

OCRA ANNUAL REPORT
(July 1, 2023 – June 30, 2024)
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I. INTRODUCTION

Disability Rights California provides statewide clients' rights advocacy services for regional center clients, under a contract with the Department of Developmental Services (DDS), through the Office of Clients' Rights Advocacy (OCRA). This annual report covers the period from July 1, 2023, through June 30, 2024, which was a one-year extension after a two-year contract starting July 1, 2021.

During the past year, OCRA resolved 10,553 issues for 6,352 clients. This is a significant increase from last year in both clients served (5,849 last year) and issues handled (9,023 last year). During this time, OCRA's staff providing direct advocacy services worked at least 2 days per week in offices located convenient to regional centers. Some advocates work from offices more than 2 days per week. Whether staff are working in offices or working remotely, they are accessible to regional center clients during regular business hours and for activities on evenings and weekends.

OCRA held 422 trainings during the past year, reaching about 15,464 people, which is a significant increase from the previous year (325 trainings reaching 12,352 people). OCRA's advocacy staff conduct most trainings and outreach events. There is also a team dedicated to outreach and training, with a Peer Advocate, Outreach Coordinators, a Supervising Attorney, and a Managing Attorney. We are pleased to have connected with more people served by regional centers this year, both through outreach and case handling. See section II.A.4 for more details on community engagement.

OCRA runs offices throughout the state staffed by at least one Clients' Rights Advocate (CRA) and one Assistant or Associate Clients' Rights Advocate (ACRA). Staff are physically and virtually available to clients during business hours and sometimes after hours. Staff connect with clients, regional centers, and stakeholders to understand the needs of the local community. OCRA also employs Statewide CRAs and ACRA's who "float" to serve clients in offices with higher caseloads, offices with vacancies, and handle community integration work.

For this entire review period, OCRA has used two Intake Assistants who are bilingual in English and Spanish. Intake Assistants answer the phone for the busiest offices in the state. They increase the number of callers who speak directly with someone when they call, reducing messages.

They also complete a “pre-intake,” where they gather basic information from a client or caller and enter it into the case management database. Pre-intakes free up the CRA and ACRA to do more substantive work on cases and outreach and less data entry.

During this review period, OCRA hired an Executive Assistant and an Associate Director to help manage and oversee all OCRA’s work. Both are part of OCRA’s management team. OCRA also hired clerical support staff to support several staff members with disabilities.

All OCRA offices operate under the same core advocacy principles and standards. Staff in each office remain flexible to meet the needs of the local regional center’s clients. Some hold office hours inside regional center offices to be accessible to clients and regional center staff at those locations. Others travel to meet with clients, family members, or groups in remote locations. OCRA staff listen and learn about the needs of regional center client communities and strive to meet those unique needs.

OCRA staff are diverse in race, ethnicity, and disability. About 25 percent of OCRA’s staff identify as people with disabilities, including people who are served by the regional centers, and many more are family members of people with disabilities. Lived experience with disability is an important part of providing excellent, empathetic service. Disability Rights California is one of 10 legal employers in the state to be recognized by the State Bar of California with a Gold Seal for our efforts to champion and model diversity, equity, and inclusion as an employer.

See Exhibit A for a list of staff and office locations as of June 30, 2024.

II. PERFORMANCE OBJECTIVES

The clients’ rights advocacy contract requires performance objectives established in Exhibit A, Paragraph M. Each of the required outcomes is discussed in the following Sections A through F.

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

OCRA’s tradition of serving people with developmental disabilities continues as we handled 10,553 issues for regional center clients during the past fiscal year. OCRA served more clients with more issues than last year. 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, attached as Exhibit C, covers January through June 2024, and tells the stories and impact of individual cases or outreach events.

1) Advocacy Reports

While reports show data and numbers, OCRA's stories show client outcomes. OCRA staff write summaries of cases or training events that demonstrate a good outcome, explain the law, or teach a lesson. In an effort toward brevity, the stories in this report are just a sampling of the cases OCRA handled. A longer Advocacy Report is available upon request. OCRA summarized cases for the first half of the fiscal year in the Semi-Annual Advocacy Report, which OCRA submitted to DDS previously. The summaries from January 2024 through June 2024 are Exhibit C. The report uses fictional first names to improve readability while maintaining confidentiality.

