

CLARK COUNTY SCHOOL DISTRICT
COMPLAINT INVESTIGATION
(#CL050626)

Report Issued on June 30, 2026

INTRODUCTION

On May 6, 2026, the Nevada Superintendent of Public Instruction received a State Complaint filed by an attorney of an organization representing¹ a court-ordered Education Decision Maker (EDM) for a named student. The State Complaint alleged violations of the Individuals with Disabilities Education Act (IDEA) and Nevada Revised Statutes (NRS) or Nevada Administrative Code (NAC), Chapters 388, by Clark County School District (CCSD) concerning a named student.

The allegations of the violation of cited law, as clarified by the facts supporting the alleged violations in the State Complaint, were that CCSD failed to comply with:

- a. NRS 388.497 - Use of a chemical restraint, prohibited as an aversive intervention.

Clarifying Supporting Facts: From August 11 to August 25, 2025, the student's teacher provided a chemical restraint to the students² in the class, including the student, multiple times per day. The restraint was Nello Supercalm, a sleep aid. The Complainant asserted there was no evidence that CCSD notified the board of trustees in a timely manner nor that a factual report and corrective action plan was created and submitted to NDE. The Complainant noted that if the emails regarding the teacher and principal of the school attending an Aversive Intervention, Physical and Mechanical Restraint training was the entire corrective plan, "it is inadequate to prevent future harm."

- b. NRS 388.508 – Failure to report the use of a prohibited aversive intervention to the board of trustees or to report the use of more than five restraints in a calendar year without revising the IEP or behavior intervention plan to avoid further restraints.

Clarifying Supporting Facts: Despite repeated requests for records, there was no evidence that CCSD notified the board of trustees of the chemical restraint in a timely manner or of the 12 physical restraints from August 13 - September 30, 2025, including an attempt to mechanically restrain the student that became a physical restraint when the handcuffs were too large. CCSD also failed to develop and submit a corrective plan to NDE for the chemical restraint and the physical restraint.

¹ The attorney Complainant provided NDE a Limited Services Retainer Agreement regarding representation on this State Complaint.

² The State Complaint was an individual student State Complaint. While other unnamed students were mentioned as having been given the chemical restraint of the sleep aid, no additional facts in support of a systemic violation were provided. Therefore, the State Complaint was accepted as an individual student State Complaint only. However, the Complainant was informed that if it is determined that a violation has occurred, the remedy would address the appropriate future provision of services for all children with disabilities. 34 C.F.R. §300.151(b). See related Finding of Fact #14.

- c. NRS 388.501 – Failure to develop methods to prevent further physical resistant after five reports in one year.

Clarifying Supporting Facts: Despite repeated restraint of the student from August 13 – September 30, 2025, CCSD failed to review the student’s IEP and to include additional methods to ensure that restraint did not continue.

- d. 20 USC §1415 – Failure to provide required information to the student’s EDM (NRS §432B.462), denying parental participation in the student’s school environment, denying the student a FAPE.

Clarifying Supporting Facts: CCSD failed to report to the student’s EDM the use of Nello Supercalm as a chemical restraint and, when notification was made to the EDM on September 25, 2025, the notice was insufficient to notify the EDM that an adult sleep aid was provided multiple times a day. CCSD also failed to review the student’s IEP after five physical restraints, despite the EDM’s repeated request for an IEP Team meeting.

The Complainant’s proposed resolution, in summary form, included the development of a plan, including de-escalation training and reporting at the student’s school to prevent further illegal restraints in CCSD with oversight by NDE (with a point of contact); training of SEIFs regarding what sort of services and testing should be attempted when a student is being frequently restrained, and when restraints must be reported to the board of trustees; and training of the CCSD Office of Compliance and Monitoring and guidance on its role in stopping excessive restraints and aversive intervention, requirements of reports and corrective plans, to be provided to a student’s EDM and included in a student’s records, and accommodations and supports if a student is getting restrained more than five times in a year.

The allegations within the jurisdiction of NDE through the State Complaint process, consolidated, raise the following issues for investigation as clarified in the course of the investigation:

Issue One:

- a. Whether, in violation of NRS §388.497, a named CCSD employee used a prohibited aversive intervention of a chemical restraint, NRS §§388.476, on the student from August 11, 2025 to August 26, 2025³, specifically the administration of Nello Supercalm, a sleep aid.
- b. If the described incident of a named CCSD employee administering, Nello Supercalm, to the student from August 11, 2025 to August 26, 2025 constituted a prohibited aversive intervention of a chemical restraint under NRS §§388.476, 388.497, whether CCSD complied with NRS §388.508 regarding:
 - 1. Timely reporting the violation to the CCSD board of trustees and, as applicable, the parent of the student, 34 C.F.R. §300.30; and
 - 2. Developing and submitting a corrective plan to NDE.

³ The State Complaint alleged the use of the asserted chemical restraint was up to August 25, 2025 and NDE’s statement of the issue upon acceptance of the State Complaint provided that date range. As clarified in the course of the investigation, based on the Notice of Use of Physical Restraint, Mechanical Restraint, or Aversive Intervention provided by CCSD of the report of this use of this aversive intervention of a chemical restraint on the student, it was used on the student up to August 26, 2025 and it is that time period that is accepted as the documented use of this aversive intervention/chemical restraint. (State Complaint, CCSD Response, Notice of Use of Physical Restraint, Mechanical Restraint, or Aversive Intervention)

Issue Two:

- a. Whether a CCSD employee(s) used a prohibited aversive intervention of a physical restraint, NRS §388.494, on the student, except as otherwise provided in NRS §388.501, during the time period of August 13, 2025 - September 30, 2025.
- b. If a CCSD employee(s) used a prohibited aversive intervention of a physical restraint, NRS §388.494, whether CCSD complied with NRS §388.508 regarding:
 1. Timely reporting the violation to the CCSD board of trustees and, as applicable, the parent of the student, 34 C.F.R. §300.30; and
 2. Developing and submitting a corrective plan to NDE.
- c. If the described incidents of physical restraint occurred during the time period of August 13, 2025 – September 30, 2025, but met the conditions of an emergency under NRS §388.501, whether CCSD complied with:
 1. NRS §§388.501, by providing a report to the CCSD board of trustees of the school district or designee of the use of the procedure and, if the board of trustees or designee determined that denial of the student's rights occurred, submitting a report to NDE in accordance with NRS 388.513.
 2. If there were five reports of the use of physical restraint on the student that met the conditions of an emergency during the cited time period in the 2025/2026 school year, whether the student's IEP was reviewed and, if physical restraint continued after the student's IEP was reviewed, additional methods appropriate for the student were included in the student's IEP to ensure that the restraint did not continue.

It was noted that in the description of the facts relating to the stated problem of the student, that a violation of the student's civil rights as a result of the alleged restraints and prohibited aversive intervention was also included in the description. The Complainant was advised that NDE does not have jurisdiction to investigate complaints of discrimination under Section 504 of the Rehabilitation Act (Section 504) and Title II of the Americans with Disabilities Act of 1990 (ADA) through the special education State Complaint process and of the process to file a civil rights complaint, if the Complainant wanted to pursue it.

In the May 12, 2026, issue letter to CCSD, NDE requested additional documents and information in order to investigate the State Complaint. CCSD was notified in that same correspondence that if CCSD disputed the allegations of noncompliance in the Complaint, the submitted documents and information must include a denial of the alleged noncompliance; a brief statement of the factual basis for the denial; and specifically reference the documentation provided to NDE that factually supported the denial and that a failure to do so by June 9, 2026 or an extended timeline authorized by NDE, would be considered a concession of noncompliance for purposes of this State Complaint.

CCSD timely responded prior to June 9, 2026 and acknowledged the use of an aversive intervention on the student from August 11, 2025 to August 25, 2025; but denied the allegation that it was not in compliance with NRS §388.508 regarding the timely reporting of the violation and development of a corrective plan. CCSD also acknowledged the described incidents of physical restraint occurred during the period of August 13, 2025 to September 30, 2025, but that they met the conditions of an emergency under NRS §388.501.

The State Complaint, including attachments, CCSD's denial of all claims, and all documents and requested supplemental information submitted by CCSD in response to the issues in the Complaint were reviewed and considered in their entirety in the investigation of this Complaint. The Findings of Fact cite the source

of the information determined necessary to resolve the issues in this Complaint and the original source document, where available, was relied upon.

