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I. INTRODUCTION

Disability Rights California provides state-wide clients’ rights advocacy services for regional center clients under a multi-year contract, HD119002, with the Department of Developmental Services (DDS) through the Office of Clients’ Rights Advocacy (OCRA). The contract was renewed effective July 1, 2016, for this 5-year period ending June 30, 2021. OCRA is in the fourth year of this five-year contract. This semi-annual report covers July 1, 2019, through December 31, 2019.

Between July 1, 2019 and December 31, 2019, OCRA handled 5,444 issues for 3,900 clients, which continues to be well over the 30 per month, per office, required by contract. OCRA staff continue to handle a variety of legal issues with positive results. OCRA also participated in 259 trainings during the 6-month period, presenting to approximately 10,638 people. See section II.A.4 for details.

OCRA operates offices throughout the state, most of which are staffed by one Clients’ Rights Advocate (CRA) and one Assistant CRA. This enables our staff to be accessible to and best understand the local community. Most OCRA offices are near the regional center office. OCRA has increased access to its services by using “floating” CRAs and ACRAs to help busier offices handle cases. OCRA also formed a new group of dedicated staff to coordinate our Outreach efforts. A Managing Attorney oversees the new Supervising Attorney, who supervises one Outreach Coordinator and one Peer Advocate in southern California. We are recruiting for a second Peer Advocate or Peer Trainer for northern California.

OCRA continues to assist people moving from restrictive settings like developmental centers and IMDs into the community. OCRA has three full-time “Community Integration CRAs” in northern, southern, and central California, who are supported by one Assistant CRA statewide. These staff provide direct advocacy to clients in restrictive settings or at risk of losing community placement, trainings to entities and professionals serving these clients, technical assistance to public defenders and other advocacy professionals, and participation in systemic meetings involving community integration and service to clients. Local CRAs also handle these cases and trainings. A list of the current staff and office locations is attached as Exhibit A.
II. PERFORMANCE OBJECTIVES

Disability Rights California’s contract with DDS requires performance objectives as established in Exhibit A, Page 14, Paragraph M, of the contract. Each of the specific required outcomes is discussed in the following Sections A through F. The contract does not set specific numbers for the performance outcomes.

A. Services are provided in a manner that maximizes staff and operational resources.

OCRA continues its tradition of serving many people with developmental disabilities. OCRA handled 5,444 issues for regional center clients during this 6-month period, which is more than the 4,928 during the same period last year. OCRA served 3,900 clients during this semi-annual review period, which is more than the 3,619 served during the same reporting period last year. One reason for the higher number could be OCRA’s significant involvement with clients moving into the new models of care such as Enhanced Behavioral Supports Homes. See below for more information on OCRA’s work with clients in restrictive settings and the new models of care.

OCRA successfully represented and educated people on many legal issues and helped to remedy systemic problems. The statistics, attached as Exhibit B and discussed below, show the wide variety of issues and the many cases handled by OCRA staff. The advocacy report, covering July through December, 2019, included as Exhibit C, tells the stories and the impact our work has had on clients’ lives.

1) Advocacy Reports.

OCRA’s effective service to the community and the impact of that work is best demonstrated in advocacy stories. Advocates regularly submit summaries of cases or outreaches with practical value and that demonstrate a good outcome or teach a lesson. The examples also show the wide variety of legal issues handled by OCRA. Many of these stories reflect resolution of systemic problems through high-level direct representation, while others are resolved through negotiation because of collaborative relationships. In an effort toward brevity, the stories are just a sampling of the cases that OCRA handled. A longer Advocacy Report is
available upon request. The summaries from July 2019 through December 2019 are compiled and attached as Exhibit C.

OCRA posts advocacy reports and other success stories on our website and social media regularly. These stories are a quick and easy way for DDS and the public to see examples of our work and better understand the rights of people with disabilities. OCRA staff focus on cases where there are no other advocacy resources the client can access, such as cases other attorneys do not handle. We provide different levels of assistance to solve callers’ problems. This assistance can be a phone call, a letter, attending a formal meeting like an Individualized Education Plan (IEP) or Individual Program Plan (IPP), or representing the person at a hearing. In this report, we demonstrate the variety of cases that we handle each reporting period. Here are four examples of OCRA’s different kinds and levels of advocacy.