Advocacy stories show the extraordinary value and diversity of OCRA's work. Many cases reflect resolution of systemic problems through direct representation, involvement on committees, or the effective relationships OCRA has with regional centers and other agencies. The varied cases are typically in response to the calls the office receives from a client or someone calling on behalf of a client, including regional center staff.

OCRA staff provide direct representation in a range of different problem areas such as public benefits, health care, personal autonomy, housing, regional center services, community placement, employment, and special education.

Here are 3 regional center services cases not duplicated in the Advocacy Report. These are typical of the direct services OCRA provides each day.

Regional Center Agrees to Fund Swimming and Music Lessons and Reimburse Parent for Past Social Recreation Activities.

Michael's mother asked the regional center to fund social recreation activities for Michael. He wanted swimming and music lessons. The regional center told Michael's mother it can only fund one activity at a time. OCRA researched the law and agreed to represent Michael. OCRA advocated for Michael at an IPP meeting and negotiated with the regional center asking for funding for both music and swimming lessons. OCRA also asked for reimbursement of out-of-pocket costs for past social recreation activities the regional center verbally approved but didn't put in place. The regional center agreed to pay for both swimming and music

lessons for Michael and reimburse his mother for out-of-pocket costs for past social recreation activities.

Regional Center Funds ADA-Compliant Wheelchair Ramp for Tony and Tanya.

The wheelchair ramp leading to Tony and Tanya's home was in bad shape. The handrailing was splintering and part of the ramp had broken off, creating a dangerous gap for a wheelchair-user. The regional center had found a contractor to install a new ADA-compliant wheelchair ramp. However, the installation had been delayed for months because Tony and Tanya's landlord and the regional center could not agree on who had to pay for the ramp and its removal, if needed. OCRA contacted the regional center and explained that under fair housing laws, a landlord could not refuse a reasonable modification if the tenant (or regional center) agreed to restore the premises to its pre-existing condition. OCRA advocated for a quick resolution to the negotiations because it was so unsafe for both Tony and Tanya. Within a week, the regional center and the landlord agreed, and construction can begin.

Melissa Gets Appropriate Case Management Services and ILS Hours Reinstated.

Melissa contacted OCRA for help with discontinued Independent Living Skills (ILS) hours. Melissa lives independently and needs ILS to help her schedule doctor appointments, refill prescriptions, buy healthy groceries, and work on other activities of daily living. Melissa was without an assigned service coordinator for 8 months, after her service coordinator left the regional center. The regional center never reauthorized Melissa's ILS services, leaving Melissa without ILS for 8 months. Melissa tried contacting the regional center many times without success. OCRA contacted the regional center and told them about Melissa's situation. OCRA also advocated for the immediate appointment of a bilingual service coordinator and reinstatement of ILS services. Within one day of OCRA's call, the regional center assigned a bilingual service coordinator, and within 7 days, that person held a quarterly review with Melissa and reinstated her ILS services. Melissa will now continue living a healthy and independent life.

2) Analysis of Clients Served

OCRA handled 10,553 cases from July 1, 2023, through June 30, 2024. Exhibit B has the data reports for the fiscal year.

The data has been compiled by:

1. Age
2. County
3. Disability
4. Ethnicity
5. Race
6. Language
7. Gender
8. Gender Identity
9. Pronoun
10. Living Arrangement
11. Type of Problem (Problem Codes)
12. Service Type
13. Reason for Closing (Information and Referral service requests)
14. Representation in Appeal Process

When looking at who OCRA serves, we compare OCRA client statistics statewide to regional center client statistics statewide. For this section, we use the December 2023 DDS Consumer Characteristics report to get most regional center data, and the Monthly Consumer Caseload June 2024 report to get the Early Start (age 0-2) data.

According to the Monthly Consumer Caseload June 2024 report, the regional centers serve 12.7 percent of clients in the 0-2 age category, who are Early Start clients until they turn age 3. OCRA handled 2 percent of cases for clients in the 0-2 range, an increase from 1 percent last year. Families with children this age may not yet have problems accessing regional center and generic resource and they likely do not know about OCRA's services.