FINDINGS OF FACT

1. The student was enrolled in CCSD in the 2025/2026 school year. August 11, 2025 was the first day of school for students for the 2025/2026 school year and there were 12 school days from August 11, 2025 to August 26, 2025. During the relevant time period of this State Complaint, the student had an October 3, 2024 annual IEP with an anticipated duration date of October 2, 2025. Thereafter, student's October 3, 2024 IEP was revised by an October 20, 2025 annual IEP with a review date of October 19, 2026;⁴ an October 30, 2025 revision IEP/Manifestation Determination Review that retained the review date of October 19, 2026; and another annual IEP on November 24, 2025. (2025/2026 CCSD School Calendar, Student Attendance Record, IEPs, State Complaint, CCSD Response)
2. At the time of the development of the student's October 3, 2024 IEP, the student's IEP Team determined that the student's behavior impeded the learning of the student or the learning of others. Behaviorally the student benefitted from reminders to keep hands to self, maintain a calm body and give friends space; and staff directives with firm kindness to regulate behavior and adhere to class expectations. (October 3, 2024 IEP)
3. At the time of the student's October 20, 2025 IEP Team meeting, the student's most recent behavior plan was dated October 3, 2024 and the school team reported that CCSD was in the process of conducting a functional behavioral assessment and creating a behavior intervention plan. The student had a supplementary aid/service in the student's October 20, 2025 and October 30, 2025 IEPs that the student would have a behavior intervention plan on or before November 1, 2025 and it would be implemented as written by all staff who worked with the student. Similarly, the student's November 24, 2025 IEP indicated that the student would have a behavior intervention plan on or before January 5, 2026. The student's new behavior intervention plan was completed January 21,

⁴ As part of its general education supervision system, a State Education Agency is required to exercise due diligence when made aware of an area of concern; that is, a credible allegation of potential implementation or compliance issues with IDEA, including those that come from dispute resolution systems. "Where such patterns are present, the State, as part of its general supervision system, must determine whether systemic noncompliance occurred or is occurring and ensure correction in a timely manner. 20 U.S.C. §§ 1412(a)(11) and 1435(a)(10); 34 C.F.R. §§ 300.149 and 303.120. "Questions and Answers on Monitoring, Technical Assistance, and Enforcement, 123 LRP 22123 (OSEP QA 23-01, July 24, 2023. This memorandum is publicly available at: <https://sites.ed.gov/idea/idea-files/guidance-on-state-general-supervision-responsibilities-under-parts-b-and-c-of-the-idea-july-24-2023/> .

While outside of the scope of this investigation, the State Complaint Investigation Team identified a probable incidence of noncompliance in the course of the investigation, the student's IEP being reviewed after the designated annual review date (FOF #1). While an apparent violation of IDEA and NAC, Chapter 388, no documentation was provided in the course of this investigation that indicated a pattern of systemic noncompliance. However, given a State Education Agency must exercise proper due diligence when made aware of an area of concern, this information will be considered as part of NDE's general supervision system in the review of the data collected during NDE's last monitoring of CCSD and will be addressed by NDE outside this State Complaint process if a pattern of noncompliance is determined that impacts other students with disabilities. 20 U.S.C. §§ 1412(a)(11) and 1435(a)(10); 34 C.F.R. §§ 300.149.

2026.⁵ (Behavior Intervention Plan, October 20, 2025 October 30, 2025 and November 24, 2025 IEPs)

4. The named EDM for the student in this case was appointed on July 23, 2025 and continued to serve in that capacity during the relevant time period of this State Complaint. On August 15, 2025, the EDM was notified that the EDM's status for the student was reportedly not in the CCSD system. The EDM was, however, provided the parental notice of the IEP Team meeting and listed as the parent on the student's October 3, 2024 IEP. Another individual was identified as the student's parent on the October 20, 2025, October 30, 2025 and November 24, 2025. The EDM did participate in the development/review of these later IEPs. (July 23, 2025 Court Order, November 2, 2025 Court Report, August 15, 2025 Email Correspondence, IEPs)

Chemical Restraint

5. CCSD acknowledged the use of an aversive intervention on the student from August 11, 2025 to August 25, 2025⁶ by the student's teacher. The Notice of Use of Physical Restraint, Mechanical Restraint, or Aversive Intervention (hereinafter, Notice) identified the incident that occurred from August 11, 2025 to August 26, 2025 as an aversive intervention with the following description of the incident: "It was reported that the teacher provided a dietary supplement and other unapproved food items." The reason for the intervention was "allegation" under "other." (State Complaint, CCSD Response, Notice)
6. CCSD did not dispute the allegation in the State Complaint that the prohibited intervention of a chemical restraint was used by the student's teacher; the chemical restraint was Nello Supercalm, a sleep aid; and that it was used it on the student multiple times a day. (State Complaint, CCSD Response)
7. Nello Supercalm is classified as a dietary supplement and is, therefore, not FDA approved. The company advertises that it is "designed to help you relax, manage stress, and unwind—without feeling drowsy." "If you're taking medications or other supplements, we always recommend checking with your healthcare provider before adding Supercalm to your routine. While Supercalm is formulated with well-tolerated, research-backed ingredients...it's important to consider how these may interact with your current medications or conditions." No documentation was provided in the course of this investigation, that the student's healthcare provider was contacted prior to the administration of this product. (Nello Supercalm Website, Review of the Record)

⁵ See previous footnote as it relates to NDE's general education supervision responsibility on this failure to implement the student's behavior intervention plan in the student's IEP as required. While outside the scope of this investigation, this probable violation is particularly concerning in this case given the student's repeated conduct with safety concerns. Again, no documentation was provided in the course of the investigation that portends a pattern of systemic noncompliance, but this information will also be considered as part of NDE's general supervision system in the review of the data collected during NDE's last monitoring of CCSD and will be addressed by NDE outside this State Complaint process if a pattern of noncompliance is determined that impacts other students with disabilities. 20 U.S.C. §§ 1412(a)(11) and 1435(a)(10); 34 C.F.R. §§ 300.149.

⁶ As previously discussed, based on the referenced Notice provided by CCSD of the report of this use of this aversive intervention, it was used on the student up to August 26, 2025. The State Complaint Investigation Team accepted CCSD's acknowledgment to August 25, 2025 and, given their own documentation evidenced the use up to August 26, 2025, it is that time period that is accepted as the documented use of this aversive intervention/chemical restraint. (State Complaint, CCSD Response, Notice of Use of Physical Restraint, Mechanical Restraint, or Aversive Intervention)

8. The principal of the student's school was notified by a staff member on August 26, 2025 of an allegation that another staff member had provided the student "a dietary supplement and other unapproved food items." On August 27, 2025, the day after the last recorded incident and report of the incident, the principal: verified the account of the incident; verified the accuracy of the written report; determined no emergency condition existed; determined need for disciplinary action; and the report was sent to distribution ("see below"). The distribution below was: original confidential folder; second copy associate superintendent; third copy parent; fourth copy cumulative file; fifth copy IEP Team. The instructions on the form were that the form must be faxed to Office and Compliance within 24 hours of the incident. (Written Contemporaneous Notes, Notice)
9. Notwithstanding the school principal's verification of the incident and accuracy of the written report in the Notice on August 27, 2025, inconsistently, the principal reported on September 22, 2025 that the investigation of the incident had just been completed and an updated form 624, the Notice, and a letter on school letterhead would be issued. On September 22, 2025 the principal issued a letter on school letterhead 'to whom it may concern' that an investigation was conducted on a chemical restraint/aversive intervention allegation and substantiated that the teacher provided a "dietary supplement and other unapproved food items" to this student and other named students. (Notices of Use of Physical Restraint, Mechanical Restraint, or Aversive Intervention, Written Contemporaneous Notes, September 22, 2025 Principal Letter)
10. In the course of the investigation, NDE requested additional documentation from CCSD to supplement the Notice. In response, CCSD indicated that the district did not have the requested information to provide:
 - a. A copy of the full report of the incident caused to be prepared by the board of trustees or its designee that set forth in detail the factual circumstances surrounding the denial; and
 - b. Either the provision of this full report to NDE or, if a copy of another factual report of the incident was forwarded to NDE, a copy of that report;
 - c. Documentation entered in the student's cumulative record/confidential file maintained for the student.
 - d. Given the Notice referenced the site administrator's determination as to the need for personnel action, documentation of any other corrective action taken other than the documented training. (NDE Supplemental Request for Information, June 22, 2026 CCSD Email Response)
11. The principal of the student's school notified Child Protective Services and an unnamed individual identified as the parent of the incident of aversive intervention by phone on August 27, 2025 and a copy of the Notice was sent to this individual on August 28, 2025. The Complainant identified the individual notified as the student's foster parent. The EDM received a copy of the Notice when a records request was completed in September 2025. (Notice, State Complaint)
12. The Notice used by CCSD clearly provides the date of the Site Administrators Report and action of the CCSD board of trustees or designee, but not the date the Notice was provided to the CCSD board of trustees. On September 24, 2025, the CCSD board of trustees or designee determined there was a denial of rights and indicated a factual report was forwarded to NDE and a corrective action plan was forwarded to NDE (within 30 days). (Notice)
13. CCSD regulation provides: "The principal or administrative designee of a school who has determined that an aversive intervention or inappropriate physical or mechanical restraint has occurred shall report the violation to the Assistant Superintendent, Student Support Services Division within 24 hours of the violation, or as soon thereafter as the violation is discovered. A copy of the report will be immediately provided to the Board of School Trustees." (CCSD Aversive Regulation 5141.3)