**Joey is Granted a Reasonable Accommodation to Protect His Privacy.**

Joey requires accommodations to support him in school. Joey’s mother called OCRA because she had concerns about Joey starting middle school. Joey has a history of being bullied, specifically because he wears diapers. His mother was worried that because the middle school requires students to change into their physical education uniforms in the locker room, students would tease Joey if they saw he wears a diaper. OCRA advocated for Joey at his IEP meeting and requested that Joey use a private restroom by the nurse’s office. The school agreed to the accommodation. Joey can change into his physical education uniform privately and his mother shared that he is happy and looking forward to going to school each day.

**Client Moves from Skilled Nursing Facility to Community Placement.**

OCRA collaborated with the regional center to ensure clients living in skilled nursing facilities (SNFs) had the opportunity to move back to the community. The regional center told OCRA about Jose, who had lived at a local SNF for many years after sustaining an injury. Although Jose needed skilled care after the injury, he no longer needed to live at a SNF and could be served at a group home in the community. OCRA met with Jose, who said he wanted to move, and requested an IPP meeting with the regional center. At the meeting, OCRA advocated for Jose to move back into the community. Though Jose’s family was opposed to him leaving the SNF,
Jose still wanted to move. After many months, the regional center found a community placement at a group home for Jose. The group home is brand new and has only three other residents, as opposed to the SNF which had over 50 other residents. Jose moved into the group home and now has more individualized support and goes on community outings, such as to the mall which he enjoys.

**Samuel Is Found Eligible for Zero Share-of-Cost Medi-Cal.**

Samuel has autism and an intellectual disability. He received Social Security SSI benefits and no share-of-cost Medi-Cal for years. In 2007, Samuel’s father became eligible for Social Security benefits and as a result, Samuel’s SSI benefits changed to Disabled Adult Child (DAC) benefits. In 2018, the county redetermined Samuel’s Medi-Cal eligibility and charged him with a large monthly share-of-cost. Samuel filed an appeal. OCRA represented Samuel at a hearing, arguing he was eligible for zero share-of-cost Medi-Cal under a special Medi-Cal program for people receiving DAC benefits. After considering the evidence, the administrative law judge found in Samuel’s favor and found him eligible for zero share-of-cost Medi-Cal, retroactive to 2017.

**Julie Returns to Work and Received Back Pay**

Julie has a job with an employment services program. Julie’s apartment got bed bugs and Julie worked with her regional center service coordinator to hire a pest extermination company to kill the bugs. Julie had to stay home from her job because of the bed bugs but anticipated returning to work once the exterminators visited and she got a doctor’s note. However, Julie’s work would not allow her back until the pest control service confirmed her home was free of bed bugs. The pest control service would not provide a 100% guarantee that the bugs were eradicated, Julie contacted OCRA to advocate for her return to work. OCRA investigated the employment service policies and found no substantial reason to prevent Julie from returning to work. OCRA spoke with Julie’s employer and explained she had done everything she was supposed to do, and they should let her come back to work. Julie returned to work and received back-pay for 6 weeks of lost wages the employer refused to allow her to return.
2) Analysis of Clients Served.

OCRA handled 5,444 cases from July 1, 2019 through December 31, 2019. Exhibit B contains the complete compilation of data for the fiscal year.

The data has been compiled by:

1. Age
2. County
3. Disability
4. Ethnicity
5. Race
6. Gender
7. Living Arrangement
8. Type of Problem (Problem Codes)
9. Service Type

The reports included here are in non-table format so they are accessible to individuals who use screen-readers. Although the data is still contained in grids, each row of the chart is self-explanatory as read from left to right and does not require the navigational reference of a table header row for context.

The largest percentage of clients served by age were age 4 to 17, at about 39 percent of clients served. This is slightly lower than the last semi-annual review period, which was 40 percent. This reflects at parents or caregivers of children with developmental disabilities are the most frequent callers to OCRA. The next largest was the 23-40 age group with 25.5 percent, higher than the 24.5 percent in the previous semi-annual report. OCRA clients 51 years of age and older account for 10.8 percent of clients. While the DDS Fact Book uses different age ranges, the ages of clients served by regional centers are similar to those served by OCRA.

