

**OFFICE OF CLIENTS' RIGHTS ADVOCACY**  
**Protection and Advocacy, Inc.**

**ANNUAL REPORT**  
**For July 1, 2003 – June 30, 2004**

**Compiled by:**  
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## INTRODUCTION

For six years, the Office of Clients' Rights Advocacy has provided advocacy services for the consumers of California's 21 regional centers. During those years, OCRA has come to be a respected provider of advocacy services by the people and families who it serves and by the community and agencies that support people with developmental disabilities.

During the past year, OCRA has handled approximately 8,258 intakes and cases and provided over 246 trainings attended by over 19,252 people. OCRA operates 23 offices throughout the State of California, most of which are staffed by one CRA and one Assistant CRA. A list of our current staff and office locations is attached as Exhibit A.

Significantly, consumer satisfaction surveys continue to average above 90 percent satisfaction in almost all areas of performance surveyed. OCRA staff makes a strong effort to provide advocacy services to the consumers that it serves. That effort is reflected in the statistics given, the outcomes reported, and the spirit that abides among OCRA staff. This is captured so clearly in the many letters of appreciation that the staff receives. For example:

In the 2 hour+ meeting, your thorough professionalism and command of the issues was clearly demonstrated to the five (regional center) employees attending. You were able to focus this large, diverse group of nine people to attend to the client's present state and his future needs. Because of this, S. kept his hours and services from the Regional Center.

We wanted to let you know that we feel our son was well-served by you in a very difficult and demanding meeting. Without your presence (and presence of mind) this informal meeting with the (regional center) would have gone to the State Hearing level.

I have been meaning to send you a note expressing my appreciation for your assistance in preparation of the hearing and your strong advocacy at the hearing itself. On the drive home my mom told me, "(F)or just meeting you today, they really fought like they've known

you for a long time.” I agreed. So thank you for your great work and know that we appreciate it.

Thank you for your time, patience and understanding when no one else would. You will always be in our hearts, always.

I would like to convey my sincerest thanks to you for assisting us....Your suggestions regarding the areas to focus our attention were invaluable. Knowing the information ahead of time and how the system works was extremely helpful. We were successful with our...hearing.

I would like to take this opportunity to thank you for all your assistance. My daughter was found eligible for continuation of benefits after the age of three. Your insight into our daughter’s situation was instrumental for this to happen. Moreover, through you we have learned about our rights....Last but not least your prompt and insightful replies to all our inquires have been invaluable to us. For all the above reasons, my wife and I want to extend our deepest appreciation to you and the Office of Clients Rights Advocacy for your continued support.

All of these letters, plus the many others that staff receive, show OCRA’s continuing effectiveness and dedication.

PAI greatly appreciates the support and efforts of DDS and the regional centers in OCRA’s performance of this contract. Without support from these agencies, OCRA’s efforts to ensure the rights of Californians with developmental disabilities would not be so successful.

## **I. CONTENTS OF ANNUAL REPORT**

PAI’s contract with DDS, Paragraph 14, Exhibit D, specifies that the following information is to be contained in the Annual Report:

- 1) Number and type of clients’ rights denials;
- 2) Nature, status, and outcome of complaints filed under the Contractor’s grievance procedure;

- 3) Nature, status, and outcome of complaints filed under Title 17, California Code of Regulations, Section 50540 Complaint Procedure;
- 4) Aggregate data on consumers provided with services, including, but not limited to, age, sex, primary disability, ethnicity, type of residence, type of services provided, and examples of the outcomes of those services;
- 5) Achievement of the performance objectives;
- 6) Summary of the content, attendance, frequency; and evaluation of self-advocacy training provided;
- 7) The amount and source of any attorney's fees and costs collected; and
- 8) Recommendations for enhancement of services to be provided under the terms of the contract.

## **II. PERFORMANCE OBJECTIVES**

PAI's contract with DDS requires performance evaluation measures. On January 8, 2002, former Contract Manager, Suzanne Joy-Livingston, met with PAI and gave verbal approval to the performance objectives that OCRA had proposed to DDS.

### **1. 7,560 issues will be resolved for people with developmental disabilities on an annual basis.**

OCRA has continued its tradition of serving a large number of people with developmental disabilities and exceeded this performance objective by nine percent. The performance objectives require OCRA to resolve 7,560 issues for people with developmental disabilities during the time period covered in this report. The statistics, attached as Exhibit B, show that OCRA resolved 8,258 issues for consumers during this time period, an increase of 244 requests from the proceeding year. It is clear that OCRA resolved significantly more issues for people with developmental disabilities than required by the performance objective.

**2. 75 percent of requests for assistance will be resolved informally as measured by the quarterly data.**

OCRA continued to exceed this performance objective. OCRA handled 8,258 requests for assistance during this reporting period. Of these, 137 were handled as requests for direct representation at hearing. This means that more than 98 percent of the requests for assistance were resolved informally. Informal is defined as all services resolved below the due process hearing or formal complaint level. Therefore, significantly more than the required 75 percent of the cases were resolved informally. Data showing this is attached as Exhibit B.

**3. 80 percent of individuals with developmental disabilities receiving service from OCRA will be satisfied with those services as measured by the consumer satisfaction survey.**

OCRA exceeded this performance standard with all areas of satisfaction significantly exceeding 80 percent. From the survey results, it is clear that OCRA consumers are overwhelmingly satisfied with the services provided by OCRA. With a 32 percent return rate, of those who answered the questions, 95 percent of the responders felt they were treated well by the staff, 94 percent understood the information they were provided, 94 percent believed their CRA listened to them, 85 percent believed they were helped by the CRA, and 90 percent would ask for help from the CRA again. See Exhibit C which discusses the results of OCRA's survey.

**4. 75 percent of individuals with developmental disabilities receiving services from OCRA will indicate that their issue(s) was resolved in a timely manner as measured by the consumer satisfaction survey.**

See Exhibit C which shows that OCRA provided timely services to over 75 percent of the consumers that OCRA served last year. In fact, 84 percent of the responders to the consumer satisfaction survey indicated that they received a call back within two days.

**5. A minimum of one self advocacy training for individuals with developmental disabilities and/or their families will be held each year in each regional center catchment area.**

At least one self advocacy training for consumers and their families was held in each regional center catchment area during the past year. The chart below reflects the training schedule.

OCRA has developed four separate packets of information for staff to use in the mandated trainings on self-advocacy. The original self-advocacy packet was approved by DDS, as required under the previous contract. The more recent packets have been sent to DDS and though the current contract does not require the approval of DDS, OCRA welcomes comments from DDS. Two new training were developed this year. One is on voting right, which OCRA believes to be timely in this election year. The other training is a game called Clients' Rights Bingo. It is similar to a traditional bingo game, except that icons used depict various rights that people with developed disabilities are ensured.

The evaluations for the self-advocacy trainings are too numerous to submit to DDS but, almost without exception, consumers attending those trainings rated them as satisfactory. OCRA's standard rating sheet was used at the trainings. Consumers have the choice of evaluating a presentation as satisfactory or unsatisfactory in six basic areas. The rating sheet has previously been reviewed and approved by DDS. The individual rating sheets are available for review if DDS desires to do so.