14. While accepted as a student-specific State Complaint, in the course of the investigation, the Complainant's allegation was substantiated that the same "dietary supplement and other unapproved food items" used on the student had been used on seven other named students in the student's self-contained class, with no distinction between the administration time period for this student and the other students. (September 22, 2025 Principal Letter)
15. The sole notification to NDE of the aversive intervention/chemical restraint used on this student and the seven additional students was that an "aversive intervention" occurred on one date, August 11, 2025; and the name of the involved student, staff member and school. No other report or information was provided to NDE on the factual circumstances of the aversive intervention and the continued violation to August 26, 2025. On the basis of this notification only, CCSD's proposed corrective plan to conduct a training of the involved teacher and principal on a date specific was approved by NDE. (NDE Confirmation of Reports, Computer Screen Shot of Student Report)
16. At least until the student's October 20, 2025⁷ IEP Team meeting, after CCSD's determination the aversive intervention was verified, the student's teacher who used Nello Supercalm on the student continued in the same capacity relative to the student. (IEPs, Notice)
17. On October 6, 2025, both the student's teacher who administered the Nello Supercalm and the principal of the school attended an Aversive Intervention, Physical and Mechanical Restraint training conducted by the CCSD Office of Compliance and Monitoring and the aversive intervention incident that was cited as occurring only on August 11, 2025 with the student was closed by CCSD. The training was a 21-slide PowerPoint training. (Restraint & Aversive Intervention/Incidents/Incident Details, CAP Training Verification, PowerPoint Training)

Physical Restraint

18. On the following dates CCSD staff used physical restraint on the student:
 - a. August 13, 2025: Two staff members used physical restraint for the reason to protect the safety of others for two minutes. The described incident was that the student was throwing large items at staff and kicking staff. The use of physical restraint was reported to the CCSD board of trustees or designee (hereinafter, board of trustees or board) and on August 14, 2025, the board determined there was no denial of rights. The assistant principal of the student's school notified an unnamed individual identified as the parent/guardian by phone of the incident of the physical restraint the day of the incident and a copy of the Notice was sent to this individual the following day.
 - b. August 28, 2025: Two staff members used physical restraint for the reason to protect the safety of others for 10 minutes. The described incident was that the student was hitting and kicking staff. The use of physical restraint was reported to the CCSD board of trustees and on August 29, 2025, the board determined there was no denial of rights. A CCSD employee notified the student's mother of the incident of the physical restraint by phone the day of the incident and a copy of the Notice was sent to this individual the following day.
 - c. September 18, 2025: There were three incidents:
 - i. 10:20 AM: Two staff members used physical restraint for the reason to protect the safety of others for three minutes. The described incident was that the student

⁷ The State Complaint Investigation Team noted that the page of the October 20, 2025 IEP listing the IEP Team participants, with signatures, was dated October 14, 2025, but determined it was for the October 20, 2025 IEP given the proximity of the date and submission for that purpose.

hit and kicked a staff member. The use of physical restraint was reported to the CCSD board of trustees and on September 19, 2025, the board determined there was no denial of rights. A CCSD employee notified an unnamed individual identified as the parent of the incident of the physical restraint by phone the day of the incident and a copy of the Notice was sent to this individual that same day.

- ii. 11:28 AM: One staff member used physical restraint for the reason to protect the safety of others; to protect the physical safety of the student; and to protect against severe property damage for one minute. The described incident was that the student hit, kicked and slapped a student. The use of physical restraint was reported to the CCSD board of trustees and on September 19, 2025, the board determined there was no denial of rights. A CCSD employee notified an unnamed individual identified as the parent of the incident of the physical restraint by phone the day of the incident and a copy of the Notice was sent to this individual that same day.
- iii. 12:23 PM: One staff member used physical restraint for the reason to protect the safety of others for four minutes. The described incident was that the student was hitting students and staff and throwing chairs at staff. The use of physical restraint was reported to the CCSD board of trustees and on September 19, 2025, the board determined there was no denial of rights. A CCSD employee notified an unnamed individual identified as the parent of the incident of the physical restraint by phone the day of the incident and a copy of the Notice was sent to this individual that same day.

d. September 23, 2025: There were three incidents:

- i. 9:50 AM: One staff member used physical restraint for the reason to protect the safety of others and to protect the safety of the student for eight minutes. The described incident was that the student was hitting and kicking staff and student was hitting head. The use of physical restraint was reported to the CCSD board of trustees and on September 24, 2025 the board determined there was no denial of rights. A CCSD employee notified an unnamed individual identified as the parent of the incident of the physical restraint by phone the day of the incident and a copy of the Notice was sent to this individual that same day.
- ii. 12:20 PM: One staff member used physical restraint for the reason to protect the safety of others; to protect the physical safety of the student; and to protect against severe property damage for five minutes. The described incident was that the student was throwing chairs, hitting teachers and hitting staff. The use of physical restraint was reported to the CCSD board of trustees and on September 24, 2025 the board determined there was no denial of rights. A CCSD employee notified an unnamed individual identified as the parent of the incident of the physical restraint by phone the day of the incident and a copy of the Notice was sent to this individual that same day.
- iii. 2:15 PM: Two staff members used physical restraint for the reason to protect the physical safety of the student; to protect the protect the safety of others; and to protect against severe property damage for one minute. The described incident was that the student was kicking, scratching and throwing tables at adult staff member. The use of physical restraint was reported to the CCSD board of trustees and on September 24, 2025 the board determined there was no denial of rights.

The student's special education instructional facilitator notified an unnamed individual identified as the parent of the incident of the physical restraint by phone the day of the incident and a copy of the Notice was sent to this individual that same day.

- e. September 24, 2025: Two staff members used physical restraint for the reason to protect the physical safety of the student and to protect against severe property damage for two minutes. The described incident was that the student repeatedly threw items at walls (and at people) causing damage. Student was a danger to self because of climbing on top of furniture and cabinets and the student hit and kicked an adult. The use of physical restraint was reported to the CCSD board of trustees and on September 26, 2025 the board determined there was no denial of rights. A CCSD employee notified an unnamed individual identified as the parent of the incident of the physical restraint by phone the day of the incident and a copy of the Notice was sent to this individual that same day.
- f. September 26, 2025. There were two incidents:
 - i. 9:12 AM: Three staff members used physical restraint for the reason to protect the physical safety of the student; and to protect the physical safety of others for six minutes. The described incident was that the student was pushing students; throwing objects; and hitting, biting and kicking staff. The use of physical restraint was reported to the CCSD board of trustees and on September 30, 2025, the board determined there was no denial of rights. The assistant principal of the student's school notified an unnamed individual identified as the parent by phone of the incident of the physical restraint the day of the incident and a copy of the Notice was sent to this individual the same day.
 - ii. 10:38 AM: Two staff members used physical restraint for the reason to protect the physical safety of others for six minutes. The described incident was that the student was kicking and hitting staff. The use of physical restraint was reported to the CCSD board of trustees and on October 1, 2025 the board determined there was no denial of rights. The assistant principal of the student's school notified an unnamed individual identified as the parent by phone of the incident of the physical restraint the day of the incident and a copy of the Notice was sent to this individual the same day.
- g. September 30, 2025: One staff member used physical restraint for the reason to protect the physical safety of others for 30 seconds. The described incident was that the student was kicking, hitting, throwing chairs, desks, and books at adult. The use of physical restraint was reported to the CCSD board of trustees and on October 3, 2025 the board determined there was no denial of rights. The student's special education teacher notified an unnamed individual identified as the parent by phone of the incident of the physical restraint the day of the incident and a copy of the Notice was sent to this individual the same day.
- h. While outside the scope of this State Complaint, the State Complaint Investigation Team noted that the incidents of physical restraint on the student continued with one incident on October 8, 2025; one incident on October 9, 2025; and one incident on October 15, 2025. (Notices of Use of Physical Restraint, Mechanical Restraint or Aversive Intervention, Confidential Status Record)