For cases where gender is recorded, as in the past, OCRA served more males than females, with 65.5 percent of the clients served identifying as male and 34.5 percent identifying as female. These numbers continue to be consistent with the gender percentages served by regional centers, according to the DDS Fact Book, 16th Edition. The Fact Book attributes the gender imbalance partly to the increase in individuals with an Autism diagnosis, currently over 80 percent male.
Statistics on the ethnicity of clients served for this first half of the year show OCRA’s continuing commitment and success in serving underserved communities. For example, 42.4 percent of clients served by OCRA identified as Hispanic/Latino. This is a percentage higher than OCRA served during last year’s semi-annual period, and higher than the 38.9 percent of Hispanic/Latino regional center clients in January 2018, taken from the DDS Fact Book, 16th Edition.

African-American and Asian client data is in the report for “race,” which is separated from “ethnicity” in our reporting system. African-American clients represent 8.9 percent of regional center clients and 8 percent of clients served by OCRA. This is a decrease in African-American clients served by OCRA from last semi-annual reporting period at 9 percent.

Asian clients make up 6.9 percent of regional center clients, but a higher 8 percent of clients served by OCRA. This is slightly lower than last semi-annual period’s 8.5 percent. OCRA staff continue to do outreach targeted to underserved communities. Offices have targeted the African-American, Asian, Latino, and Native American communities in their outreach plans and have had success in building meaningful relationships in those communities by increasing people served. OCRA is now in the first year of two-year outreach plans. See section A.4 for more details on outreach plans.

During this review period one year ago, OCRA changed the categories of living arrangement in its case management database to streamline the choices and remove unused or duplicate types of living arrangements. Clients residing in the family home remains by far the largest number of service requests for clients served by OCRA, with 3,916 service requests showing clients living in the family home or 71.9 percent of the cases handled. This percentage is slightly higher than OCRA’s last semi-annual report and is lower than the regional center percentage of clients served in this living arrangement, at 79.1 percent, cited in the DDS Fact Book, 16th Edition. As in previous review periods, the next largest group served by OCRA are those living independently, with 612 service requests or 11.2 percent with this living arrangement. This is slightly higher than last year during the same period and higher than the regional centers’ 8.2 percent of clients living in ILS/SLS.

OCRA has been serving fewer people whose living arrangement is developmental centers because most clients in developmental centers
have moved into the community. OCRA handled 91 service requests for clients whose living arrangement was developmental center, or 1.6 percent of service requests. Only 0.2 percent of regional center clients live in Developmental Centers per the recent Fact Book. See section A.3 below for OCRA’s involvement with community integration for clients.

3) Analysis of Clients Assisted with Moving to a Less Restrictive Living Arrangement.

In anticipation of developmental centers closing, the law changed to require regional centers to notify OCRA about people living in restrictive settings such as developmental centers, IMDs, and MHRCs, and people whose community placements are at risk of failing. These laws also require regional centers to send OCRA comprehensive assessments and meeting notifications for clients in these restrictive settings, as well as clients in Enhanced Behavioral Support Homes (EBSHs) and Community Crisis Homes (CCHs) as they open and clients move in. Statewide, OCRA staff have been contacting providers of EBSHs and CCHs to discuss clients’ Individual Behavior Support Team (IBST) meetings, review clients’ behavior plans as part of the team, and ensure clients’ rights are respected. It is important to maintain a relationship with the administrators and staff of these homes now serving clients formerly in restrictive settings for much of their lives.

Effective July 1, 2019 the law was amended to require regional centers to notify OCRA about additional situations: clients whose 6500 commitments are expiring or have a hearing scheduled; clients under a 5250 or higher-level commitment; clients for whom a petition is filed for a Lanterman Petris-Short (LPS) conservatorship; and clients who have been referred to Porterville Developmental Center for any reason or commitment.

Assistance or representation in cases involving restrictive settings can include reviewing records, interviewing and developing a relationship with the client, attending a variety of meetings, negotiating through phone calls, drafting and filing documents for court, attending court dates, and advocacy for movement back to the community or additional services to stay in the community.