The percentage served by regional centers and OCRA starts to even out as clients get older. The 3-5 years age group make up 11 percent of cases handled by OCRA, and 9.9 percent of regional center clients. The largest age group OCRA serves is 22-31 years old, at 16.1 percent of cases. Regional centers serve this age group at 18.5 percent.

OCRA's statistics also include the client's disability. The options are the developmental disabilities defined by state law (autism, cerebral palsy, epilepsy, intellectual disability, and the 5th category). There is an option for "dual diagnosis" which is a person with any disability defined by state law, plus a co-occurring mental health disability. More than half of OCRA's clients are people with autism, whether alone or dually diagnosed, at 57 percent. 50.3 percent of the regional centers' clients are autistic. People

with autism are over-represented as OCRA clients, which reflects the difficulty clients and families have accessing services.

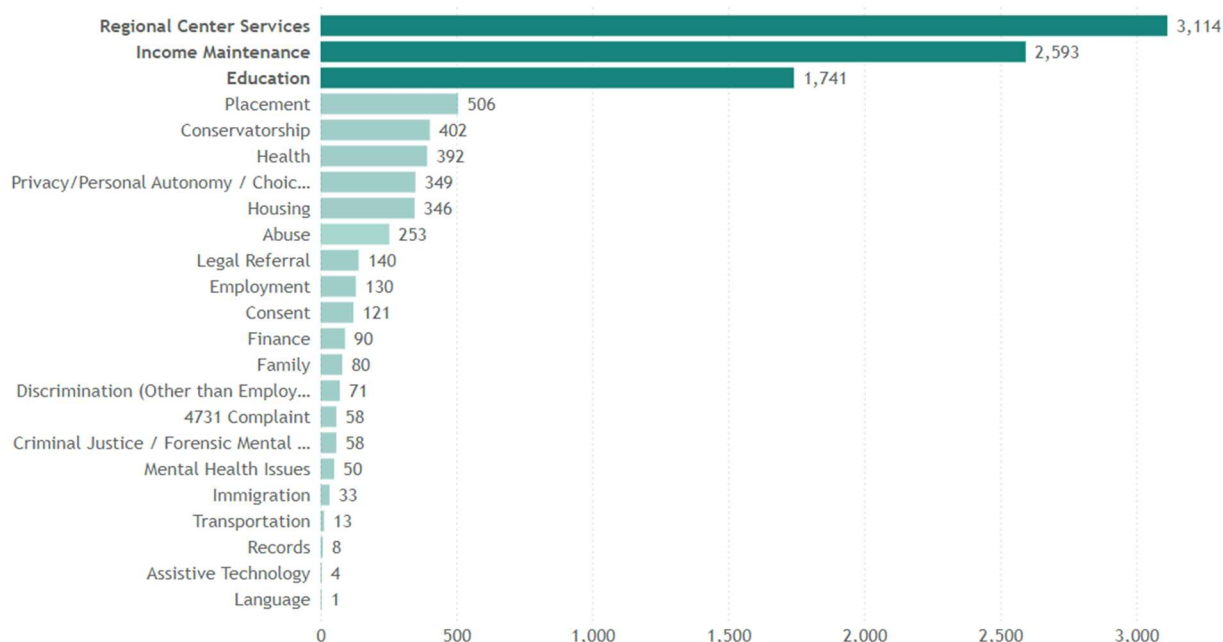
Statistics on the ethnicity of clients served for the year show OCRA's continuing commitment and success in reaching traditionally underserved communities. For example, 42.1 percent of OCRA cases were for clients who identified as Hispanic/Latino. This is slightly higher than the 41.1 percent of regional center clients identified as Hispanic/Latino. If a caller declines to state their ethnicity, they are still included in overall numbers of clients, but not included in either ethnicity count.

African American and Asian client data is under the report for "race" in this annual report. 9.5 percent of OCRA's cases were for clients who identify as African American. This is higher than the 8.9 percent of regional center clients. Asian clients make up 7.1 percent of regional center clients and make up 9 percent of OCRA cases. Some callers do not want to state their race. If a caller declines to state, they are still included in overall numbers of clients, but not included in any specific race count. OCRA also has an option for clients to identify as "two or more races," which would not capture clients in the count of each race. OCRA is pleased to have surpassed parity with the Asian and African American communities in terms of statewide populations.