Behavior Incidents

19. From the commencement of the 2025/2026 school year to September 30, 2025, the student had behavioral events that included aggressive behavior and assault with resolution on August 15, 2025; August 28, 2025; September 2, 2025; September 8, 2025; September 18, 2025 for two events; September 23, 2025; September 24, 2025; September 26, 2025; and September 29, 2025. (Student Behavior Detail Reports)
20. Up to October 1, 2025, the school psychologist reported that the student had 11 behavior incidents and 12 physical restraints in order to protect the safety of others due to aggressive behavior. (October 20, 2025 IEP)
21. At the October 20, 2025 and October 30, 2025 IEP Team meeting, the student's EDM raised several parental educational concerns that included wanting additional information on the use of the reported aversive intervention from August 11, 2025 to August 26, 2025 and the fact that the number of physical restraints used on the student had never been addressed. The EDM disagreed with all or part of the student's October 20, 2025 and October 30, 2025 IEP, but waived the "ten day notice" so that the October 30, 2025 IEP could be implemented. The EDM agreed with the components of the student's November 24, 2025 IEP. (October 20, 2025 IEP, October 31, 2025 Notice of Intent to Implement IEP, November 24, 2025 IEP)
22. At the time of the student's November 24, 2025 IEP Team meeting, the latest multidisciplinary team report was dated October 7, 2025. While the student's significant behavioral difficulties are referenced in the multidisciplinary team assessment results, the only specific listed assessment of the student's behavior at that time was teacher observation, documentation and data from October 27, 2025 to November 24, 2025. The student had three annual goals in the area of social/emotional/behavioral. (November 24, 2025 IEP)

IEP After Physical Restraints

23. The first IEP Team meeting for the student conducted after the physical restraint of the student from August 13, 2025 to September 30, 2025 was an October 20, 2025 IEP Team meeting. The sole stated purposes of the IEP Team meeting were for the annual IEP and the IEP following a three-year reevaluation, with no mention of the review of restraints in advance of the IEP Team meeting. At the time of the October 20, 2025 IEP Team meeting; however, the comment on the student's IEP indicated: "The fifth restraint will also be addressed in this meeting." (October 20, 2025 IEP, Meeting Notices)

CONCLUSIONS OF LAW

Issue One:

- a. Whether, in violation of NRS §388.497, a named CCSD employee used a prohibited aversive intervention of a chemical restraint, NRS §§388.476, on the student from August 11, 2025 to August 26, 2025, specifically the administration of Nello Supercalm, a sleep aid.

- b. If the described incident of a named CCSD employee administering, Nello Supercalm, to the student from August 11, 2025 to August 26, 2025 constituted a prohibited aversive intervention of a chemical restraint under NRS §§388.476, 388.497, whether CCSD complied with NRS §388.508 regarding:
 1. Timely reporting the violation to the CCSD board of trustees and, as applicable, the parent of the student, 34 C.F.R. §300.30; and
 2. Developing and submitting a corrective plan to NDE

Aversive Intervention: Chemical Restraint

Pursuant to NRS §388.497, a person employed by the board of trustees of a school district or any other person is prohibited from using any aversive intervention on a student with a disability. “Aversive intervention” is specifically defined by identified actions, including the administration of chemical restraint to a person, if the action is used to punish a student with a disability or to eliminate, reduce or discourage maladaptive behavior of a student with a disability. NRS §§388.473, §388.473(7). The seriousness of this prohibition and any intentional violation is exemplified by NRS §388.506: In addition to any penalty prescribed by specific statute, a person who intentionally uses aversive intervention on a student with a disability or intentionally violates NRS 388.499 is subject to disciplinary action pursuant to NRS 391.330 or 391.750, or both.

NRS §388.476 defines “chemical restraint” as “...the administration of drugs to a person for the specific and exclusive purpose of controlling an acute or episodic behavior that places the person or others at a risk of harm when less restrictive alternative intervention techniques have failed to limit or control the behavior. The term does not include the administration of drugs prescribed by a physician, physician assistant or advanced practice registered nurse as standard treatment for the mental or physical condition of the person.”

In this case, CCSD acknowledged the use of an aversive intervention on the student from August 11, 2025 to August 25, 2025 by the named staff member, the student’s teacher (Finding of Fact (FOF) #5) and did not dispute the allegation in the State Complaint that the asserted chemical restraint used by the student’s teacher was Nello Supercalm, a sleep aid, and that the teacher used it on the student multiple times a day. (FOF #6) (As previously discussed, (footnote #6) the same chemical restraint was used up to an additional day, August 26, 2025.)

Given CCSD’s acknowledgment of the use of a prohibited aversive intervention of a chemical restraint, NRS §§388.476, it is unnecessary to discuss the applicability of the definition of aversive intervention or chemical restraint in this case. NRS §§388.473, 388.476.

Therefore, in violation of NRS §388.497, a named CCSD employee used a prohibited aversive intervention of a chemical restraint, NRS §§388.476, on the student from August 11, 2025 to August 26, 2025, specifically the administration of Nello Supercalm, a sleep aid.

Notwithstanding this determination, to address the second part of Issue One, it is still necessary to determine if CCSD complied with NRS §388.508 regarding timely reporting the violation to the CCSD board of trustees and, as applicable, the parent of the student, 34 C.F.R. §300.30; and developing and submitting a corrective plan to NDE.

Reporting of the Denial of Rights

Pursuant to NRS §388.508(1), the school where a violation of NRS §388.471 to §388.515 occurred must report the violation to the board of trustees not later than 24 hours after the violation occurred, or as soon thereafter as the violation is discovered. The board of trustees must then develop, in cooperation with the superintendent of schools of the school district, a corrective plan to ensure appropriate action is taken by the school and the board of trustees to prevent future violations, NRS §388.508(2). The board of trustees is also required to cause a full report to be prepared which must set forth in detail the factual circumstances surrounding the denial and a copy of the full report must be provided to NDE. NRS §388.513(2). NDE's receipt of the full report of the factual circumstances surrounding the denial is necessary to enable NDE to review the corrective plan to ensure that it complies with applicable federal law and the statutes and regulations of Nevada. NRS §388.508(3). Fundamental to these requirements is that the report of the violation must actually notice the board of trustees and NDE of the specific denial of a student's rights. The State Complaint Investigation Team has determined in this case it did not.