Assistance or representation for the new notifications to OCRA about 5250 holds or 6500 commitments include speaking with the client about their wishes, reviewing records, and speaking with the client’s public defender,
service coordinator, family members, or home administrators about possible living arrangements and services, attending discharge planning meetings, or attending court. OCRA staff often educate about and advocate for the least restrictive environment. Though OCRA received some 6500 and 5250 notifications, not all regional centers have sent them. OCRA created a chart for regional centers to use as a quick guide about notifications to send, and will continue working with regional centers about this responsibility. OCRA received one notification during this period about an LPS conservatorship. Although regional centers are not required to send 5150 notifications, some do. OCRA handled 40 cases where a regional center consumer was held in an emergency room under a 5150 or 5250 and worked with the hospital and regional center to help the consumer access community services.

Since most clients have moved out of developmental centers, regional centers send fewer comprehensive assessments overall. They do send comprehensive assessments for clients in Porterville Developmental Center, IMDs and MHRCs, and 4418.7 assessments when a client’s community placement is at risk of failing. OCRA staff regularly review these assessments and Individual Behavior Supports Plans (IBSPs) for clients who live in EBSHs and CCHs. During this review period, OCRA staff reviewed 96 assessments and IBSPs.

OCRA staff attend a variety of meetings – Individual Program Plan meetings, Semi-Annual Review meetings, Transition Planning Meetings, Transition Review Meetings, 5-day and 30-day meetings held after a client is placed in the community, deflection meetings, meetings with potential providers, Individual Education Program meetings, Individual Behavior Support Plan meetings for clients in EBSHs and CCHs, among others. During a single “case,” OCRA staff may attend each IPP and transition meeting for a client in an acute crisis unit at a developmental center, and then attend one or more meetings once they move into their new home in the community. During this review period, OCRA staff attended 214 meetings on behalf of clients in developmental centers or IMDs, who were at risk of losing their community placements, or who had moved into EBSHs and CCHs. OCRA staff have attended 12 court hearings for clients in restrictive settings during this review period.

OCRA has a team of three community integration CRAs and one Assistant CRA. We are currently recruiting for another CRA for this team. This team directly represents clients and assists local CRAs with these often-difficult
cases. The community integration CRAs have formed relationships with and provide training or technical assistance to regional centers, developmental centers, IMDs, public defenders, public guardians, family members, and other stakeholders to discuss systemic concerns with restrictive settings and placement issues. The expertise of this team is a good resource for other OCRA staff. They help address barriers local CRAs are facing in all parts of the state. Here is one advocacy story highlighting how a client achieved community integration.

**Evan Finds Successful Community Placement.**

Evan was in a locked area at a developmental center for nearly four years. OCRA learned about Evan through the regional center’s developmental center liaison. Evan’s team initially identified a community home but the District Attorney argued that Evan needed a home with delayed egress features, which are physical features that delay a resident from leaving the house. Because an opening in this type of home was not yet available, this requirement would delay Evan’s chance to leave the institution. OCRA provided technical assistance to Evan’s Public Defender. At the court hearing, the District Attorney continued to argue that Evan needed a home with delayed egress features, despite Evan’s entire team explaining it was unnecessary. The judge agreed with the Public Defenders and OCRA’s reasoning and found that Evan’s community placement did not require delayed egress and upon discharge and Evan moved into a beautiful home near his hometown. OCRA attended Evan’s 30-day IPP meeting in person, where Evan expressed that he liked the home very much.

**4) Outreach/Training.**

Outreach and Training serve two important purposes: 1) notifying people about the availability of OCRA assistance and 2) educating people about the law and their rights. OCRA provides training on numerous issues to a wide variety of people. Training topics include clients’ rights, abuse and neglect issues, IHSS, Medi-Cal, special education, voting rights, Social Security benefits, rights in the community, alternatives to conservatorships, self-determination, and other topics. Training audiences include direct clients, family members, regional center staff and vendors, and community members.

During this 6-month review period, OCRA presented at 259 trainings with a total attendance of approximately 10,638 people at the various trainings.
This represents a decrease in the number of trainings, but a significant increase in people OCRA reached through trainings, from the last semi-annual report. See section II.F for details.