For cases where gender is recorded, OCRA has traditionally served more males than females, with 67.8 percent of the clients served being male and 31.5 percent being female in this reporting period. Regional centers also serve more males than females. Regional centers served 67 percent male compared to 33 percent female. OCRA also captures data for gender identity and found that people who identify as nonconforming/non-binary are less than 1 percent of callers.

The percentage of clients living in the parental or other family home remains by far the largest number of service requests for clients served by OCRA, with 6,758 service requests showing clients living in the family home or 64 percent of cases OCRA handled. Regional centers have 77.5 percent of clients living in the family home. The next largest group served is those living independently, with 1,163 service requests or 11 percent with this living arrangement. Almost every OCRA office had a case for an unhoused client. During this period, OCRA had 62 service requests where the client was unhoused. We hear from clients and family members that living arrangements are a top concern for them.

OCRA's case management database categorizes service requests by issue. Issues are labeled by a problem area and a subproblem area. OCRA's largest problem area is Regional Center Services. This can be anything from regional center eligibility cases, to disputes over services, to problems with case management. This area is 29.5 percent of OCRA's cases. The next largest is Income Maintenance, at 24.6 percent. These cases involve IHSS, Social Security, or other income programs. The third largest is Education, which involves cases for a range of different special education issues, at 16.5 percent. These top 3 problem areas are the same as the last annual reporting period. OCRA handled from 1 case to 506 cases for the remaining problem areas. These include Placement, Health, Conservatorship, Employment, and Housing, among others.



The chart above shows the number of OCRA cases handled for each problem area.

OCRA collects data about why staff closed a case at the lowest level of help. The lowest level is called "Information and Referral." OCRA staff select from 12 possible reasons for closing the case. During this period, staff closed 4,978 cases at this level. The largest percentage of these cases, 32.3 percent, were closed because the caller asked only for information, referral, or a publication. The next highest, at 21.6 percent, were closed because OCRA reviewed an Individual Behavior Supports Plan (IBSP) or a comprehensive assessment only. OCRA does this work on behalf of people in restrictive settings (see next section). The next highest, 13.2 percent, closed because the issue was not OCRA-eligible.

This could be family law, criminal law, setting up a special needs trust, personal injury, or another type of case OCRA does not handle. The remaining reasons for closing these Information and Referral cases are a lower percentage and are shown in the report.

Last year, OCRA and other units of DRC began using a new sub-problem code, "Appeal Process." This is used when staff directly represent a client in any stage of a regional center appeal – informal meeting, mediation, or hearing. This does not include service requests where staff provide information, advice, or technical assistance to someone who is representing themselves or someone else in a regional center appeal. OCRA as a unit represented a client during an appeal in 18 cases during the last review period. All other units at DRC, not including OCRA, represented a client during an appeal in 3 cases.

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

The law requires regional centers to tell OCRA about people who live in restrictive settings and people whose community placements are at risk of failing. This includes people who live in, or are at risk of going into, Porterville Developmental Center, Canyon Springs, an Institution for Mental Disease, and state-operated Stabilization Training Assistance Reintegration (STAR) homes.

Regional centers are required to send OCRA comprehensive assessments and meeting notifications for clients in these restrictive settings, and clients living in Enhanced Behavioral Support Homes (EBSHs) and Community Crisis Homes (CCHs). Providers of EBSHs and CCHs must invite OCRA to Individual Behavior Support Team (IBST) meetings, and staff attend as many as possible with available resources.

OCRA's local and statewide CRAs and ACRAAs handle these cases. Assistance or representation often takes considerable time and many activities. These include speaking with the client about their wishes, reviewing records, attending a variety of meetings, negotiating through phone calls, drafting and filing documents for court, speaking with the client's public defender, service coordinator, family members, or home administrators about possible living arrangements and services, and attending discharge planning meetings and court dates, all to advocate for movement back to the community or for more services to stay in the community.