The Notice described the incident as an aversive intervention from August 11, 2025 to August 26, 2025 with the following description of the incident: "It was reported that the teacher provided a dietary supplement and other unapproved food item."⁸) (FOF #5) (This same description is included in the school principal's memorandum (FOF #14) that may have been provided to the board of trustees.) While indeed it is correct that Nello Supercalm is classified as a dietary supplement, this product is "designed to help you relax, manage stress, and unwind—without feeling drowsy" and the manufacturer recommends checking with the individual's health care provider to consider how it may "interact with your current medications or conditions." (FOF #7)

Importantly, with no other report of the factual circumstances surrounding the denial of the student's rights, CCSD's Notice for this student lacked the factual circumstances and information regarding the nature of this "dietary supplement and other unapproved food items," for, presumably, the specific and exclusive purpose to control the student's behavior (NRS §§388.473, 388.476); the failure to consult with the student's healthcare provider; the use multiple times a day on the student; and, as determined in the course of the investigation, the use of this product by the same individual on, in total, eight students in the teacher's classroom. As such, the State Complaint Investigation Team determined that the report of this violation by notice of the use of a dietary supplement/unapproved food item on the student did not provide adequate notice to either the board of trustees or NDE of the magnitude of this violation to allow either to ascertain the nature and impact of the denial of the student's rights and the appropriate action to be taken to prevent future violations. (NDE was also only notified that the use of an "aversive intervention" occurred on one day with this student and the other named students, rather than continued use on subsequent dates, in the request for approval of CCSD's corrective action plan.) (FOFs #14, #15)

Timely Report to Board of Trustees

In addition to the absence of significant information in the required report of the denial of the student's rights to the board of trustees and NDE to put both on notice as to the violation in this case, the school where the violation occurred was required to report the violation to the CCSD board of trustees not later than 24 hours after the violation occurred, or as soon thereafter as the violation is discovered. NRS §388.508. In this case, the violation was discovered by the principal of the student's school on August 26,

⁸ The Food and Drug Administration defines a dietary supplement: A dietary supplement is a product intended for ingestion that, among other requirements, contains a "dietary ingredient" intended to supplement the diet. <https://www.fda.gov/food/information-consumers-using-dietary-supplements/questions-and-answers-dietary-supplements>

2025 and the following day the principal verified the account of the incident; verified the accuracy of the written report; determined no emergency condition existed; determined need for personnel action; and sent the report for distribution. (FOF #8)

The Notice used by CCSD clearly designates the date of the Site Administrators Report and the date the CCSD board of trustees took action, September 24, 2025, but not the date the Notice was provided to the CCSD board of trustees. (FOF #12) Even though CCSD's local regulations require the distribution of the report in the ordinary course of business within 24 hours of the violation, or as soon thereafter as the violation is discovered, and immediate provision to the CCSD board of trustees (FOF #13), upon consideration of the inconsistent documentation on the completion of the investigation of the aversive intervention (FOFs #8, #9); the delayed date of action by the board of trustees for almost a month after the incident (FOF #12); and the absence of documentation otherwise, NAC §388.215, the State Complaint Investigation Team determined CCSD failed to timely report the violation to the CCSD board of trustees.

Parental Notification

While counterintuitive and actually concerning, although a denial of rights of a student with a disability pursuant to NRS §388.471 to §388.515 must be entered in the student's cumulative record and a confidential file maintained, the reporting to a student's parent set forth in law for the use of a physical restraint or mechanical restraint in an emergency is not explicitly required for violations of the prohibited use of an aversive intervention. NRS §§388.501, 388.503. As such neither the IDEA nor Nevada law/regulation required parental notice of the incidence of an aversive intervention of a chemical restraint.

That said, the same day the aversive intervention was verified, August 27, 2025, the school principal notified Child Protective Services and an unnamed individual identified as the parent of the incident of aversive intervention by phone on August 27, 2025 and sent this individual the Notice on August 28, 2025. The Complainant identified the individual notified as the student's foster parent. (FOF #11) If indeed, consistent with the October 3, 2024 IEP, the EDM remained the legal parent of the student on August 26, 2025, in accordance with its own procedures, CCSD was required to notify the EDM of the incident of aversive intervention, not the foster parent of the student. Notwithstanding this possible violation of its own procedures, for purposes of this State Complaint, in the absence of a requirement for parental notification for a violation of the prohibited use of aversive intervention in NRS §388.471 to §388.515, CCSD did not violate the IDEA or Nevada law/regulation.

Corrective Plan

As previously mentioned, in accordance with NRS §388.508, the board of trustees of the school district where the violation occurred must develop, in cooperation with the superintendent of schools of the school district, a corrective plan to ensure that, within 30 calendar days after the violation occurred, appropriate action is taken by the school and the board of trustees to prevent future violations. The superintendent of schools of the school district must submit the plan to NDE for NDE's review to ensure that it complies with applicable federal law and the statutes and regulations of this state. CCSD did provide NDE notice that an aversive intervention had taken place on one day for this student and proposed a corrective plan with the detail only to conduct a training of the involved teacher and principal. NDE approved the training on that basis and the training was conducted. (FOFs #15, #17) In the course of the investigation, NDE requested documentation of any other corrective action taken other than the documented training relative to the determined need for personnel action in the Notice, and CCSD responded that there was no information to provide. (FOFs #8, #10)

On the face of it, CCSD technically complied with NRS §388.508 regarding developing and submitting a corrective plan to NDE by determining the student's teacher and the principal of the school would be required to attend a training on aversive intervention and submitting that plan to NDE. However, as previously discussed, NRS §388.513 requires the board of trustees or its designee to cause a full report to be prepared which must set forth in detail the factual circumstances surrounding the denial and a copy of that report must be provided to NDE. In this case, CCSD did not prepare a full report of the incident as required, which also meant NDE did not receive it. (FOF #10)

Given the absence of this full report, NDE's approval of the corrective plan was based on the withholding of critical information to enable NDE to ascertain the nature and impact of the denial of the student's rights and to review the corrective plan on that basis to ensure that it complies with applicable federal law and the statutes and regulations. The State Complaint Investigation Team agrees with the Complainant that, given the magnitude of this denial of the student's rights, a training, without more, was inadequate to prevent future violations. Solely on the basis of CCSD's technical compliance with NRS §388.508 regarding developing and submitting a corrective plan to NDE, the issue in this State Complaint, the State Complaint Investigation Team determined that the withholding of information and failure to develop and provide a full report of the factual circumstances surrounding the denial of the student's rights would be addressed in the Order of Corrective Action.

Therefore, in violation of NRS §388.497, a named CCSD employee used a prohibited aversive intervention of a chemical restraint, NRS §388.476, on the student from August 11, 2025 to August 26, 2025, specifically the administration of Nello Supercalm, a sleep aid; and failed to timely report the violation to the CCSD board of trustees. In the absence of a requirement to do so, CCSD did not fail to timely report the violation to the student's parent given the absence of such requirement in IDEA or NRS/NAC; and did develop and submit a corrective plan to NDE.

Issue Two:

- a. Whether a CCSD employee(s) used a prohibited aversive intervention of a physical restraint, NRS §388.494, on the student, except as otherwise provided in NRS §388.501, during the time period of August 13, 2025 - September 30, 2025.
- b. If a CCSD employee(s) used a prohibited aversive intervention of a physical restraint, NRS §388.494, whether CCSD complied with NRS §388.508 regarding:
 1. Timely reporting the violation to the CCSD board of trustees and, as applicable, the parent of the student, 34 C.F.R. §300.30; and
 2. Developing and submitting a corrective plan to NDE.
- c. If the described incidents of physical restraint occurred during the time period of August 13, 2025 – September 30, 2025, but met the conditions of an emergency under NRS §388.501, whether CCSD complied with:
 1. NRS §388.501, by providing a report to the CCSD board of trustees of the school district or designee of the use of the procedure and, if the board of trustees or designee determined that denial of the student's rights occurred, submitting a report to NDE in accordance with NRS 388.513.
 2. If there were five reports of the use of physical restraint on the student that met the conditions of an emergency during the cited time period in the 2025/2026 school year, whether the student's IEP was reviewed and, if physical restraint continued after the student's IEP was reviewed, additional methods appropriate for the student were included in the student's IEP to ensure that the restraint did not continue.

Physical Restraint

Pursuant to NRS §388.499 and §388.501, school district employees are prohibited from using physical restraint on a student with a disability unless an emergency exists that necessitates the use of physical restraint; the physical restraint is used only for the period that is necessary to contain the behavior of the student so that the student is no longer an immediate threat of causing physical injury to the student or to others or causing severe property damage; and the use of force in the application of physical restraint does not exceed the force that is reasonable and necessary under the circumstances precipitating the use of physical restraint. “Physical restraint” is defined as the use of physical contact to limit a person’s movement or hold a person immobile. NRS §388.494.

If a violation of NRS §388.499 occurs then the school is required to report the violation to the board of trustees of the school district not later than 24 hours after the violation occurred, or as soon thereafter as the violation is discovered and, as previously discussed, the board of trustees of the school must develop, in cooperation with the superintendent of schools of the school district, a corrective plan to ensure that within 30 calendar days after the violation occurred, appropriate action is taken by the school and the board of trustees to prevent future violations. NRS 388.508.