To assist individuals from traditionally underserved communities, OCRA has developed target outreach plans. Each OCRA office targets at least six outreaches per year to a specific underrepresented group in the office’s catchment area. These are two-year plans based upon evaluating prior outreach plans’ results, new census data, a review of regional center purchase of service data, and the race and ethnicity of clients served by each regional center. This semi-annual report covers six months of a two-year outreach cycle that ends June 30, 2021.

OCRA has formed a new unit specifically for Outreach, which has one Managing Attorney, one Supervising Attorney, one Outreach Coordinator, and one Peer Advocate in southern California. OCRA plans to hire another Peer Advocate or Peer Trainer for northern California to help develop new and innovative trainings. This unit plans to hold its own Spanish language conference in southern California for clients and family members in June 2020. This unit will also provide support to local OCRA offices for their outreaches and projects. They will advise staff on implementation of their target outreach plans. A detailed report on outreach and training is included as Exhibit D.

**B. Issues and complaints are resolved expeditiously and at the lowest level of appropriate intervention.**

From July 1, 2019, through December 31, 2019, OCRA resolved 5,444 issues for clients. Of those, all but 17 were resolved informally. Over 99 percent of all the matters that OCRA handled were resolved without using administrative hearings or court proceedings. Data showing this is attached as Exhibit E.

**C. Collaborative and harmonious working relationships are fostered.**

OCRA staff continue to collaborate with the local regional centers, stakeholders, and community members. Some examples of collaboration include serving on regional center diversity committees, disparity task force meetings, Bioethics Committees, Behavioral Modification Review Committees, Risk Assessment Committees, County Coordinating Councils,
Supported Life Training Planning Committees, meetings with counties about benefits, services, and appeals issues, IHSS Statewide Advocates’ Meetings, DS Taskforce Implementation Workgroups, UCEDD CACs, State Hearings Division Stakeholder meetings, Fiesta Educativa planning committees, Health & Wellness Committee-Forensic Task Force, Criminal Justice Task Force, Multi-Agency Advisory Board (MAAB), Healthcare Task Force, Adult Transition Task Force, Resident Transition Advisory Group, Quality Management Advisory Group, and liaison meetings for the developmental center closures/transition, among others.

All CRAs participate in their regional centers’ Self-Determination Program Local Advisory Committee meetings. Many OCRA staff provide training to regional center staff and vendors on topics such as clients’ rights, OCRA services, or a substantive area of the law such as Social Security benefits. OCRA staff meet regularly with regional center staff and community partners to spot trends, share experience and expertise, and collaborate on many subjects. Many regional center staff have made OCRA their primary contact if one of their clients has a legal issue.

This philosophy of collaboration is not only incorporated into Disability Rights California’s contract with DDS, but is also a recognition that some of the most effective advocacy takes place because of interpersonal relationships and informal advocacy. The success of this philosophy is demonstrated by the number of calls OCRA receives from varied sources, its ability to resolve matters informally, and its recognition as an excellent resource for people with developmental disabilities and their families.

1) Memorandums of Understanding.

OCRA has established Memorandums of Understanding (MOUs) with each regional center that address the center’s individual needs, concerns, and method of operation. Generally, MOUs are updated as needed. However, changes to the law mean that MOUs may be reviewed and meetings held or scheduled. These meetings have been productive and positive. OCRA has very good working relationships with most regional centers. During this review period, OCRA and these regional centers updated their MOUs: North Los Angeles County Regional Center and Valley Mountain Regional Center. OCRA met with other centers to update the MOU, and they will be executed once OCRA receives final signatures. OCRA has forwarded copies of all MOUs to DDS. The status of each revised MOU is listed in Exhibit F.
**2) Meeting with Association of Regional Center Agencies (ARCA).**

ARCA and OCRA meet regularly to discuss various issues. Katie Hornberger, OCRA Director, and often Catherine Blakemore, DRC Executive Director, met with ARCA several times during this review period: 9/11/19, 10/28/19, and 10/31/19. ARCA and OCRA also serve on committees together and regularly discuss current issues.