During this review period, OCRA staff took on 742 cases for people who live in Enhanced Behavioral Supports Homes and 413 cases for people who live in Community Crisis Homes. This is a significant increase in cases from the last annual reporting period for clients living in both living arrangements. More homes are sending IBSPs to OCRA staff as required by the law, and OCRA staff have been reviewing IBSPs and attending IBST meetings for these clients. OCRA staff handled 112 cases for people who live in Porterville Developmental Center or Canyon Springs Community Facility. OCRA also helped in 88 cases where the client was in a STAR home for treatment. OCRA handled 47 cases for people in IMDs. All of these are increases from the last annual reporting period. OCRA staff are committed to helping people live in the least restrictive environment, a mandate of the Lanterman Act.

Here is one story from this period, not in the Advocacy Report, highlighting how a client achieved community integration.

Bruce Returns to Community with Supports.

Bruce's attorney contacted OCRA because Bruce was living in a locked setting because of a court order. Bruce wanted to return to the community with support from the regional center. OCRA talked with Bruce, Bruce's attorney, his family, and the professionals involved in his care to discuss and plan for Bruce's return to the community. OCRA represented Bruce at an IPP meeting with his circle of support. The regional center agreed to fund Independent Living Services so Bruce can find affordable housing, safe community activities, a job, and medical care. Bruce is now living in the community with services and supports to meet his needs.

4) Outreach and Training

Outreach and training serve two important purposes: 1) telling people about the availability of OCRA services and 2) educating people about the law and their rights. OCRA targets underserved communities and strives to reach people who have never called OCRA for help. OCRA trains on many issues to many people – clients, family members, regional center staff and vendors, and community members. Training topics include clients' rights, abuse and neglect issues, IHSS, Medi-Cal, regional center issues, special education, voting rights, SSI, rights in the community, alternatives to conservatorship, and self-determination.

During the last fiscal year, OCRA presented 422 outreach trainings, compared to 325 the year before. These trainings reached about 15,464 clients, families, service providers, regional center staff, and community members. This is a large increase from 12,352 the year before. OCRA has continued to hold trainings and conferences virtually, and in person.

OCRA creates and presents new trainings for the disability community in English, Spanish, and other languages. OCRA provides information to ethnic- and language-diverse communities by using publications from the DRC website during outreach events. DRC translates all new self-help publications posted online into the California threshold languages. Participants have commented that it was nice to have guidance and materials in their language.

OCRA staff create an outreach plan for each year. The offices decide groups to target for outreach, training, and projects, based on community need and feedback. Target outreach is designed to reach people from traditionally underserved communities. Each office performs targeted outreach plus at least two self-advocacy outreach events each year. Exhibit D is a detailed report on outreach and training for this review period.

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

From July 1, 2023, through June 30, 2024, OCRA resolved 10,553 issues for clients. Of those, all but 15 were resolved informally. This means OCRA staff handled 15 hearing-level cases, but handled or resolved all others at a lower level. These numbers are consistent with previous years, in that 99 percent of all matters OCRA handled were resolved without resort to hearings or the court. Data showing this is attached as Exhibit E.

OCRA has also set up informal resolution systems with regional center staff. When a client has an issue with their case management, their services, or another regional center problem, OCRA staff can call or email a designated person at the regional center to resolve the issue. This is also true for generic resources in some areas. For example, in Los Angeles County, legal aid advocates including OCRA staff, can call or email a designated manager in both IHSS and Medi-Cal county offices. Using these informal channels saves staff time and state and county resources, allowing everyone more time to resolve more issues.

C. Collaborative and harmonious working relationships are fostered.

OCRA staff continue to collaborate with regional centers, stakeholders, and community members. Examples of collaboration with regional centers include OCRA staff participating in:

- Self-Determination Program Local Advisory Committees
- Regional Center START Advisory Council
- Regional Center Diversity Committees
- Disparity Task Force Meetings
- ECT Review Committees
- Bioethics Committees
- Behavioral Modification Review Committees
- Risk Assessment Committees
- Regional Resource Development Project – Regional Center (RRDP-RC) Liaison Meetings
- Special Education Roundtable with regional center local offices

Some examples of collaboration with stakeholder and community groups include OCRA staff participating in:

- Access Paratransit Consumer Advisory Committee (CAC)
- Access Paratransit Operations Subcommittee
- Adult Transition Task Force
- Butte County Coordinating Council (BCCC)
- California Statewide Alliance Team
- California Welfare Advocates
- Choices Conference Planning Committee
- Colaboracion Latina – UC Davis MIND Institute Resource Center
- County/Advocate meetings about benefits, services, and appeals
- Criminal Justice Task Force
- DS Taskforce and Implementation Workgroups (and many other DDS Focus Groups and Workgroups)
- El Arc de California
- Healthcare Task Force
- Health & Wellness Committee-Forensic Task Force
- IHSS Statewide Advocates' Meetings
- LA County Dependency Court Education Committee
- Multi-Agency Advisory Board (MAAB)
- People with Disabilities and Aging Advisory Council (PWDAAC)
- Self-Advocacy Board of Los Angeles County (SABLAC)

- SABLAC & SCDD Self-Advocacy Joint Projects
- SCDD Self-Advocacy Special Education Training
- SCDD Self-Advocacy Training
- SCDD Self-Advocacy Friendly check in
- SSI Statewide Advocates' Meetings
- State Hearings Division Stakeholder meetings
- Statewide Self-Advocacy Network (SSAN)
- Supported Life Training Planning Committees
- The Arc of California planning committees
- University Center for Excellence in Developmental Disabilities (UCEDD)
- Voter Accessibility Advisory Committee L.A County (VAAC)

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 experiences and knowledge, and collaborate on many subjects. During this review period, meetings have continued virtually and in person. Many regional center staff have made OCRA their primary contact if their clients have legal issues.

OCRA has found, consistent with the contract requirement, that some of the most effective advocacy takes place because of interpersonal relationships and informal advocacy. OCRA's calls come from many sources. Staff have maintained the ability to resolve matters informally, and word of these successful negotiations often spread around the disability community.

1) Memorandums of Understanding

OCRA has established Memorandums of Understanding (MOUs) with each regional center that address individual needs, concerns, and method of operation. Generally, MOUs are updated as needed, including when the law changes. Meetings to review MOUs have been productive and positive. OCRA has very good working relationships with most regional centers. During this review period, OCRA did not update the MOU with any regional centers. OCRA completed a new MOU template for use at upcoming MOU meetings between OCRA and regional centers. The status of each MOU is listed in Exhibit F.

2) Meeting with Association of Regional Center Agencies (ARCA)

ARCA and OCRA directors met one-on-one during this reporting period, including to preview and provide feedback on the new MOU template. ARCA and OCRA also serve on several workgroups, task forces, and committees together. This collaborative relationship will continue, as will the work on shared goals.

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 way and with results that ensure client and family satisfaction with the services provided.

In the past, OCRA used a Client Satisfaction Survey, developed with DDS many years ago. Survey results showed positive client satisfaction during each review period. OCRA is revising the way we gauge client satisfaction and outcomes. OCRA did not send the former survey to any clients during this review period.

Although not using a formal survey, OCRA sees positive results for clients through the variety of legal issues shown in the statistics and Advocacy Report. When their cases end, OCRA clients report high satisfaction with OCRA services to staff and community members. Satisfied clients give OCRA contact information to others who call for the first time. Another indicator of client satisfaction is the low number of grievances compared to the number of cases OCRA handles. During this review period, there were just 12 level one grievances, and none escalated to a higher level. Compared to 10,553 cases handled, this low number of grievances is remarkable.

1) Cases are handled in a timely manner

Clients and families usually contact OCRA because something has gone wrong. They are losing government benefits, losing their housing, or are facing another urgent situation. They may be worried about their rights. Even if something has not gone wrong and they just need information, OCRA staff must be responsive.

Intake Assistants answer the phones for OCRA's busiest offices statewide, which allows callers to complete a pre-intake immediately. If someone must leave a message, OCRA's policy is to return all calls as soon as possible, but no later than the close of the next business day. OCRA staff

note in the intake record if a client has a deadline or a timeline for their legal issue, such as a deadline to file an appeal. After noting this in the intake, advocates advise clients of timelines. Staff also prioritize cases when they identify a closer deadline.

OCRA supervisors regularly review their staffs' open cases to make sure they are moving along timely. The management team tracks whether cases have been closed past the ideal time for best practice, and if there are any concerns, follow up with staff to go over the importance of handling cases promptly.

E. The provision of clients' rights advocacy services is coordinated in consultation with the DDS Project Representative, stakeholder organizations, and persons with developmental disabilities and their families representing California's multicultural diversity.