In this case, during the relevant time period of this State Complaint, between August 13, 2025, two days after classes began for students (footnote #1), and September 30, 2025, there were twelve incidences of the use of physical restraint on the student. (FOF #18) The student had five incidences of physical restraint by September 18, 2025, one on August 13, 2025, one on August 28, 2025, and three on September 18, 2025. (FOF #18(a) –(c)). All of the incidences of physical restraint were to protect the safety of others, protect the safety of the student, and/or to protect against severe property damage. (FOF #18) The Complainant did not contest the emergency nature of the physical restraints; the duration of any of the physical restraints; or the reasonableness/necessity of the amount of force and, consistently, the State Complaint Investigation Team did not see any documentation that inferred otherwise.

Therefore, the State Complaint Investigation Team determined, given the emergency exception, that CCSD did not use a prohibited aversive intervention of a physical restraint, NRS §388.494, on the student and was not required to comply with the reporting requirements in NRS §388.508. CCSD was, however, required to comply with the NRS §388.501 on actions to be taken if physical restraint is used on a student with a disability in an emergency. At issue in this State Complaint is the reporting to the CCSD board of trustees and the review of the student’s IEP after five physical restraints in the 2025/2026 school year as required by NRS §388.501.

Report to Board of Trustees or Designee

While there is a reporting requirement in NRS §388.501 on the use of physical restraint in an emergency, it does not include the 24-hour reporting time period to report to the board of trustees set forth NRS §388.508 for a violation of NRS §388.471 to §388.515. Rather, NRS §388.501(3) only provides a timeline for the emergency use of physical restraint to be reported in the student’s cumulative record and confidential file, not later than one *working* day after the procedure is used, and requires the copy of the report to be provided to the board of trustees *or* designee. If the board of trustees or designee determines that a denial of the student’s rights has occurred, the board of trustees or designee is then required to submit a report to the NDE. NRS §388.501.

As previously discussed, the Notice used by CCSD includes the date of the board of trustees or designee’s action, but not the date the board of trustees was provided the report. However, upon consideration of the

working/business days involved in all of the 12 incidences of physical restraint during the relevant time period of this State Complaint within which the board of trustees took action, the State Complaint Investigation Team determined the range of dates from 1 business day to no more than three business days substantiated a timely reporting in this case. Since the board of trustees determined there was no violation of the student's rights in the emergency use of the physical restraint for each incidence (FOF #18), no report was required to NDE. NRS §388.501.

IEP Review

NRS §388.501(5) requires a student's IEP to be reviewed in accordance with IDEA after five reports of the use of physical restraint in school year due to the existence of an emergency. If physical restraint continues after the student's IEP has been reviewed, the student's IEP must include additional methods that are appropriate for the student to ensure that the restraint does not continue, including, without limitation, mentoring, training, a functional behavioral assessment, a positive behavior plan and positive behavioral supports.

The student was physically restrained five times due to the existence of an emergency in the 2025/2026 school year on September 18, 2025. (FOF #18) (While three physical restraints of the student were on one day, September 18, 2025, there is no exception in NRS §388.501 for multiple restraints on one day.)

The first IEP Team meeting conducted after the student had been physically restrained five times was on October 20, 2025, more than a month after the fifth restraint and, in that subsequent interval the student had been restrained an additional seven times. (FOFs #18, #21, #23) The State Complaint Investigation Team noted that the purposes of the October 20, 2025 IEP Team meeting, as set forth in the meeting notices, were for the annual IEP and the IEP following a three-year evaluation. The only documentation of this IEP meeting being conducted to address the student's fifth restraint that occurred on September 18, 2025 was a comment on the student's developed IEP. (FOF #23)

NRS §388.501(5) does not include a timeline for the review of a student's IEP after the fifth restraint; therefore, the State Complaint Investigation Team has adopted the standard used by the Ninth Circuit Court of Appeals as forth in *J.G. v. Douglas County Sch. District*, 552 F.3d 786; 51 IDELR 119 (9th Cir. 2008): "...the ultimate and dispositive question is whether the District acted in a reasonable time." Similarly, the United States Department of Education, Office of Special Education Programs, has indicated: "When an explicit timeline is not specified in the IDEA or its implementing regulations, the Department interprets that the requirement will be met within a reasonable period of time. *Letter to Frumkin*, 79 IDELR 233 (OSEP September 24, 2021)⁹.

In this case, by waiting until the student's annual IEP Team meeting, CCSD failed to comply with NRS §388.501(5) in the review of the student's IEP in a reasonable period of time. The State Complaint Investigation Team finds this failure to timely comply particularly egregious given:

- The ensuing use of physical restraints, totaling 15 physical restraints by the date of the IEP Team meeting, that may have been avoided had the student's IEP been timely reviewed and revised in light of the student's conduct that resulted in the need for emergency physical restraints;

⁹ This policy letter from the United States Department of Education, Office of Special Education Programs can be publicly found at: [Policy Letter to Daniel Frumkin on establishing a timeline for providing access to a child's individualized education program \(IEP\) to teachers and service providers. \(PDF\)](#)

- The stark contrast in the student's behavior in the 2024/2025 school year as compared to the 2025/2026 school year (FOFs #2, #19, #20) and the fact that, notwithstanding the escalation in behavior, the student's 2024 behavior intervention plan was not revised until January 21, 2026; and
- By failing to timely review and revise the student's IEP, there was no consideration when the physical restraints continued whether additional methods needed to be included in the student's IEP to ensure that the restraint did not continue.

Therefore, a CCSD employee(s) did not use a prohibited aversive intervention of a physical restraint, NRS §388.494, on the student, since the exception was met under NRS §388.501; the reporting requirements, under NRS §388.508, therefore, did not apply; and CCSD did meet the reporting requirement to the CCSD board of trustees for the described incidents of physical restraint that met the conditions of an emergency under NRS §388.501.

However, CCSD failed to comply with the review of the student's IEP after five reports of the use of physical restraint on the student that met the conditions of an emergency during the cited time period in the 2025/2026 school year.

ORDER OF CORRECTIVE ACTION

In accordance with IDEA, 34 C.F.R. §300.151(b), in resolving a State Complaint in which the State Educational Agency has found a failure to provide appropriate services, the agency, pursuant to its general supervisory authority under IDEA Part B must address: (1) The failure to provide appropriate services, including corrective action appropriate to address the needs of the child; and (2) appropriate future provision of services for all children with disabilities.

In this case, both a student-specific and a systemic remedy are required. The Complainant's proposed resolution for determined noncompliance and CCSD's proposed resolution were considered by the State Complaint Investigation Team.

In accordance with NRS §385.175(6), NDE also requests a plan of corrective action (CAP) from CCSD on CCSD's plan to implement the ordered actions below, including the timeline. In order to expedite the effective implementation of a final State Complaint decision pursuant to IDEA, 34 C.F.R. §300.152(b)(2), and NAC §388.318(7), NDE has discontinued the CAP approval process. Instead, the Order of Corrective Action describes the specific actions that must be taken by CCSD to remedy the determined noncompliance, including the timeline pre-approved by NDE for compliance with IDEA and Chapter 388 of NRS/NAC. NRS §385.175(6). All ordered actions must be completed on or before the specified approved timeline to comply with the Order of Corrective Action set forth below. However, NDE's monitoring of CCSD's implementation of the Order of Corrective Action, and, if necessary, measures to be taken to ensure compliance pursuant to NRS §388.4354, will include consideration of the agency's CAP, if submitted, since, notwithstanding the specificity of the enforceable Order, the manner by which a public agency elects to implement the Order may vary from one agency to the other.

I. Systemic Action

Given the determined failure of CCSD to implement all requirements of NRS §388.471 - NRS §388.513 for both the aversive intervention/chemical restraint and the emergency use of physical restraint and upon

consideration of the magnitude of the violation to, presumably, control this student and seven other students' behavior through the unauthorized administration of a product, that was exacerbated by the failure to employ less restrictive alternative intervention techniques to limit or control the behavior, the following systemic action is ordered:

A.