Alta CA Regional Center	September 30, 2003
Central Valley Regional Center	March 15, 2004
East Los Angeles Regional Center	June 26, 2004
Far Northern Regional Center	October 30, 2003
Golden Gate Regional Center	October 4, 2003, March 19, 2004
Harbor Regional Center	June 24, 2004
Inland Regional Center	October 17, 2003 and April 24, 2004
Kern Regional Center	July 15, 2004
Lanternman Regional Center	February 2, 2004
North Bay Regional Center	May 26, 2004
North Los Angeles County R Center	April 27, 2004
People First, National	May 29, 2004
Redwood Coast R Center (Eureka)	January 7, 2004
Redwood Coast R Center (Lake)	April 2, 2004
Regional Center of Orange County	May 15, 2004
Regional Center of the East Bay	July 8, 2003
San Andreas Regional Center	May 12, 2004

San Diego Regional Center	August 6, 2003
San Gabriel/Pomona Regional Center	May 26, 2004
South Central Los Angeles R Center	May 13, 2004
Supported Life (Statewide)	October 10, 2003
Tri-Counties Regional Center	June 29, 2004
Valley Mountain Regional Center	August 1, Sept. 4, January 7, 2004 and Nov.13, 2002
Westside Regional Center	June 24, 2004

**6. OCRA will present at a minimum of 160 trainings per year on a variety of topics of interest to consumers, their families, regional center staff or other interested persons.**

OCRA presented at 246 trainings during the past year. This was 86 more than required by this performance objective. One reason for the large number is that OCRA recognizes that outreach and training is an essential part of providing effective advocacy for regional center consumers. In fact, one of the essential services that OCRA offers is training on a wide variety of issues, including but not limited to, consumers' rights, various public benefits, special education, and conservatorships.

During the past year, OCRA presented at 246 trainings with a total attendance of approximately 19,252 people at the various trainings. The number of people attending OCRA trainings more than doubled from last year. This can be attributed to several factors. First, since OCRA has presented at more trainings there was an increase in the number of people trained, but staff has also been asked to present at larger trainings that more people attend. Additionally, OCRA is becoming well known for its willingness to present at various functions in addition to OCRA's strong emphasis on outreach and training..

OCRA presented at significantly more than the 160 trainings required under its performance objective. It is obvious that OCRA presented information to a tremendous number of people.

**7. In addition to the self-advocacy trainings, OCRA offices will present at a minimum of three outreach trainings to underrepresented communities each year.**

OCRA has a priority of providing assistance to individuals from traditionally underserved communities. Eva Casas-Sarmiento serves as the Statewide Outreach Coordinator and Lisa Navarro serves as the Northern California Outreach Coordinator. OCRA is in the process of hiring a Southern California Outreach Coordinator. The outreach coordinators assist the OCRA offices in development and implementation of their outreach plans and provide the formal evaluation of each office's outreach plan.

The target outreach plans were initially written for a year's time period and identified underrepresented groups in each catchment area for the offices to target for extra contact. A detailed report on targeted outreach and training is included here as Exhibit D.

The targeted outreach plans that were developed for fiscal year 2003-2004 were in effect for one year. Review of the statistics on OCRA's services to underrepresented groups show steadily increasing services to people of color and underrepresented groups. The conclusion must be reached that OCRA's outreach to underrepresented groups has been instrumental in causing the increases.

**8. To lead to greater cooperation with regional centers, OCRA will:**

**A. Develop or revise Memorandums of Understanding (MOUs) with each regional center that address that center's individual needs, concerns, and method of operation by July 1, 2002.**

The OCRA Director met with all of the regional centers during the first year of the current contract. MOUs have been revised as needed and copies of all revised MOUs have been forwarded to DDS when the MOUs are finalized.

In general, meetings regarding the MOUs are productive and extremely congenial. It is clear that OCRA's working relationships with the various regional centers have become well established and that concerns between the



two agencies can be addressed with minimum difficulty in almost every situation.

**B. PAI's Executive Director and OCRA's Director will offer to meet with ARCA on an annual basis to discuss any issues of concern.**

Catherine Blakemore contacted Bob Baldo, the Executive Director of the Association of Regional Center Directors, on March 11, 2004. At that time, it was agreed that there were no significant outstanding issues between OCRA and the regional center directors. Meetings will be convened, should concerns arise.

**III. OCRA ADVISORY COMMITTEE**

PAI's contract with DDS requires that, "(t)he provision of clients' rights advocacy services (will be) coordinated in consultation with the DDS Contract Manager, stakeholder organizations, and persons with developmental disabilities and their families representing California's multi-cultural diversity(.)" OCRA meets this outcome by working with the OCRA Advisory Committee, as discussed below.

OCRA works through the OCRA Advisory Committee to ensure that this performance outcome is achieved. Attached as Exhibit E is a list of the current members of the committee.

The vacancies on the committee are listed on PAI's website and in its quarterly newsletter. In the selection process, consideration is given to 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 current committee has three consumer members and four family members who represent diverse geographical and ethnic backgrounds. Additionally, most of the members belong to several stakeholder organizations.

The OCRA Advisory Committee is a knowledgeable, constructive, and helpful group of volunteers who continue to provide valuable guidance to the OCRA staff. The meetings are lively and informative and provide a

forum for exchange of ideas and information. The Committee meets three times a year. Minutes for the meetings held this fiscal year are attached as Exhibit E.

DDS staff is invited and encouraged to participate in any of the meetings. The remaining committee meeting for this calendar year is in Los Angeles on December 4, 2004.

#### **IV. EXAMPLES OF OUTCOMES OF SERVICES PROVIDED**

OCRA has requested that each advocate provide on a quarterly basis a summary of an administrative hearing or other case that has unique situations from which other advocates can learn and that can be used as examples of the advocacy that OCRA is accomplishing. These summaries for the last two quarters are compiled and attached as Exhibit F. OCRA is extremely pleased that such outstanding examples of advocacy are available to show the value of the work that OCRA accomplishes. A few examples of the advocacy:

##### ***SSI Waives an Overpayment Allegedly Caused by an Award from a Class Action Lawsuit.***

The mother of J.L. called the OCRA office stating that she had received notice of an overpayment from Social Security. The notification indicated that J.L. was being charged for an overpayment resulting from an award of In-Home Supportive Services (IHSS) back wages. J.L. had received an award of \$2,000 plus interest from an IHSS class action case in 2001. Three years later, when determining SSI benefits, the Social Security office was counting the interest from the award as income.

OCRA gathered and reviewed all available records, researched the applicable law, and consulted with the attorney in the class action case. OCRA subsequently filed for a waiver and request for reconsideration and attended the reconsideration meeting. At the meeting, OCRA argued detrimental reliance, hardship, and fairness principles, and the overpayment was waived.

### **Consumer Receives Visitation with Her Child.**

T.M. is a 24-year old consumer with mild mental retardation. The CRA was approached by T.M.'s social worker to represent T.M. in a domestic violence restraining order against her mother. According to T.M., her mother has physically, verbally, and financially exploited her for many years. T.M. reported being coerced by her mother to give up T.M.'s parental rights over her daughter through a guardianship. T.M. has not seen her daughter in over a year.