OCRA meets with the DDS contract manager monthly and dedicates two additional meetings during the fiscal year specifically to review information about OCRA services in the Annual and Semi-Annual Reports. When DDS has asked to see specific data, OCRA responds by adding it to the next report.

DRC's Board of Director's Community Engagement Committee gathers input from the multicultural disability community, including people with developmental disabilities, about DRC and OCRA services. The OCRA Director and staff have served on several stakeholder committees about the appeal hearing process and conservatorship reform during this review period. During these sessions, OCRA listens and learns the developmental disability community's priorities. Several OCRA staff serve on Diversity Committees with their local regional center to find ways to better serve diverse client groups. Several OCRA staff also serve on committees with regional center clients, families, and staff to plan events and conferences. Because listening and serving together has been so informative, OCRA will continue to hear from the community on how to provide high quality, efficient services with which clients are satisfied.

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. Disability

Rights California's contract with DDS mirrors this language. OCRA believes strongly in the importance of self-advocacy and requires each of its 21 offices to provide at least two self-advocacy trainings for clients each year. Two per office per year exceeds the two trainings required by contract. Many offices provide more than two per year. This fiscal year, OCRA conducted 67 self-advocacy trainings, compared to 27 the previous year. This is a significant increase, and consistent with OCRA's goal to reach more regional center clients directly.

Staff may present any of the approved self-advocacy trainings. To date, OCRA has developed seven training packets for OCRA staff to use for trainings, in addition to the DDS Consumer Safety materials and the living arrangement options materials developed by DDS. Samples of the OCRA self-advocacy trainings (in both English and Spanish), were provided separately in a binder marked OCRA Training Materials with the 2007-2008 Annual Report. Past discussions with DDS's Contract Manager concluded OCRA should not submit duplicate training packets in annual reports. As always, OCRA welcomes comments from DDS on any training packets.

A list of Self-Advocacy Trainings held last year is in Exhibit G.

OCRA must report in its Annual Report a sample of the self-advocacy training surveys. OCRA has randomly selected consumer training satisfaction evaluations to include below. Almost without exception, consumers are pleased with OCRA trainings.

Survey comments from "Microenterprises."

5. How did this training meet your needs? *By giving the right information and believing*
Click here to enter text.
6. How would you rate the quality of the presentation? *1000000000%*

5. How did this training meet your needs? By giving the right information and believing

6. How would you rate the quality of the presentation? 1000000000%

8. Other comments or suggestions: *I don't have any! You all was Amazing!*
Click here to enter text.

8. Other comments or suggestions: I don't have any! You all was Amazing!

Survey comments from "Hands Off My Money."

1. Were your access needs met?

(Getting into the building, was the training room comfortable, were you able to get into the bathroom, was the information provided helpful, etc.)

YES

NO



Comments:

you did wonderful

1. Were your access needs met?

(Getting into the building, was the training room comfortable, were you able to get into the bathroom, was the information provided helpful, etc.)

YES

Comments: you did wonderful

3. Did you learn something from this training?

YES

NO



Comments:

Money skills

4. Was the speaker interesting?

YES

NO



Good job

Crysalyn is very nice and
Sweet! The CRA as well.

3. Did you learn something from this training?

YES

Comments: Money skills

4. Was the speaker interesting?

YES

Comments: good job

Crysalyn is very nice and sweet! The CRA as well.

5. How did this training meet your needs?

helpful with how to protect my money :)

5. How did this training meet your needs?

helpful with how to protect my money :)

Survey comments from "Emergency Preparedness."

4. Was the speaker interesting?

Comments: very helpful



4. Was the speaker interesting?

YES

Comments: very helpful

5. How did this training meet your needs?

I learned who to call when in an emergency.

5. How did this training meet your needs?

I Learned who to call when in an emergency.

It help me what to have in a emergency backpack

It help me what to have in a emergency backpack

Taught me how I can be safe at home

Taught me How I can be safe at home

Survey comments from "Clients' Rights Bingo."

3. Did you learn something from this training?

I learned about having Rights and needs
good quality :) 😊 😞

I learned about having Rights and needs good quality :)

right to wear what I want 😊 😞

right to wear what I want

You guys help w/ attorneys and law and
I didn't know!