**D. Clients and families are satisfied with the services provided.**

Disability Rights California recognizes the importance of client satisfaction. OCRA is committed to serving clients and family members in a manner and with results that ensure client and family satisfaction with the services provided. Survey results show positive client satisfaction over the past semi-annual review period.

**1) Client Satisfaction Survey.**

OCRA measures client satisfaction by a survey developed jointly by staff, the OCRA Advisory Committee, and DDS. Eleven hundred and eighteen (1,118) surveys were mailed out. Two hundred and seven (207) people returned surveys. This represents a 19 percent return rate, which is higher than the 16 percent return rate from the last semi-annual review period.

Of those responding to the questions, 96 percent of the respondents who answered the questions felt they were treated well by the staff, which is slightly higher than last year during this review period. One respondent said, “Ms. Gillespie and Ms. Tellez treated us very well. Both are very educated on children’s rights and we felt comfortable talking to them.” 86 percent of the respondents believed their call was returned within two days, which is lower than last year during the same reporting period. One respondent said, “Aimee always returns my call quickly answers all the questions I asked she was very helpful. We feel very confident to work with her.” 91 percent of the respondents reported that they understood the information they received. This percentage is lower than last year during the same period. One person wrote, “There is one thing we need to let you know that your program is great. Mrs. Celeste Palmer is so wonderful about helping us to really understand many important things. We can’t compliment enough, Thank you very much.”
During this reporting period, 94 percent of respondents felt their Clients’ Rights Advocate listened to them, the same as last year. One responded wrote, “OCRA is an amazing group of folks that are always very kind and thoughtful, great listeners and oh so helpful every time I work with them (smile face).” 87 percent of respondents felt they were helped with their question/problem, which is lower than last year during this period. Respondents said, “I appreciate the help from OCRA, I always get answers to my questions! Thank you!” and “Annie B. is very helpful. She is amazing! All my questions/concerns are answered!” Finally, 92 percent of respondents said they would ask their Clients’ Rights Advocate for help again, which is higher than last time. One respondent wrote, “I received great services from OCRA, And I would like for them to help me again in the near future if any problem is arise again.”

These satisfaction numbers are similar to the last semi-annual review period, with some percentages slightly higher and some slightly lower. To remedy concerns of any unhappy callers, a member of the OCRA management team calls back all responders who either request a call back or made any negative responses and supplied their contact information. See Exhibit G, which discusses the results of OCRA’s survey.

2) Letters of Appreciation.

OCRA clients and family members often take the time to write letters of appreciation. These kind words and the time people take to send them represent the high value of the work performed by OCRA staff. Below is just a sampling of the many letters received. OCRA is providing the letters of appreciation with the wording from the originals, including any grammatical errors, unless otherwise indicated. We have also redacted client names.
Hello Paula & Nubyaan

I would like to thank you for your quick response and help with the city of South Gate on making the sidewalk safe for ______. A very positive outcome.

Once again thank you. Sincerely

Thank you for helping me out to get my SSI back, Merry Christmas Happy New Year 2020 from friend (smile face)
Thank you for your incredible contribution to making the Taking Charge self-determination conference such a success. We have received extremely positive feedback about all of the speakers, with attendees saying that what they learned was “life-changing,” “grounded me in self-determination,” and “I’m ready to start the program now.”

Mrs. Jacqueline Miller

Thank you very much for all the help I received from you to resolve my concerns about my daughter’s services. I am very greatful for all your help

Thank you
2/21/19 Hi Jennifer –

It was such a pleasure to meet you and Samantha this morning. You and Samantha seriously dropped out of the sky like angels for me!!

Typed and Translation:

Solamente para agradecerle lo mucho que usted me ayudó, muchas gracias por la gran ayuda que recibí de usted. Agradezco por ayudarme a resolver mis preocupaciones acerca de los servicios de mi hija. Muchas gracias.

(Just to thank you for how much you helped me, thank you very much for the great help that I received. I appreciate you for helping me resolve my concerns about my daughter's services. Thank you.)
gets to keep his IEP placement. Once more a big “Thank You” to Clients Rights Advocacy specially Filomena Alomar and their attorneys [sic] who have educated me over the years to stand up for my son and make legal claims for him and eventually to get for him what he needs.