T.M. was married in January, 2003, and had a child with her husband. Problems with her mother escalated at that point. It took a lot of courage for T.M. and her husband to stand up to T.M.'s mother, but they did so with support from many relatives, friends, and professionals from the regional center.

OCRA agreed to represent at a hearing on the TRO that was filed by T.M. to prevent abuse by her mother. The courtroom was full of family members on both sides; nineteen people. After some contentious moments, the mother agreed to the restraining order. Also, court ordered mediation was ordered for T.M. and her parents to schedule visitation with her daughter.

### **Regional Center Rate for Placement Accepted.**

L.M. is a 9-year old girl living with foster parents. She has lived with them since she was 6. She was removed from her biological mother's when she was 9 months old because of neglect. L.M. has been diagnosed with mental retardation, ADHD, reactive attachment disorder, bipolar disorder, and learning disabilities. She is categorized as a "dual agency" child as she receives services from both the regional center and the Department of Social Services (DSS).

Foster parents of "dual agency" children are entitled to the regional center rate for placement rather than the standard foster care rate. L.M. was assessed by the regional center to require a 4a level of care. L.M.'s parents sent the notice of the assessed rate to DSS. It refused to implement the regional center rate. L.M.'s parents filed for a hearing.

OCRA represented the family and negotiated with the county appeals worker. After explaining the legal grounds for the position and providing

All-County letters and legal citations, the county settled the case. L.M.'s family was granted the regional center rate retroactive to the date of placement. The retroactive award totaled \$59,420. The increase in monthly payments is \$1,823 per month. This money will enable the family to secure all of the services and supports that L.M. needs to flourish.

**R.V. Has a New School.**

R.V. lives at home with his monolingual Spanish-speaking mother and siblings. R.V.'s mother contacted OCRA, concerned that R.V.'s teacher was jeopardizing R.V.'s safety by failing to pay attention to R.V.'s whereabouts while at school.

OCRA agreed to investigate R.V.'s mother's concerns. Upon review of school documents, OCRA discovered that R.V. was being denied access to his education. For example, R.V. has a documented short attention span. R.V.'s teacher's solution was to send R.V. outside unsupervised, at the start of his first class. In this way, R.V. could not disrupt the class, nor was he able to run outside, since he was already there.

OCRA met with R.V.'s mother to discuss R.V.'s service needs and prepare for an IEP meeting. At a previous IEP meeting, the district agreed with R.V.'s mother's request for a new school, but had failed to name a school in the IEP, and suggested to R.V.'s mother that she wait to transfer R.V. until next year.

OCRA, R.V.'s mother and R.V. attended the IEP placement meeting. At the conclusion of the meeting, R.V. had secured placement in a special education classroom at a new school starting two days from the date of the meeting.

**V. DENIAL OF CLIENTS' RIGHTS**

CCR, Title 17, Sec. 50530, sets forth a procedure whereby a care provider may deny one of the basic rights of a consumer if there is a danger to self or others or a danger of property destruction caused by the actions of a consumer. The CRA must approve the procedure and submit a quarterly report to DDS by the last day of each January, April, July, and October. As in the past, OCRA is including the reports concurrently with its semi-annual

and annual report. If this is not acceptable to DDS, OCRA will submit duplicate reports as requested. Attached as Exhibit G is the current log of Denials of Rights from the OCRA Offices.

## **VI. TITLE 17, SECTION 50540 COMPLAINTS**

CCR, Title 17, Section 50540, sets forth a complaint procedure whereby a regional center consumer, or his or her authorized representative, who believes a right has been abused, punitatively withheld or improperly or unreasonably denied, may file a complaint with the Clients' Rights Advocate. The Complaint process is similar to that established by the Welfare & Institution Code, Section 4731. However, the later law offers more consumer protections. There were no Title 17 complaints filed during the last fiscal year.

## **VII. COLLECTION OF FEES**

OCRA does not charge consumers, 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 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. OCRA collects fees only in special education cases. Fees and costs may be negotiated at mediation or can be received in those cases where an Administrative Law Judge has made a determination that the petitioner is the prevailing party. Fees are collected from the opposing party, which is normally the school district. Costs include any expenses to the Petitioner or OCRA for bringing the suit, such as filing fees or costs of expert evaluations. Neither PAI nor OCRA ever collect attorney's fees from consumers.

The amount collected for any individual case depends upon several factors such as the geographical location where the Petitioner lives, and the years of experience of the attorney who handled the case. Attached as Exhibit H is a chart showing the amount and source of any attorney's fees and costs collected by OCRA during the past fiscal year.

## **VIII. CONSUMER GRIEVANCES**

Exhibit C, Paragraph 11, of the contract between DDS and PAI 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. Additionally, the grievance procedure is provided when staff learns that a consumer or family is dissatisfied with the services that OCRA has provided.

Three grievances were filed by consumers or their families against OCRA last year. The grievances were all resolved at the first level and information concerning the grievances has previously been submitted to DDS. Attached as Exhibit I is a chart detailing the grievances filed against OCRA.

## **IX. ANALYSIS OF CONSUMERS SERVED**

OCRA handled a total of 8,258 cases from July 1, 2003, through June 30, 2004. This represents a significant amount of advocacy assistance and is comparable to work performed in previous years. The complete compilation of data for the fiscal year is included as Exhibit B.

The data has been compiled by:

1. Age
2. County
3. Disability
4. Ethnicity
5. Gender
6. Living Arrangement
7. Problem Areas
8. Service Level

The majority of the OCRA statistics remain consistent with OCRA's previous statistics. For example, the largest number of consumers served by age, 2,281, has consistently been the 3-to-17 years-old age group. The next largest is the 22-40 age group with 1,413 people served. The consistency

remains in the ratio of males to females served, also. OCRA has traditionally served more males than females, with approximately 61 percent of the consumers served being male and 39 percent being female. This is consistent with the percentage of regional center consumers who are male versus female. As of July, 2004, 60 percent of all regional center consumers were male and 40 percent were female.

Consumers residing in their parental or other family home remain by far the largest number of consumers served, with 5,129 consumers or 62 percent of those OCRA served living in their family home. The next largest group served is those living independently, with OCRA serving 1088 people or 13 percent with this living arrangement. DDS statistics show that 68.4 percent of regional center consumers live in their parent’s home and 9.7 percent live independently.

OCRA’s statistics on the ethnicity of consumers served from July 1, 2003, through June 30, 2004, show OCRA’s continuing commitment to serve underserved communities. The percentage of consumers from various ethnicities served by OCRA was:

Ethnicity	% Regional Center Clients (current)	% OCRA Clients 03/04	% OCRA Clients 02/03	% OCRA Clients 01/02	% OCRA Clients 00/01	% OCRA Clients 99/00
African-American	10.71	10	10	9	9	8
Latino	30.26	28	27	24	24	24
American Indian or Alaskan Indian	.41	1	1	1	1	1
Asian	5.37	5	4	3	5	4
Pacific Islander	2.23	1	1	1	1	1
White	44.46	47	49	47	48	56

Multicultural (self-identified)	Not listed	3	4	4	4	3
Unknown/Other	6.57	5	4	11	8	8

OCRA's statistics show improved service to Latino and Asian populations.