1. No later than **July 23, 2026**, CCSD must provide the CCSD board of trustees:
 - a. A copy of this State Complaint Report;
 - b. The Notice for the aversive intervention/chemical restraint for the period of August 11, 2025 to August 26, 2025 for this student and for the other seven students identified in the September 22, 2025 principal's letter in a manner that ensures the confidentiality of the student and the other named students; and
 - c. The determined corrective action plan developed by the board of trustees in cooperation with the CCSD superintendent of schools of the school district pursuant to NRS §388.508 for this student and the seven other students to ensure appropriate action was taken by the school for this aversive intervention/chemical restraint and the board of trustees to prevent future violations.

Documentation of the implementation of this Order must be provided to NDE no later than 10 business days after completion.

2. No later than **July 23, 2026**, CCSD must provide NDE a copy of the CCSD's existing oversight/monitoring procedures to ensure compliance with all requirements of NRS §388.471 - NRS §388.513, including the corrective plan requirements in NRS §388.508; the applicability of disciplinary action provisions in NRS §388.506; and the reporting requirements in NRS §388.513.
3. Given the failure of CCSD to develop a full report pursuant to NRS §388.513 of the factual circumstances surrounding the denial of this student's rights and the other named students:
 - a. CCSD must develop a full report for each of the eight named students of the August 11, 2025 to August 26, 2025 use of Nello Supercalm by a teacher at the named school and no later than **August 3, 2026**, a copy of the report must be:
 - i. Provided to the CCSD board of trustees;
 - ii. Provided to NDE;
 - iii. Provided to the legal parent of each student, as well as any judicially appointed EDM, if not the legal parent;
 - iv. Entered in each student's cumulative record and the confidential file maintained for that student. (FOF #10)

Documentation of the implementation of this Order must be provided to NDE no later than 10 business days after completion

4. Given CCSD did not accurately state the dates the aversive intervention/chemical restraint occurred (FOF #15) and did not provide NDE a full report of this denial of rights for this student and the other seven students for consideration in the review and approval of the corrective plan for each student (FOF #10), upon receipt, NDE will review the full report

and the previously approved corrective plan to ensure that it complied with applicable federal and Nevada law and regulations and, notwithstanding the prior approval for the one date the generally described aversive intervention occurred. NDE may require appropriate revision of the plan to ensure compliance pursuant to NRS §388.508(3). If NDE determines the corrective plan must be revised, it is an enforceable plan and CCSD must ensure the school where the violation occurred meets the requirements of the plan. NRS §388.508(4).¹⁰

5. Given the failure of the student's school to comply with NRS §388.501(5) to review the student's IEP after five reports of the use of physical restraint due to the existence of an emergency within a reasonable period of time:
 - a. CCSD must revise the CCSD Special Education Procedures Manual, Section 12.4 or other section as appropriate, no later than **September 1, 2026** to add a requirement to convene a student's IEP Team within a reasonable period of time in compliance with NRS § 388.501(5) and NRS §388.503(5) when a student's behavior results in a restraint three times in the same school year and when the behavior results in a restraint five times in the same school year.
 - b. CCSD must notify all schools of this revision to the CCSD Special Education Procedures Manual no later than **September 15, 2026**. Due to the occurrence of the violation in the named school the student attended in the 2024/2025 school year, CCSD must also provide the named school a copy of this State Complaint Report and require the school to develop or revise its procedures, including tracking method, to prevent future violations no later than **September 17, 2026**.
 - c. No later than **September 15, 2026**, CCSD must also provide NDE the procedures by which CCSD will monitor schools' compliance with the requirement to convene a student's IEP Team in a reasonable period of time after the applicable number of restraints.

Documentation of the implementation of this Order, including the involved school's revised procedures and description of the tracking method, must be provided to NDE no later than 10 business days after completion

B. Pursuant to NRS §388.513, no later than **August 17, 2026**, NDE will commence the investigation of CCSD's system to ensure compliance with all requirements of NRS §388.471 - NRS §388.513, including the requirement to review the student's IEP if physical or mechanical restraint is used in an emergency after five reports. NRS §§388.501(5), 388.503(5).

Upon the receipt of CCSD's report required pursuant to NRS §388.515 on or before August 15, 2026 for the 2025/2026 school year, NDE will select schools with the highest proportion of incidences of aversive

¹⁰In the course of this investigation, NDE identified a fault in NDE's electronic data and review system, specifically the absence of an alert if a local educational agency failed to provide the required full report of the factual circumstances surrounding each denial of a student's rights in the use of aversive intervention, physical restraint and mechanical restraint on students with disabilities. NRS §388.513. At the time of this Report, NDE has already commenced a review its electronic data and review system to modify the system to ensure the system identifies and reports each incident where the required full report is not received by NDE and, if that occurs, to notify the involved local educational agency and order a copy of the report; and withhold the approval of any corrective plan until the full report is received and reviewed to determine the corrective plan complies with applicable federal and Nevada law and regulations. NRS §388.508(3).

intervention, physical restraint, and mechanical restraint in the 2025/2026 school year and, if not otherwise included, the school the student attended in the 2025/2026 school year, and conduct a review of CCSD's adherence to procedures set forth in NRS §388.471 - NRS §388.513 for randomly selected students. This review will be completed no later than **November 16, 2026** and, if noncompliance is determined, NDE will notify CCSD and the CCSD board of trustees of the determined noncompliance, if any, and request a plan of corrective action from the CCSD board of trustees pursuant to NAC §385.175(6).

CCSD must provide NDE designated personnel timely access to all requested policies, procedures and requested documentation to complete the above-described investigation.

II. Student-Specific Remedy

Whether the failure to provide the services in a student's IEP is a minor discrepancy or a material failure is relevant to the determination whether a student-specific corrective action is required to address the needs of the student. 34 C.F.R. §300.151(b). This is an individualized determination: "A material failure to implement an IEP occurs when there is more than a minor discrepancy between the services a school provides to a disabled child and the services required by the child's IEP..." and the services "...a school provides to a disabled child fall significantly short of the services required by the child's IEP." The student's educational progress, or lack of it, may be probative of whether there has been more than a minor shortfall in the services provided. *Van Duyn v. Baker School District*, 502 F.3d 811, 107 LRP 51958 (9th Cir. 2007).

Compensatory education is designed to provide the educational benefits that likely would have accrued to the student from special education services if they had been supplied in the first place. This is a fact-specific determination. *Parents of Student W. ex rel. Student W. v. Puyallup School Dist. No. 3*, 31 F.3d 1489, 21 IDELR 723 (9th Cir. 1994); *Reid ex rel. Reid v. District of Columbia*, 401 F.3d 516, 43 IDELR 32 (D.C. Cir. 2005). In compensatory education awards, there is no obligation to provide a day-for-day compensation for time missed. *Parents of Student W.* This approach for determining compensatory education is considered 'qualitative' in nature, rather than strictly 'quantitative' and requires that a compensatory education award be made not merely by establishing the amount of services which were not provided, but that an analysis be done to establish what may make the student whole for the denial of services.

A. Order One – Student

In this case, upon consideration of the totality of the situation, including the escalation in the student's behavior in the 2025/2026 school year as compared to the prior year (FOFs #2, #18 - #22); the failure to complete and implement the student's behavioral intervention plan until January 21, 2026 (FOF #3), the State Complaint Investigation Team determined that a student-specific corrective action that ensures the evaluation of the student's social/emotional/behavioral needs by a qualified provider at CCSD's expense; the review of the student's IEP based on the results of the assessment; and compensatory education in the area of social/emotional/behavioral to address the needs of the student is required.

Unless an alternative student-specific remedy is otherwise agreed to in writing by CCSD and the legal parent of the student¹¹, CCSD must:

¹¹ If CCSD and the student's legal parent agree to an alternative student-specific remedy, that written agreement must be submitted with the CAP and all required documentation in this Order applies to the implementation of the agreed-upon alternative remedy. If not the student's parent, and if applicable, the student's EDM must be included in any discussion of an alternative student-specific remedy.

1. Provide the student 57¹² hours of compensatory education in the form of behavior intervention services to compensate for any missed instructional time while being administered the Nello Supercalm. The services must be in addition to the services in the student's IEP in effect at the time; and be provided during school breaks or before or after school. The compensatory education must be provided in full no later than **April 1, 2027**. At CCSD's discretion, all or part of the services may be provided either by qualified personnel in CCSD's School-based Individual Intervention Services or by a qualified private Registered Behavior Technician (RBT) supervised by a Board-Certified Behavior Analyst (BCBA).

Documentation of the completion of the compensatory education must be provided to NDE within 10 business days of its completion.