3) Cases will be handled in a timely manner.

Clients and families contact OCRA because something has gone wrong for them. Maybe they are losing a government benefit, are being forced to move to a new more restrictive environment, or are facing another urgent situation. Therefore, OCRA staff should be responsive. OCRA has, since its establishment, had a policy that all calls will be returned as soon as possible, but not later than the close of the next business day. OCRA staff note this policy on the outgoing voicemail message that callers hear when reaching the office voicemail.

OCRA measures its performance in this area by its client satisfaction survey; see Exhibit G, discussed more above. OCRA statistics shows that 86 percent of all callers to OCRA received a call back within two days during this review period. This is a decrease from the same reporting period last year, though still the majority of callers. OCRA uses floating CRAs and ACRAs to handle calls in offices with a high call volume or when the local staff are out of the office. Staff also use electronic call logs to improve timeliness and client satisfaction.

Once the caller completes an intake and a case is open, OCRA ensures the timely progression of each case by using ensuring internal timelines are met. OCRA supervisors work with staff to track each case to see how many days it has been open and how many days it should be open, given the timelines. For example, a case under the category “Information and Referral” should be resolved within 7 calendar days. For this type of case,
OCRA staff provide information, such as publications, and/or a referral to another legal aid organization, attorney, or resource. The 7-day timeline ensures the caller gets this information and referral timely. The OCRA Office Manager runs a report each month, as a check and balance, to show each case’s number of days open and any that need immediate attention.

E. **The provision of clients’ rights advocacy services is coordinated in consultation with the DDS contract manager, stakeholder organizations, and persons with developmental disabilities and in their families representing California’s multi-cultural diversity.**

OCRA works through the OCRA Advisory Committee to ensure this performance outcome is achieved. Attached as Exhibit H is a list of the members of the Disability Rights California Board of Director’s OCRA Advisory Committee effective December 31, 2019.

Public members of the Advisory Committee are appointed by the Board of Directors. In the selection process, the Board considers geographical diversity, both rural and urban and north and south, type of developmental disability represented, and ethnic background, in addition to the qualifications of the individual applicants. The committee recently selected one new member, Diana Powell. Ms. Powell is a client of Valley Mountain Regional Center. The committee is now complete.

The OCRA Advisory Committee provides valuable insight to OCRA staff. A wide variety of topics are addressed at the meetings and members become better self-advocates because of having been on the committee. Minutes for the OCRA Advisory Committee meeting held in Sacramento on December 12, 2019, are included as Exhibit H. DDS staff is invited and encouraged to participate in the next meeting, which has not yet been scheduled at the time of writing this report.

F. **Self-advocacy training is provided for clients and families at least twice in each fiscal year.**

Welfare and Institutions Code, Section 4433(d)(5), requires that the contractor providing advocacy services for clients of regional center services provide at least two self-advocacy trainings for clients each year. Disability Rights California’s contract with DDS mirrors this language. OCRA strongly believes in the importance of self-advocacy and requires at least one self-advocacy training by each of the 21 OCRA offices per year,
far exceeding the two mandated trainings. Many offices provide more than one training per year. During this 6-month review period, OCRA staff provided 17 self-advocacy presentations statewide, which is fewer than the last semi-annual review period. OCRA staff typically provide more self-advocacy trainings in an election year because of the voting training, so we expect this number to rise between now and November 2020.

Staff may present any of the approved self-advocacy trainings. To date, OCRA has developed seven separate packets of information for OCRA staff to use in the mandated trainings in addition to the DDS Consumer Safety materials and the living arrangement options materials developed by DDS. The new Outreach Unit within OCRA will continue to explore new self-advocacy training ideas.

Samples of the OCRA self-advocacy packets (all are in both English and Spanish), were provided separately in a binder marked OCRA Training Materials with the 2007-2008 Annual Report. In discussions with DDS’s previous Contract Manager, it was decided that OCRA should not submit duplicate training packets. As always, OCRA welcomes comments from DDS on any training packets. A list of Self-Advocacy Trainings held last year are in Exhibit I.

