Nevada Early Intervention Services Management Analyst Unit

Report request: Number of children who are receiving in-person services

Report requestor: Interagency Coordinating Council (ICC)
Request date: 04/28/2022 (requested quarterly updates)

Data gathered: 03/03/2025

Report completed by: D. Race, MAII

Early Intervention (EI) is a system of services and supports individually designed to help families meet the specific needs of their children. EI programs provide services based on the regulations provided by Part C of the Individuals with Disabilities Act (IDEA) to children under age three. The EI system includes children who are served by Nevada Early Intervention State Programs and Comprehensive Community Provider Programs.

The intention of this report is to show an update from the previous report completed on 11/04/24. The provision of in-person services has continued to increase following the update to the EI system's COVID-19 protocol allowing the return to in-home and community-based services.

Service-related data were collected from NEIDS, Nevada's Part C IDEA data system, on 03/03/25. These are point-intime data and are specific to children who are currently receiving services¹. 3,192 children were identified with 11,295 ongoing services⁴ throughout the early intervention system. It is important to note that service coordination is outlined as a service in NEIDS due to the system requirements for service log creation. Previously, with TRAC-IV, it was not explicitly included in the services section because service coordination is an entitled service that cannot typically be provided at a prescribed frequency. The inclusion of service coordination increases the number of documented services compared to previous data.

Table 1 and Table 2 below show the comparison in point-in-time data representing the number of services identified as being provided in-person or via a telehealth related platform between current data obtained on 03/03/25 and the previous report completed on 11/04/24. Table 3 shows a comparison of data collected in TRAC-IV, on 12/26/23. Graph 1 and Graph 2 show the comparison in point-in-time data representing the percentage split between the location of services between current data obtained on 03/03/25 and the previous report completed on 11/04/24. Graph 3 shows a comparison of data collected on 12/26/23.

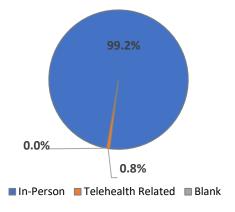
Current data indicate that in-person services have increased by 195% from the original data set obtained on 01/31/22 where 3,787 services were identified as being provided in-person. Current data indicate an increase of 41% from the data obtained by comparison of data collected in TRAC-IV, on 12/26/23, where 7,967 services were identified as being provided in-person. The ratio of services to individual child has remained consistent across the reporting periods. The most current report indicates an increase of one additional service to child which is likely related to the addition of service coordination to the child's plan.

†See data notes below for more information.

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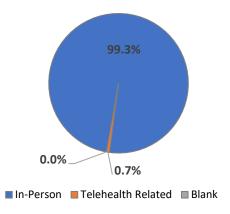
TABLE 1: Services by Location – Current data from 03/03/25 **Number of Number of Ratio of Services** Location² Children^{1,3} Services⁴ to Child⁵ 3,188 11,202 4:1 In-Person 93 1:1 Telehealth Related 66 0 0 Blank 3,192 11,295 4:1

GRAPH 1. Services by Location Current data from 03/03/25

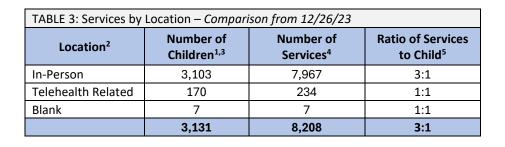


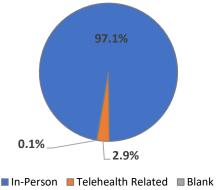
GRAPH 2. Services by Location Comparison from 11/04/24

TABLE 2: Services by Location – Comparison from 11/04/24			
Location ²	Number of Children ^{1,3}	Number of Services ⁴	Ratio of Services to Child ⁵
In-Person	3,384	12,179	4:1
Telehealth Related	62	85	1:1
Blank	0	0	
	3,390	12,264	4:1



GRAPH 3. Services by Location Comparison from 12/26/23





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†Data Notes:

- ¹ Includes children in Active status who are in the IFSP phase per NEIDS and are receiving ongoing services according to the Planned Services report. Does not include services previously received as indicated by an End Date occurring prior to the date of the data generation. Does not include services that have not yet initiated as indicated by the Provider Name, "No Provider Available".
- ² In-person services include those identified with a Method Delivery of "Individual", "Co-treatment", and "Developmental Group". Telehealth related services include those identified with a Method of Delivery of "Telehealth" and "Telehealth/Co-Treatment". Blank indicates that no selection was made by the program; these data are incomplete and cannot be categorized by location.
- ³ The count of children has been unduplicated per location. The location categories, however, are not mutually exclusive and children may be included in both groups. A child may receive multiple services across locations, and/or they may receive the same service in both locations. For example, a child may receive physical therapy in person but speech therapy via telehealth or a child may receive speech 1x month in-person and 1x month via telehealth. The total child count is unduplicated across all locations.
- The service-related data were obtained through the Planned Services report from NEIDS. The Planned Services report does not populate service if the child's IFSP is in Pending status. This Telehealth report does not include services previously received or assessments needed to identify ongoing service frequency. Service-related data may be duplicated by child if the child receives the same service but with different methods of delivery, i.e., individual and co-treatment.
- ⁵ Ratio of services to child represents the number of services by location and overall, by an individual child. The ratio reads services:child.

Early Intervention Services transitioned from TRAC-IV to the Nevada Early Intervention Data System (NEIDS) in December 2023. See data notes from previous reports to understand the parameters of data extracted from TRAC-IV during those reporting periods.