2. Evaluation. Conduct an evaluation of the student's social and emotional condition, including behavior, to be completed no later than **August 28, 2026**. (FOF #22) While the assessment may include another functional behavioral assessment, the assessment must be a comprehensive assessment of the student's social/emotional/behavioral needs. (This assessment may not reduce the 57 hours of ordered compensatory education.) At CCSD's discretion, the social/emotional/behavioral assessment can be conducted by qualified CCSD personnel or by a qualified private provider.

3. IEP Review. No later than **September 3, 2026**¹³, the student's IEP Team, including the student's legal parent and, if applicable, the student's EDM, must review,¹⁴ at minimum, the results of the social/emotional/behavioral assessment of the student; the incidence of any student misconduct after the implementation of the January 21, 2026 behavior intervention plan; any specific incidences of physical restraint from October 20, 2025 up to September 2, 2026; and the student's progress toward meeting the student's three goals in the area of social/emotional/behavioral in the student's November 24, 2025 IEP. Based on that review, the IEP Team must consider additional methods that are appropriate for the student to ensure that the restraint does not continue, including, without limitation, mentoring, training, another functional behavioral assessment if indicated; a revised positive behavior plan and positive behavioral supports (in addition to the ordered compensatory education for past noncompliance); and whether the IEP goals and/or services enable the student to attain the goals in the area of social/emotional/behavioral and, if not previously addressed, consider revision of the student's IEP, including whether the support of the de-escalation training of staff involved with the student at the student's current school is required. (FOF #22)

CCSD must provide the following documentation to NDE within 10 business days of the completed conduct of the evaluation of the student's behavior and review of the student's IEP:

- Documentation of the conduct of the social/emotional/behavioral assessment;
- The IEP Team meeting notice(s) to ensure the student's legal parent and, if applicable, the student's EDM, had the opportunity to participate;
- Documentation of the student's parent's, and, if applicable, the student's EDM's, participation in the review of the student's IEP;

¹² This amount was calculated based on the number of minutes per day the student was in the location of the teacher's classroom based on the IEP in effect at the time of the aversive intervention: 283 minutes per day or 1415 minutes per week times the 12 days the student was administered Nello Supercalm equals 3396 minutes or 56.6 hours, rounded up. (October 3, 2024 IEP)

¹³ If this date does not provide the student's legal parent and, if applicable the student's EDM, the opportunity to participate at a mutually agreed on time and place, the documentation provided NDE after the conduct of the IEP meeting must include documentation of CCSD's attempts to schedule the meeting to occur by September 3, 2026 and the agreed upon date.

¹⁴ Pursuant to IDEA, 34 C.F.R. §300.324(a)(4) and NAC §388.281(7)(a), if applicable, the parent of a student and CCSD may agree to revise the student's IEP without convening a meeting, so long as the review required in this Order takes place in that process.

- The IEP Team's consideration of the above ordered factors in the review and the social/emotional/behavioral assessment and the IEP Team's determination;
- The Prior Written Notice issued after the review; and,
- If the student's IEP is revised, a copy of the revised IEP.

If CCSD cannot convince the student's parent, and, if applicable, the student's EDM, to attend the IEP Team meeting, the documentation provided to NDE must be consistent with IDEA, 34 C.F.R. §300.322(d).

B. Order Two - The Seven Named Impacted Students

1. By August 3, 2026, along with the above-ordered provision of the full report to the parents of each of the seven other named student who were also administered Nello Supercalm from August 11, 2025 to August 26, 2025¹⁵, CCSD must offer to provide 57 hours of compensatory education for each of the seven other impacted students in the form of behavior intervention services to compensate for any missed instructional time while being administered the Nello Supercalm. (FOF #14)

2. Unless an alternative student-specific remedy is otherwise agreed to in writing by CCSD and the parent of a student, CCSD must provide 57 hours of compensatory education to each of the seven other impacted students in the form of behavior intervention services. The services must be in addition to the services in the student's IEP in effect at the time; and be provided during school breaks or before or after school and, if a behavioral evaluation of the student is required prior to the provision of the behavioral intervention services, the evaluation must be provided at no cost to the student's parent and may not reduce the 57 hours of compensatory education. The compensatory education must be provided in full no later than **April 1, 2027**. At CCSD's discretion, all or part of the services may be provided either by qualified personnel in CCSD's School-based Individual Intervention Services or by a qualified private Registered Behavior Technician (RBT) supervised by a Board-Certified Behavior Analyst (BCBA).

Documentation of the completion of the compensatory education must be provided to NDE within 10 business days of its completion.

3. If, at any time after the receipt of the provision of the full report to the parents of each of the seven other named student who were also administered Nello Supercalm from August 11, 2025 to August 26, 2025, and prior to the ordered completion date for the compensatory education, a student's parent expressly declines/refuses the service, which is their right, or does not cooperate by making the student available to receive the compensatory services through CCSD's determined means to enable completion by April 1, 2027, CCSD is relieved of the Order to provide that student the ordered hours of compensatory education of behavior intervention services, or of the remaining hours, if the services commenced, and thereafter the student's parent does not make the student available for the provision of the compensatory services or refuses completion of the compensatory services.

4. The required CCSD documentation to be provided to NDE in the event CCSD attempts to implement this Order and is unable to do is: documentation of the offer to provide the ordered compensatory education

¹⁵ Given the school did not distinguish the administration time period for this student and the other students (FOF #14), the State Complaint Investigation Team concluded the administration was the same time period for all of the students; that is August 11, 2025 to August 26, 2025. However, the individual Notices for the seven other impacted students were not available during the investigation of this student-specific State Complaint. Therefore, if the Notice for any individual student has a time period of administration that is less than the time period of August 11, 2025 to August 26, 2025, the ordered 57 hours may be reduced accordingly by 283 minutes per day (see footnote 13) and that amount will be the ordered amount **if CCSD provides NDE documentation of the Notice for any such individual no later than August 3, 2026**.

services and the parent's receipt of the offer; either the parent's refusal of the services, including the date, or, if the parent does not make the student available to receive the services during the ordered time period, documentation of CCSD's repeated efforts to make the services available to the student and the parent's response; and after those repeated efforts, documentation of CCSD's notice to the parent that services will be discontinued on a date specific, unless the student's parent notifies CCSD in advance of that date that the parent accepts the ordered compensatory services and will make the student available on the dates in CCSD's plan. The documentation must be consistent with IDEA, 34 C.F.R. §300.322(d). (If any delay in the parent's cooperation/acceptance of the ordered compensatory education services reduces the time period by which the services must be provided by more than three months, the amount of service hours may be reduced proportionally.)

5. IEP Review. For any of the seven named impacted students still enrolled in CCSD for the 2026/2027 school year, no later than **September 3, 2026**¹⁶, the student's IEP Team, including the student's parent, must review¹⁷ the student's most recent IEP in accordance with IDEA, 34 C.F.R. §300.324, including the consideration of the concerns of the parent for enhancing the education of the student, and the review of the student's progress toward meeting the student's annual goals and the determination whether the IEP goals and/or services enable the student to attain these goals should be revised.

CCSD must provide the following documentation for each student to NDE within 10 business days of the completed conduct of the review of all of the seven impacted students' IEPs:

- The IEP Team meeting notice(s) to ensure the student's parent had the opportunity to participate;
- Documentation of the student's parent's participation in the review of the student's IEP;
- The IEP Team's consideration of the factors in IDEA, 34 C.F.R. §300.324 and the IEP Team's determination;
- The Prior Written Notice issued after the review; and,
- If the student's IEP is revised, a copy of the revised IEP.

If CCSD cannot convince a student's parent to attend the IEP Team meeting, the documentation provided to NDE must be consistent with IDEA, 34 C.F.R. §300.322(d).)

¹⁶ If this date does not provide a parent of a named student an opportunity to participate at a mutually agreed on time and place, the documentation provided NDE after the conduct of the IEP meeting must include documentation of CCSD's attempts to schedule the meeting to occur by September 3, 2026 and the agreed upon date.

¹⁷ Pursuant to IDEA, 34 C.F.R. §300.324(a)(4) and NAC §388.281(7)(a), if applicable, the parent of a student and CCSD may agree to revise the student's IEP without convening a meeting, so long as the review required in this Order takes place in that process.