The types of problems which OCRA handles remain fairly consistent. For the time period covered by this report, OCRA handled 1,816 special education cases, 2,184 regional center matters, and over 200 cases each in the following categories: alleged abuse; conservatorships; consumer finance; family law matters; health issues; housing matters; income maintenance which includes Social Security, California Children’s Services, and In-Home Support Services, among others.

Lastly, the statistics once again point out the discrepancy between the number of cases that arise in any one regional center. OCRA believes that the number is affected by many factors, including but not limited to, the number of consumers served by the regional center, the level of experience of the advocate and the assistant advocate, continuity of staff, the willingness of a regional center to work cooperatively with OCRA in making referrals, the availability of other advocacy resources in the catchment area, and the effectiveness of OCRA’s outreach in a catchment area.

**X. RECOMMENDATIONS FOR ENHANCEMENT OF SERVICES**

The contract between DDS and PAI requires that on an annual basis PAI make recommendations to DDS as to methods of enhancement of the services that OCRA provides for regional center consumers. In the past, OCRA has expressed concerns about the number of consumers who request a greater level of service than OCRA is able to provide due to lack of sufficient staff. OCRA has been especially concerned that one advocate is mandated to serve the consumers of each regional center even though the number of consumers that a regional center serves may vary by thousands of people.



OCRA recognizes and is extremely appreciative of the fact that DDS has consistently supported this organization in its efforts to provide effective statewide advocacy to all consumers. When the state budget is more stable, OCRA will renew its efforts to increase its staff in order to more adequately protect the state's most vulnerable residents. In the interim, PAI remains appreciative of the state's on-going confidence placed in OCRA's ability to provide advocacy services to people with developmental disabilities.

## **XI. CONCLUSION**

OCRA's statistics show its staff's continuing commitment to the protection of the rights of people with developmental disabilities. OCRA handled over 8,258 cases last year, provided 246 trainings to over 19,252 people, and met each of its performance objectives. OCRA remains dedicated to ensuring that the rights of all of California's citizens with developmental disabilities are enforced.

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**\* Changes to office - as of August 17, 2004 – *Change is italicized.***

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**Office of Clients' Rights Advocacy**  
**100 Howe Avenue, Suite 240N**  
**Sacramento, CA 95825**  
**Telephone: (916) 575-1615**  
**Toll-Free: (800) 390-7032**  
**Fax: (916) 575-1623/TTY: (877) 669-6023**  
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**Office of Clients' Rights Advocacy**  
**3580 Wilshire Boulevard, Suite 925**  
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**Toll-Free: (866) 833-6712**  
**Fax: (213) 427-8772**  
**BACKDOOR NUMBER: (213) 427-8757**  
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**OCRALA Poly Com/Conference Room, Extension 3181**  
**OCRALA Kitchen, Extension 3176**

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(10:00 a.m. 4:00 p.m.)

***\*Cherita Laney, Volunteer Law Clerk*** -Sacramento  
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Supervised by Maria Bryant  
(Wednesdays only)

**ALPHABETICAL OCRA STAFF LISTING BY LAST NAME  
AND OFFICE LOCATION  
(INCLUDING VOLUNTEERS AND TEMPORARY STAFF)**

1-Alomar, Filomena.....VMRC  
2-Armand, Christine.....SCLARC  
3-Atamian, Lorie.....FNRC  
4-Bacigalupo, Anastasia.....SCLARC  
5-Bautista, Bernadette.....SDRC  
6-Broadhead, Frank..... RCRC  
7-Bryant, Maria.....ALTA  
8-Capra, Brian.....WRC  
9-Casada, Katie.....HRC  
10-Casas-Sarmiento Eva.....RCOC  
11-Castellanos, Eulalio..... KRC  
12-Cervantes, Veronica .....IRC  
13-Chestnutt, Lisa.....KRC  
*\*14-Clements, Wendy.....GGRC*  
15-Delgado, Aimee.....SGPRC  
16-Ferdon, Noelle.....FNRC  
17-Fong, Maureen.....ELARC  
18-Gallejos, Jacqueline.....ALTA  
19-Geary, Valerie.....KRC  
20-Gladson, Marcie.....OCRALA  
21-Gresham, Gail.....OCRASAC  
22-Hambright, Emma..... LRC  
23-Harris, Doug.....RCRC  
24-Harwood, Meriah.....WRC  
25-Hernandez, Gustavo .....ELARC  
26-Hernandez, Yulahlia.....NBRC  
*\*27-Cherita Laney.....OCRASAC*  
28 -Lipscomb, Arthur.....SARC  
29-Lusson, Katy.....GGRC  
30-Marquez, Guadalupe.....OCRALA  
31-Miller, Jacqueline.....RCOC  
32-Molineaux, Jeanne.....OCRASAC  
33-Moriel, Guadalupe.....RCOC  
34-Mottarella, Katherine.....TCRC  
35-Navarro, Lisa.....OCRASAC  
36-Neves, Leinani..... VMRC  
37-Olmo, Cristina..... NBRC

**38-Olmo, Elisa.....OCRASAC**  
**39-Ortega, Maria.....OCRALA**  
**40-Page, Lynne.....RCRC**  
**41-Palmer, Celeste.....RCEB**  
**42-Perez, Enid.....CVRC**  
**43-Phan, Jacqueline.....TCRC**  
**44-Poe, Tim.....NLACRC**  
**45-Pope, Matthew.....ELARC**  
**46-Quintero, Ada.....NLACRC**  
**47-Siegel, Marsha..... RCEB**  
**48-Spencer, Kay.....CVRC**  
**49-Tontodonato, Joe.....SDRC**  
**50-Torres, Gloria .....SARC**  
***\*51-Nicole Valentine.....OCRASAC***  
**52-Villafana, Nadia.....IRC**  
**53-Wagster, Irma.....OCRALA**  
**54-Wert, Richard.....WRC**  
**55-Ximenez, Alice .....OCRASAC**

Updated as of August 17, 2004  
F:\docs\Alice\CRALIST.doc

Office of Clients' Rights Advocacy  
Annual Report - July 1, 2003 through June 30, 2004  
Report by Service Level