You guys help w/attorneys and law and I didn't know!

That I might Be able to Help my BF 😊 😞

That I might Be able to Help my BF

my Rights

My Rights

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. There were four Title 17 Complaints filed during the last fiscal year, as noted on Exhibit H.

IV. DENIAL OF CLIENTS' RIGHTS

CCR, Title 17, Section 50530, says a care provider may deny one of the basic rights of a regional center client, if there is good cause. Good cause means the client's actions are dangerous to themselves or others, or there is risk of property destruction. The Clients' Rights Advocate must receive and review the denial and submit a quarterly report to DDS by the last day of each January, April, July, and October. OCRA is including the reports concurrently with the contractual date to provide OCRA's reports. If this is not acceptable to DDS, OCRA will submit duplicate reports as requested. Exhibit I is the current log of Denials of Rights the OCRA offices received.

OCRA also presented many well-received trainings on clients' rights and the denial process to new and existing residential service providers. For example, OCRA trains existing providers and new providers quarterly through many regional centers' orientation programs.

V. CLIENT GRIEVANCES

The contract 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. The grievance procedure is also available in Arabic, Armenian, Chinese (Simplified), Farsi, Hmong, Japanese, Khmer, Korean, Laotian, Russian, Tagalog, Thai, and Vietnamese. When declining to provide a requested service, OCRA staff offer the grievance procedure in all letters to clients or others who contact OCRA.

During the past fiscal year, OCRA handled 10,553 matters. Regional center clients or family members filed 12 first-level grievances, 0 second-level grievances, and 0 third-level grievances. Exhibit J is a chart detailing the grievances filed against OCRA during this period.

VI. COLLECTION OF ATTORNEY'S FEES

OCRA does not charge clients, their families, or advocates fees or costs for services. 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 like those collected by private attorneys or advocates for special education cases or other cases where there are statutory attorney's fees. In the past, OCRA collected fees in some special education cases or Writs of Mandamus. Fees and costs may be negotiated

at mediation, or an Administrative Law Judge can award them if the petitioner is the prevailing party. Fees are collected from the opposing party, which is normally a school district. Costs include any expenses to the client or OCRA, such as expert evaluations. Neither Disability Rights California nor OCRA ever collect attorney's fees from clients.

OCRA received no attorney's fees during this annual reporting period. See Exhibit K.

VII. RECOMMENDATIONS FOR ENHANCEMENT OF SERVICES

The contract requires that annually Disability Rights California make recommendations to DDS on potential methods of enhancing the services that OCRA provides for regional center clients.

The support of DDS through the years has made it possible for OCRA to serve clients effectively and efficiently. We appreciate the positive relationships and ability to contact DDS when we have a concern, and to work collaboratively to improve services. We enjoy serving on committees and sharing the feedback of our clients and their experiences in the system. We look forward to continued collaboration.

To enhance services over the coming year, OCRA proposes the following.

DDS delegates to OCRA staff a role serving on Electro-Convulsive Therapy (ECT) Review Committees under Title 17 regulations issued by DDS. OCRA requests that DDS review and update these regulations, which have not been updated in many years. In the past year OCRA has encountered some clients' rights situations that are not addressed by current law or regulations, particularly when the regional center client is subject to a conservatorship.

OCRA has identified an additional opportunity to serve regional center clients, specifically people conserved by DDS. OCRA has proposed a project to support them by serving as an independent entity to help them understand their options for Supported Decision Making and other alternatives to conservatorship, and for potentially ending the conservatorship as appropriate. If the project is approved, OCRA will hire staff dedicated to the project.

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 outreach/training and casework, shown in the positive training survey responses and the low number of grievances compared to the number of cases. OCRA increased its reach to clients by handling 10,553 cases for 6,352 clients in a wide variety of legal problem areas this year. OCRA also provided 422 outreach and training events to 15,464 clients, family members, regional center staff and vendors, and interested community members - all while meeting each of its performance objectives. OCRA has surpassed statewide parity with Latinx, Black and African American, and Asian communities. OCRA staff are committed every day to helping regional center clients access services and supports they need to live the most independent and productive lives in the least restrictive environment. OCRA looks forward to continuing to work with people with developmental disabilities and provide the advocacy services they need.