Here are some comments from self-advocacy training surveys.

**CLIENTS’ RIGHTS BINGO**

4. Was the speaker interesting?

   YES   NO

   Comments: I enjoy the speaker

   “Was the speaker interesting? I enjoy the speaker”

5. How did this training meet your needs?

   I learned A lot

   “How did this training meet your needs? I learned A lot”
3. Did you learn something from this training?  

Comments: Yes, what to pack in case of a disaster

“Did you learn something from this training? Yes, what to pack in case of a disaster”

5. How did this training meet your needs?  

“How did this training meet your needs? It taught me how to pack an emergency bag”
5. How did this training meet your needs?

"Showed me what to do in an emergency"

5. How did this training meet your needs?

"Helped me know what to put in my emergency backpack and why"

8. Other comments or suggestions:

"U did great"

HANDS OFF MY MONEY

5. How did this training meet your needs?

"What to do if someone steals your identity"

"How did this training meet your needs? What to do if someone steals your identity"
“How did this training meet your needs? Better understanding of budgeting and identity theft.”

“How did this training meet your needs? Learned about money.”

“Was the speaker interesting? He gave a lot of helpful budget advise.”

“How did this training meet your needs? Taught me about budgeting.”
III. TITLE 17 COMPLAINTS

CCR, Title 17, Section 50540, sets forth a complaint procedure whereby a regional center client, or his or her authorized representative, who believes a right has been abused, punitively withheld or improperly or unreasonably denied, may file a complaint with the Clients’ Rights Advocate. The Complaint process is similar to that established by Welfare & Institution Code, Section 4731. However, the later law offers more client protections. OCRA handled no Title 17 Complaints during this review period, as noted on Exhibit J.

IV. DENIAL OF CLIENTS’ RIGHTS

CCR, Title 17, Section 50530, sets forth a procedure whereby a care provider may deny one of the basic rights of a client if there is a danger to self or others or a danger of property destruction caused by the actions of a client. The Clients’ Rights Advocate must approve the procedure and submit a quarterly report to DDS by the last day of each January, April, July, and October. Instead, OCRA is including the reports concurrently with the contractually required Annual and Semi-Annual reports. If this is not acceptable to DDS, OCRA will submit duplicate reports as requested. Attached as Exhibit K is the current log of Denials of Rights from the OCRA offices.

V. CLIENT GRIEVANCES

Exhibit A, Paragraph 12, of the contract between DDS and Disability Rights California requires OCRA to establish a grievance procedure and to inform all clients about the procedure. DDS has approved the grievance procedure developed by OCRA. The procedure is posted prominently in both English and Spanish at each office and is available in all 11 threshold languages. And the grievance procedure is offered in all letters to clients or others who contact OCRA, when an office declines to provide the requested service to that person.

During the 6-month review period, OCRA handled 5,444 matters. There were five grievances filed against OCRA during this review period. Attached as Exhibit L is the grievance chart.
VI. COLLECTION OF ATTORNEYS FEES

OCRA does not charge clients, their families or advocates fees for services nor does OCRA seek to recover costs from these individuals. Clients’ Rights Advocates who are licensed to practice law in California, or Assistant, Associate, or unlicensed Clients’ Rights Advocates, all of whom work under the supervision of an attorney, can collect attorney’s fees and costs similar to those collected by private attorneys or advocates for special education cases or other cases where there are statutory attorney’s fees. Neither Disability Rights California nor OCRA ever collect attorney’s fees from clients.

OCRA collected $3,000 in attorney’s fees during this review period, see Exhibit M.

VIII. CONCLUSION

OCRA has continued to provide exceptional service to people with developmental disabilities throughout the state. Clients and callers are satisfied with OCRA’s cases and outreaches, shown in the high client satisfaction numbers and the low number of grievances compared to the high number of cases. OCRA handled 5,444 cases for 3,900 clients in a wide variety of legal problem areas. And OCRA provided 259 trainings to 10,638 clients, family members, regional center staff and vendors, and interested community members - all while meeting each of its performance objectives. OCRA looks forward to continuing to work with people with developmental disabilities and helping access the services and supports they need to live the most independent and productive lives in the least restrictive environment.