	ARC	CVRC	ELARC	FNRC	GGRC	HRC	IRC	KRC	LRC	NBRC	NLARC	RCEB	RCOC	RCRC	SARC	SCLARC	SDRC	SGPRC	TCRC	VMRC	WRC	Total
0 - Pending	13	4	9	55	36	1	35	12	14	62	8	1	75	11	37	8	37	12	6	12	7	455
1 - Rights information/consultation	204	258	720	204	216	154	316	218	89	267	61	296	168	224	315	137	210	247	612	312	179	5407
2 - Referral to other advocacy services, including the service provided by PAI and area boards	11	31	10	18	14	15	13	43	16	29	45	18	2	4	17	51	11	11	15	16	119	509
3 - Fair hearing process / procedures	49	4	1	3	2	3	11	2	36	7	12	1	1	10	3	13	2	18	28		44	250
4 - Informal regional center / provider problem resolution	46	32	1	26	179	6	4	29	17	2	302	76	31	32	6	36	9	4	6	4	33	881
5 - Informal generic service agency problem resolution	19	87	4	17	12	11		52	37	2	59	136	4	38	5	40	3		7	3	65	601
6 - Direct representation in an informal fair hearing	3	3	3	1	1	2	1					1	5			4	4					28
7 - Direct representation in an appeal for generic services	5	3				4		12	1		3	6	1	2	1	7			1		2	48
8 - Direct representation at a formal fair hearing	11	4	4		1	2	1	3		2	2	5	1			2	1		1			40
9 - W and I 4731 complaint filing	4					1				1	2			1		1	2	2	3		3	20
10 - Court Litigation	3	3			1	1		2	3		1	1							1		1	17
None								1						1								2
<b>Total</b>	<b>368</b>	<b>429</b>	<b>752</b>	<b>324</b>	<b>462</b>	<b>200</b>	<b>381</b>	<b>374</b>	<b>213</b>	<b>372</b>	<b>495</b>	<b>541</b>	<b>288</b>	<b>323</b>	<b>384</b>	<b>299</b>	<b>279</b>	<b>294</b>	<b>680</b>	<b>347</b>	<b>453</b>	<b>8258</b>

Office of Clients' Rights Advocacy  
Annual Report - July 1, 2003 through June 30, 2004  
Report by Age Group

AgeRange	ARC	CVRC	ELARC	FNRC	GGRC	HRC	IRC	KRC	LRC	NBRC	NLARC	RCEB	RCOC	RCRC	SARC	SCLARC	SDRC	SGPRC	TCRC	VMRC	WRC	Total
0-3	2	7	13	3	5	3	3	6	6	2	10	5	2	3	6	3	4	1	11	2	8	105
3-17	63	162	188	93	82	68	125	137	70	74	96	144	83	67	123	131	82	94	204	71	124	2281
17-22	22	51	51	21	43	19	38	33	14	26	59	68	22	36	37	38	29	27	55	47	39	775
22-40	51	51	95	51	83	23	77	65	23	49	112	96	71	64	82	40	42	31	125	92	90	1413
40-50	19	20	25	28	36	8	34	22	6	12	58	60	30	44	39	15	13	14	49	43	34	609
50 and above	56	23	76	48	38	9	35	63	13	40	53	35	29	39	50	8	29	11	37	45	39	776
Unknown	3	3	2		2	1	3		1			1		2	2	1	1		2	3	3	30
Total	216	317	450	244	289	131	315	326	133	203	388	409	237	255	339	236	200	178	483	303	337	5989

Office of Clients' Rights Advocacy  
Annual Report - July 1, 2003 through June 30, 2004  
Report by County

	ARC	CVRC	ELARC	FNRC	GGRC	HRC	IRC	KRC	LRC	NBRC	NLARC	RCEB	RCOC	RCRC	SARC	SCLARC	SDRC	SGPRC	TCRC	VMRC	WRC	Total
Alameda			1		2					1		274						1		1		280
Amador																				6		6
Butte				161																		161
Calaveras																				10		10
Colusa	1																					1
Contra Costa												124									1	125
Del Norte														22								22
El Dorado	3				1																	4
Fresno		196																				196
Glenn				6																		6
Humboldt														124								124
Imperial																	5					5
Inyo								5														5
Kern							1	315												1		317
Kings		10																				10
Lake	1			1										75								77
Lassen				5								2					1					8
Los Angeles			449			127	4	2	133		382	1	2			229	1	173	2	1	331	1837
Madera		37																				37
Marin					83																	83
Mariposa		1																				1
Mendocino														32								32
Merced		22										1										23
Mono								4														4
Monterey										1					20							21
Napa										34											1	35
Nevada	1																					1
Orange						2	1				3	233	1			1						241
Placer	33			1																		34
Plumas				3			1															4

Office of Clients' Rights Advocacy  
Annual Report - July 1, 2003 through June 30, 2004  
Report by County

	ARC	CVRC	ELARC	FNRC	GGRC	HRC	IRC	KRC	LRC	NBRC	NLARC	RCEB	RCOC	RCRC	SARC	SCLARC	SDRC	SGPRC	TCRC	VMRC	WRC	Total
Riverside							102												1			103
Sacramento	143	1				1				1				1	1				1	2		151
San Benito							1								18							19
San Bernardino		1					202						1		1		2	1			1	209
San Diego					1		1						1		1	4	192				1	201
San Francisco	2				109							2									1	114
San Joaquin																				141		141
San Luis Obispo				1								1							50			52
San Mateo					91							2			1							94
Santa Barbara												1					2	112			1	116
Santa Clara	1	1			1					1					275					1		280
Santa Cruz															20							20
Shasta				44																		44
Siskiyou				6																		6
Solano										68		1									1	70
Sonoma										95		1			1							97
Stanislaus	1									1										123		125
Sutter	1			1																1		3
Tehama				14																		14
Trinity				1																		1
Tulare	4	48			1		1			1	1	1			1				1	3	1	63
Tuolumne	1																			11		12
Ventura						1	1										1	315		1		319
Yolo	20															1						21
Yuba	4																					4
Total	216	317	450	244	289	131	315	326	133	203	388	409	237	255	339	236	200	178	483	303	337	5989

Office of Clients' Rights Advocacy  
Annual Report - July 1, 2003 through June 30, 2004  
Report by Disability

	ARC	CVRC	ELARC	FNRC	GGRC	HRC	IRC	KRC	LRC	NBRC	NLARC	RCEB	RCOC	RCRC	SARC	SCLARC	SDRC	SGPRC	TCRC	VMRC	WRC	Total
5th Category	58	20	4	20	29	1	15	13	4	12	15	37	16	20	15	4	8	5	29	18	21	364
Autism	23	62	98	19	46	42	56	44	53	29	51	86	55	24	75	62	51	55	122	26	84	1163
Cerebral Palsy	19	29	40	26	26	15	52	20	14	22	13	63	37	27	15	28	31	21	48	43	63	652
Dual Diagnosis - 5th Category	1	4			2	1		1		5	4	6	5	3			1		1	1	12	47
Dual Diagnosis - Autism	1			2	1	4		2	9	5	15	1	3	2	6	1	2		1	3	5	63
Dual Diagnosis - Cerebral Palsy	2	3		2	2		3	7		11	2		3	3	3		3		10	2		56
Dual Diagnosis - Epilepsy			1	5	2	1			1	3	5	3		1			1	1	4	4	1	33
Dual Diagnosis - Mental Retardation	13	21	5	11	14	2	7	10	9	14	102	16	20	19	11	5	6	5	38	18	10	356
Early Start	3	6	1	1	3	9	1	7	3	3	12	12	6	6	7	5	2	4	17	1	14	123
Epilepsy	5	29	13	26	18	4	30	13		7	7	22	16	24	12	12	7	11	18	18	48	340
Mental Retardation	81	140	156	120	157	53	170	219	25	82	142	219	86	161	145	121	93	95	199	195	171	2830
Unknown	18	29	148	37	6	12	26	12	23	27	35	1	24	12	55	24	8	10	36	21	15	579
Total	224	343	466	269	306	144	360	348	141	220	403	466	271	302	344	262	213	207	523	350	444	6606



