviewed on a quarterly basis for any anomalies not caught by the data system. Any errors found are reviewed, researched and sent to the program for correction and corrected in the database. Data must be entered into critical fields in the data system in order to allow data entry to progress. Critical fields include most date fields; if these fields were left blank it could potentially lead to missed deadlines with the Individual Family Service Plan (IFSP), transition meetings, etc. There are also critical fields which do not allow data entry staff to proceed with the data entry or save the record as an additional safeguard. The application was designed to ensure duplicate record entries do not occur. TRAC utilizes User ID and Password to authenticate access to the database, each User ID is setup with a security level at the time of assignment. The application identifies all data changes in a record with a date/time stamp and by the last user to access the record. The security levels are as follows –

**System Administration:**

- Read Data
- Enter/Modify Data – Statewide Caseloads
- Run Reports – Statewide Caseloads
- View/Print Tickler List – Statewide Caseloads
- View/Modify Security/User Maintenance
- View/Modify Lookup Table Maintenance

**Supervisors and Program Managers:**

- Read Data
- Enter/Modify Data – Program Caseloads
- Run Reports – Program Caseloads
- View/Print Tickler – Program Caseloads

**Service Coordinators:**

- Read Data
- Modify Data – Caseload Only
- Run Reports – Caseload Only
- View/Print Tickler – Caseload Only

**Data Entry:**

- Read Data
- Enter/Modify Data – Program Caseloads
- Run Reports – Program Caseloads
- View/Print Tickler – Program Caseloads

**Read Only:**

- Read Data
- Run Reports – Program Caseloads

**State Performance Plan Activity Update**

**Activities during This Reporting Period:**

Activity 1: The Part C Data Manager has created refreshable reports for each program utilizing Crystal Reports to encourage programs to run data reports as needed for internal **data driven decision making**. This allows them to audit data for compliance, to follow-up with data reviews for Corrective Action Plans (CAP), to view data trends and to allow them to **audit their data for accuracy**. Programs also use these reports for tracking and scheduling their therapy services per IFSP. **This activity is ongoing.**

- *Individualized reports for programs with noncompliance or slippage were generated as needed to bring program into compliance.*
- *The program on focused monitoring had data pulled by the Part C Data Manager monthly to track progress. The data manager's findings were reported to the program manager, the Quality*

*Assurance (QA) Team and the Part C Program liaison. Follow up data were pulled to ensure corrections were made to make certain the most accurate data were used for reporting purposes.*

Activity 2: With the creation of refreshable data reports for each program, it has allowed the **Program Data Managers to audit their own program data** on an as needed basis. Program Managers also utilize these reports to analyze the caseload size of staff for assignment of new children referred to the program. This assists in managing the 45-day timeline requirement. Programs have requested ad hoc reports to allow them to monitor six (6) month reviews, and transition to enable them to support staff in meeting their timelines. This allows the programs to make data driven decisions and to ensure data are accurate and reliable. **This activity is ongoing.**

- *Each program's data is audited quarterly to address key compliance issues including 45-day timeline, transition meetings, timely services, etc.*
- *Data for the 45-day timeline is pulled on a monthly basis to ensure the new policies and procedures have been instituted, and have been reasonably calculated to reach full compliance.*
- *Wait list trend reports are issued on a monthly basis. These reports identify the length of time between service identification and service initiation to address noncompliance and errors with proper coding in the data system. This information is presented at Nevada Interagency Coordinating Council (ICC) meetings, to Division Administrators and the Director of Health and Human Services. The codes used in the TRAC system are closely monitored by the IDEA Part C Data Manager, any discrepancies are brought to the attention of the program data supervisor, program manager and Part C Program liaison for review and correction on a monthly basis.*

Activity 3: Every month Service Coordinators provide their supervisor with a list of their active cases, supervisors then do **spot checks with Service Coordinators on a rotational basis to ensure data are current and accurate.** The supervisor reviews the record to ensure the services listed are correct, IFSPs are current, reviews have been completed, transition planning is occurring and children are not past the age of three. **This activity is ongoing.**

- *Reports showing the active caseload are sent to each provider at the beginning of each month to check for accuracy.*
- *Transition meeting verification reports are sent to programs to ensure transition meetings are held in a timely manner and if not, the proper code is documented in the child's record.*

Activity 4: The Part C Data Manager has provided **individual training** to Program Data Managers and data entry staff to ensure TRAC data are entered accurately. The Part C Data Manager has attended all staff meetings within programs to answer questions and provide guidance on data entry and for clarification on what the data field is meant to collect. The Part C Data Manager participates in the monthly Part C technical assistance call with all regional program managers, provides data updates, and answers questions. She also attends the quarterly Statewide Management Meeting which includes Part C staff and all program managers and supervisors. **This activity is ongoing.**

- *In FFY 2009, a two day extensive training was provided to new community providers by Part C Office staff including the Part C Data Manager to ensure accurate data will be compiled and address any questions.*

Activity 5: Regional Part C state contacts are working with designated supervisors within each early intervention program to ensure Child Outcome Summary Form (COSF) data for entry and exit are being provided on a monthly basis. Tickler reports are being run through Crystal Reports accessing the TRAC database. Programs are providing monthly follow-up reports on the status of each child on the tickler list. Part C staff, Program Supervisors and Data Manager. **This activity is ongoing.**

- *Exit and entry tickler reports are generated each month for each program for the purpose of cross-walking each child to ensure a COSF has been generated. The COSF analysis spreadsheets are reviewed monthly for missing data and accuracy. Any incomplete or missing COSF entries or exits are brought to the attention of the program for correction and followed up by Part C staff for completion on a monthly basis.*

## Revisions, with Justification, to Proposed Targets / Improvement Activities / Timelines / Resources for FFY 2010 *[If applicable]*

### **New Activity Added FFY 2009:**

Activity 6: Part C Office in partnership with the Aging and Disability Services Division (ADSD) Information Technology (IT) staff will develop a business case with a Technology Investment Request (TIR) to develop a plan and statement of need to update the current TRAC data system. TIRs are required for Executive Branch agencies as part of their biennial budget process as well as for interim funding of information technology projects. Once the TIR is approved, a Request for Proposal (RFP) will be issued to contract with a programmer, web expert and a data project manager to begin the revisions to TRAC to meet all of the requirements for federal reporting under Part C of the IDEA, and also includes reporting elements critical for state reporting and budget development. This includes building federal reports within the database, collection of data on timely delivery of services, adding features for tracking Autism data, adding COSF data collection to the system and other components the current database does not offer. Part C Coordinator, Part C Data Manager, ADSD IT Personnel, and Regional Program Managers. **This activity will take place in FFY 2009-2012.**

All ongoing activities are continuing through FFY 2012.