Office of Clients' Rights Advocacy  
Annual Report - July 1, 2003 through June 30, 2004  
Report by Ethnicity

Ethnicity	ARC	CVRC	ELARC	FNRC	GGRC	HRC	IRC	KRC	LRC	NBRC	NLARC	RCEB	RCOC	RCRC	SARC	SCLARC	SDRC	SGPRC	TCRC	VMRC	WRC	Grand Total
American Indian	2	2		9		1		5	2	2	2	1	3	12			2	1	2		1	47
Asian	3	6	48	8	39	12	3	7	8	6	8	41	15	4	39	2	4	20	6	6	9	294
Black (Not Hispanic/Latino Origin)	22	19	8	7	38	23	34	31	15	40	41	91	6	11	6	87	11	12	7	26	77	612
Hispanic/Latino	36	112	286	36	34	37	95	96	47	38	98	86	64	10	68	124	53	88	111	61	84	1664
Multicultural (Self-Identified)	6	5	17		29	5	5	9	5	3	21	8		4	6	4	7	3	14	1	26	178
Other						1				1	2		1		1			1			1	8
Pacific Islander	2		5	2	10		4	4	8	4	5	11	1		5	1	5	2	3	3	1	76
Unknown	23	4	12	65	5	9	33	1	20	8	12	5	6	6	44	4	11	1	4	10	3	286
White (Not Hispanic/Latino Origin)	122	169	74	117	134	43	141	173	28	101	199	166	141	208	170	14	107	50	336	196	135	2824
Total	216	317	450	244	289	131	315	326	133	203	388	409	237	255	339	236	200	178	483	303	337	5989

Office of Clients' Rights Advocacy  
 Annual Report - July 1, 2003 through June 30, 2004  
 Report by Gender

	ARC	CVRC	ELARC	FNRC	GGRC	HRC	IRC	KRC	LRC	NBRC	NLARC	RCEB	RCOC	RCRC	SARC	SCLARC	SDRC	SGPRC	TCRC	VMRC	WRC	Grand Total
Female	98	108	156	103	130	41	128	144	38	87	153	175	75	109	128	84	80	65	172	117	128	2319
Male	117	209	289	138	158	89	182	182	93	110	233	233	161	146	207	152	120	112	309	183	208	3631
Unknown	1		5	3	1	1	5		2	6	2	1	1		4			1	2	3	1	39
Total	216	317	450	244	289	131	315	326	133	203	388	409	237	255	339	236	200	178	483	303	337	5989

Office of Clients' Rights Advocacy  
Annual Report - July 1, 2003 through June 30, 2004  
Report by Living Arrangement

	ARC	CVRC	ELARC	FNRC	GGRC	HRC	IRC	KRC	LRC	NBRC	NLARC	RCEB	RCOC	RCRC	SARC	SCLARC	SDRC	SGPRC	TCRC	VMRC	WRC	Total	
Adult Residential Facility	13	6	3	1	13	3	25	16	1	5	7	42	25		3	16	3	5	43	28	13	271	
Board and Care	30			1	4		11	2		4	38	1	20	4	2	1			3	7	5	133	
Childrens Group Home	8			1	1	15	5	2	1		2	8	3		2	6	4	1	17	3	3	82	
Community Residential Home	3	10	1	1	1		8	3	2	7	4	3	1	1	4	3	1		1	19	1	74	
Detention Center		1			1	2		3											2			9	
Developmental Center	7	1			4	1	2	4				9		3		1	2			3	7	4	48
Federal Facility										1													1
Foster Care	1	3		3		6	2	3		2	2	9		2				1	1	2	2	39	
Foster Family Home	1	6		2	1	1	2	2	1	7	5	2		2		3	1	2	9	3	6	56	
Homeless	1	1		3	3	1		2	1	1		3	2			1		1	3	1	3	27	
ICF DD	2	1		1	1	1		1			6		3	3				2	9			30	
ICF DD-H		1			10			1			15	8		4					9	2	2	52	
ICF DD-N		1			3			2			1	7							4	7	1	26	
ICF/MR/Nursing Home					3		1	2			1							2				9	
Independent Housing	64	5	10	90	41	23	39	84	12	64	109	88	29	100	19	15	25	27	59	74	111	1088	
Intermediate Care Facility/Nursing Home					7					3	5		2		1		2		2	1		23	
Jail		4	1	2	5			5	1	1	1	5	11	4				1	1	6	2	51	
Large Group Home (more than 3 beds)	1	15		25	63	2		5	1	16	13	3		12	17		23	6	1	2	1	206	
Legal Detention	1			1													1					3	
Municipal Detention Facility/Jail					2					2					1			1		2		8	
Nursing Home		2	2					2				7	4	2	1						1	21	
Other	16	1						1	2		5		1		9		2		1	4	2	44	
Other Federal Facility								4			1			1								6	
Parental or Other Family Home	179	312	655	170	242	131	240	210	163	229	248	316	164	148	237	229	176	235	438	161	246	5129	
Prison			1	1			2	3	1		6		2			1			1	3	1	22	
Private General Hospital Emergency Rooms												1										1	
Private Institutional Hospital/Treatment Facility	2	1	1		6		1		1	1		2			1	3			1			20	
Private Institutional Living Arrangement			1			1		1		1		1	1		2							8	
Private Institutional School	2	1			1							2			1							7	
Psychiatric Wards of Private General Hospitals		1					1			1			1				2					6	
Psychiatric Wards of Public General Hospitals	3					2	3	5		3		3			1		2		3			25	
Public Institutional Hospital/Treatment Facility	3	3		1	7		2			2	1	1		1	1		2	3	3		4	34	
Public General Hospital Emergency Rooms																	1	1				2	
Public Institutional Living Arrangement	1		1		5		1		3			1			2					1		15	
Public Residential School					1	1		1						1			1	1		1		7	
Semi-indepent Home or Apartment	1	32	2	1	4	1	2		3	1	2	1	1	5	14		2	1	18	1	26	118	
Small Group Home (3 beds or less)	1	2		1	5	3	8	2		3				1	17		2				1	46	
Specialized Nursing Facility/Nursing Home					6		1				2	2	6		1	1				3		22	
Supervised Apartment	4	3			10					5	7	19	1	14	10				30		5	108	
Unknown	24	16	74	19	12	6	23	10	20	13	5	6	8	18	37	17	30	4	17	9	13	381	
<b>Total</b>	<b>368</b>	<b>429</b>	<b>752</b>	<b>324</b>	<b>462</b>	<b>200</b>	<b>381</b>	<b>374</b>	<b>213</b>	<b>372</b>	<b>495</b>	<b>541</b>	<b>288</b>	<b>323</b>	<b>384</b>	<b>299</b>	<b>279</b>	<b>294</b>	<b>680</b>	<b>347</b>	<b>453</b>	<b>8258</b>	

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<b>A - Abuse</b>																						
Coercion (PADD/PAIMI/PAIR)				1										1								2
Financial exploitation (PADD/PAIMI/PAIR)														1					2			3
FTP appropriate medical treatment (PADD/PAIMI/PAIR)																			1			1
Inappropriate / excessive physical restraint / seclusion / isolation (PADD/PAIMI/PAIR)					2																	2
Physical assault (PADD/PAIMI/PAIR)					2														1			3
Sexual assault (PADD/PAIMI/PAIR)																			1		1	2
Threat of retaliation or verbal abuse by facility staff (PADD/PAIMI/PAIR)							1							1								2
<b>Total</b>				<b>1</b>	<b>4</b>		<b>1</b>							<b>3</b>					<b>5</b>		<b>1</b>	<b>15</b>
<b>C - Education</b>																						
Early intervention / Transition to public schools ( PADD/PAIR)					1										3							4
Failure to conduct multi-disciplinary evaluations (PADD/PAIMI/PAIR)															1		1					2
IEP/ ISFP planning / development / implementation (PADD/PAIMI/PAIR)				2	2			4					1	5	7				2	1		24
Inappropriate discipline / suspension / expulsion (PADD/PAIMI/PAIR)				1										2	2							5
Least restrictive environment (PADD/PAIMI/PAIR)				1	4														2			7
Other education (PADD/PAIMI/PAIR)				1	1					1				1	7							11
Other related service issues (other than AT) (PADD/PAIMI/PAIR)			1					2						5								8
Violation of procedural safeguards (PADD/PAIR)															1		1					1
<b>Total</b>			<b>1</b>	<b>5</b>	<b>8</b>			<b>4</b>	<b>2</b>	<b>1</b>			<b>1</b>	<b>13</b>	<b>21</b>		<b>1</b>		<b>4</b>	<b>1</b>		<b>62</b>
<b>D - Employment</b>																						
Discrimination in termination (PADD/PAIMI/PAIR/PABSS)															1							1
Wage and Hour Issues (PADD/PAIMI/PAIR/PABSS)				1																		1
<b>Total</b>				<b>1</b>											<b>1</b>							<b>2</b>
<b>E - Financial Entitlements</b>																						
DAC (Social Security Disabled Adult Child) benefits (PADD/PAIMI/PAIR)																	1					1
Other financial entitlements (PADD/PAIMI/PAIR/PABSS)				1											1		1					3
SSDI/SSI outstanding warrants (PADD/PAIMI/PAIR)															1							1
SSDI/SSI overpayment - work related (PADD/PAIMI/PAIR)															1		1					2

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SSI eligibility (PADD/PAIMI/PAIR)		1					1										1					3
<b>Total</b>		<b>1</b>		<b>1</b>			<b>1</b>								<b>3</b>		<b>4</b>					<b>10</b>
<b>F - Healthcare</b>																						
Access to medical treatment/services/managed care (PADD/PAIMI/PAIR)				1																		1
Health Insurance (access to private/denial of coverage) (PADD/PAIMI/PAIR/PABSS)															1							1
IHSS eligibility (PADD/PAIMI/PAIR/PABSS)															2							2
IHSS protective supervision (PADD/PAIMI/PAIR/PABSS)														1								1
Medi-Cal / Medicare issues (PADD/PAIMI/PAIR/PABSS)																	1					1
Medi-Cal eligibility (PADD/PAIMI/PAIR/PABSS)														1								1
Medi-Cal mental health—under age 21 (except TBS) (PADD/PAIMI/PAIR)																	1					1
Medi-Cal services (PADD/PAIMI/PAIR/PABSS)														1								1
Medi-Cal share of cost (PADD/PAIMI/PAIR/PABSS)																			4			4
Other health care issues (PADD/PAIMI/PAIR)					1	1								2	3							6
<b>Total</b>				<b>1</b>	<b>1</b>									<b>5</b>	<b>6</b>		<b>2</b>		<b>4</b>			<b>19</b>
<b>G - Housing</b>																						
Accommodations in housing (PADD/PAIMI/PAIR/PABSS)								1						1	2		1					5
Homeownership - Sales / contracts (PADD/PAIMI/PAIR/PABSS)				2				1														3
Landlord / tenant - eviction (PADD/PAIMI/PAIR/PABSS)							2							4			1					7
Landlord / tenant - other (PADD/PAIMI/PAIR/PABSS)	1			1	2			1	1													6
Other housing issues (PADD/PAIR)															2							2
Public and Subsidized housing / Section 8 (PADD/PAIMI/PAIR/PABSS)														1								1
<b>Total</b>	<b>1</b>			<b>3</b>	<b>2</b>		<b>2</b>	<b>3</b>	<b>1</b>					<b>6</b>	<b>4</b>		<b>2</b>					<b>24</b>
<b>H - Neglect</b>																						
FTP personal care (hygiene, clothing, food, shelter) (PADD/PAIMI/PAIR)							1															1
FTP personal safety (client-to-client abuse) (PADD/PAIMI/PAIR)															1							1
FTP personal safety (physical plant and environment) (PADD/PAIMI/PAIR)								3														3
<b>Total</b>							<b>1</b>	<b>3</b>							<b>1</b>							<b>5</b>
<b>I - Other</b>																						



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<b>Total</b>			1	1	1		2	2						1	25								33
<b>OCRA - 4731 Complaint</b>																							
4731 - No Jurisdiction															1								1
4731 - Regional Center	2	2	1			3	1			1	4	1	11		1		4	4	4			4	48
4731 - Service Provider	2		3							1	1		1	5				3	1	2	1		20
<b>Total</b>	<b>4</b>	<b>2</b>	<b>4</b>			<b>3</b>	<b>1</b>			<b>2</b>	<b>5</b>	<b>1</b>	<b>12</b>	<b>5</b>	<b>2</b>	<b>5</b>	<b>4</b>	<b>7</b>	<b>5</b>	<b>2</b>	<b>5</b>	<b>69</b>	
<b>OCRA - Abuse</b>																							
Coercion			1	1			1			1		1											5
Exploitation (Financial)	2		3	1	1	1	1			1	2	10	1	4	2				8	6	5		48
Exploitation (Physical/Emotional)	1	2										1			1	1			1				7
Inappropriate/Excessive Medical Treatment			1					2									1						4
Inappropriate/Excessive Medication			3																				3
Inappropriate/Excessive Physical Restraint		2			4	1	1		1								1			1			11
Inappropriate/Excessive Seclusion				3									1							1			5
Other Abuse	2	3	4	5	4	2			1	7	2	6		5	1	3			2	3	1		51
Physical Assault	2		2	1	7	2	5		1	1	2	2	1	1	1	2					6	4	40
Sexual Assault			2		14	2	5		1	5	1	3		2	1	2			3	4	3		48
Staff Attitude/Behavior	1	1	6	1	3			3				1										1	17
Staff Retaliation								1				1											2
Verbal Abuse					1			2						1		1			1	1			7
<b>Total</b>	<b>8</b>	<b>8</b>	<b>22</b>	<b>12</b>	<b>34</b>	<b>1</b>	<b>9</b>	<b>19</b>		<b>6</b>	<b>15</b>	<b>19</b>	<b>12</b>	<b>6</b>	<b>12</b>	<b>4</b>	<b>10</b>		<b>15</b>	<b>22</b>	<b>14</b>	<b>248</b>	
<b>OCRA - Assistive Technology</b>																							
California Children's Services (CCS)					1	2							1		1				2				7
Medi-Cal												1	4							1			6
Other AT	1				1	1			1		1										3		8
Private Health Care Plan													2										2
Regional Center					1	2		1	1					2					2				9
Social Security						1							7										8
Vocational Rehabilitation																					1		1
<b>Total</b>	<b>1</b>				<b>3</b>	<b>6</b>		<b>1</b>	<b>2</b>		<b>2</b>	<b>14</b>	<b>2</b>	<b>1</b>					<b>4</b>	<b>2</b>	<b>3</b>	<b>41</b>	
<b>OCRA - Consent</b>																							
Capacity/Incapacity of Client						1				1		2	2						2	1			9
Informed Consent	3					1					5	1	1						2	1			14
Substitute Judgment												4											4
<b>Total</b>	<b>3</b>					<b>2</b>				<b>1</b>	<b>5</b>	<b>7</b>	<b>3</b>						<b>4</b>	<b>2</b>		<b>27</b>	
<b>OCRA - Conservatorship</b>																							
Change of Conservators	2				1			2			1		2	1	1			1	1	3			15

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Conservatee's Rights			1	1	3	1				1	27	1		3	2		2			3	4	49
Conservator Duties	1		4							1	3	1	1	7	1		1		4	2	2	28
Establishing Conservatorship (General)	2		25	2	2		13	1		11	5	3		2	2	8	2	8	2	4	1	93
Establishing Conservatorship (Limited)	4	1	4		5	7		8		5	34	5	3	10		11	4	5	17	11	9	143
LPS Conservatorship		2	1											1		1		3				8
Termination of Conservatorship		4			3		1	2			3	3	3	4	1				3	3	2	32
<b>Total</b>	<b>9</b>	<b>7</b>	<b>35</b>	<b>3</b>	<b>14</b>	<b>8</b>	<b>14</b>	<b>13</b>		<b>18</b>	<b>73</b>	<b>13</b>	<b>9</b>	<b>28</b>	<b>7</b>	<b>20</b>	<b>9</b>	<b>17</b>	<b>27</b>	<b>26</b>	<b>18</b>	<b>368</b>
<b>OCRA - Consumer Finance</b>																						
Debt Collection	3	4	4	13	2		1	6	1	4	8	5	2	3	3		2	3	9	6	11	90
Other Consumer Finance	4	6	6	6	8	4	8	30	2	25	9	4	3	10		1	6	1	10	7	5	155
Special Needs Trust		1	6	2	5	2	3	1		4	7	3	2	1					9	5	7	58
<b>Total</b>	<b>7</b>	<b>11</b>	<b>16</b>	<b>21</b>	<b>15</b>	<b>6</b>	<b>12</b>	<b>37</b>	<b>3</b>	<b>33</b>	<b>24</b>	<b>12</b>	<b>7</b>	<b>14</b>	<b>3</b>	<b>1</b>	<b>8</b>	<b>4</b>	<b>28</b>	<b>18</b>	<b>23</b>	<b>303</b>
<b>OCRA - Discrimination (Other than Employment)</b>																						
Architectural Barriers		1												1								2
Discrimination	1		5	2	2		1	2	1	4	7		6	3			5		6	3	2	50
Higher Education (Public and Private)												1									1	2
Insurance Discriminationn						2		1														3
Public Accomodations (Hotels, Restaurants, Etc.)							3		1	1	1			1	2		1	1				11
Public Services (Federal, State, Local)		2		1	1	1	1			2			1	2	1		2		1	1	1	17
Racial Discrimination							1															1
Transportation (Public and Private)			2	1							2		1	1			2					9
<b>Total</b>	<b>1</b>	<b>3</b>	<b>7</b>	<b>4</b>	<b>3</b>	<b>3</b>	<b>6</b>	<b>3</b>	<b>2</b>	<b>7</b>	<b>10</b>	<b>1</b>	<b>8</b>	<b>8</b>	<b>3</b>	<b>10</b>	<b>1</b>	<b>7</b>	<b>4</b>	<b>4</b>	<b>95</b>	
<b>OCRA - Education</b>																						
Adult Education Programs		5			1					1			1				1			1		10
Assessment		3	7	3		2	6		2	1	3	2	4	1	5		2	7	5		2	55
Complaint Procedures	2	20	25		4	5	5	1	1	4	5	12	4	4	6	6	6	4	11	2	3	130
Day Care							1	1					1									3
Due Process Procedures	3	10	27		3	2	2		2	2	2	5	1	2	3	6	2	2	4	1	6	85
Eligibility		2	1	2	1		1					3			1	1	1		2	2		17
Extra Curricular Activites		1		1						1				2			1		3			9
Full Inclusion (Except Pre-School)	1	2	5	1	7		1			1		8	1		1		1	5	10	2		46
Higher Education			5					2	1			1							3	1		13
Home/Hospital Instruction		1								1		1			2		1		2			8
IEP Development	15	21	103	38	21	11	17	87	16	17	17	9	2	8	10	20	6	35	27	10	11	501
Least Restrictive Environment	3	10	3	3	1	3	1	1	1	9		9				1	4	1	5		1	56
Mental Health Services	1	3		3						1		1			1				3			13
Non-Public School Placement		5	2		5	2	2		2	3		3	2			2	5		6		2	41



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OT/PT		6		1			2				1	1	3			1	1	1	4		1	22
Other Education	1	17	13	2	2	4	6	7	7	1	1	2	2	4	2	3	5	5	11	6	1	102
Part C - Early Start/Early Intervention					6	1	1		2			11	1		2			2				26
Positive Behavioral Intervention	7	12					2		3		1	5	2	2		2	1	4	15	3	1	60
Preschool Full Inclusion			2		1	2				1			1			1			2			10
Preschool Programs		7		1	2	2	1		2			7	1		4	1		1	4			33
Public School Placement	2	21	4	2	12	3	5	3	3		1	14	7	1	15	16	5	4	24	5	2	149
Related Services		20	3	5	8	11	6	11	6	6	2	21	8		24	10	6	5	29	3	6	190
Residential Placement							2					1										3
Suspension/Expulsion		17	1	3	3	2	3	1		2	3	4	1	1	4	1			4	8		58
Transition Planning		4	4	1	1	2			5	2	1	10			3	1	3		1	1	8	47
Transportation	2	5	3		6	1	2	6	1	5	2	5	2	2	7	6	2		6	3	1	67
<b>Total</b>	<b>37</b>	<b>192</b>	<b>208</b>	<b>66</b>	<b>84</b>	<b>53</b>	<b>66</b>	<b>120</b>	<b>54</b>	<b>58</b>	<b>39</b>	<b>135</b>	<b>44</b>	<b>27</b>	<b>90</b>	<b>78</b>	<b>53</b>	<b>76</b>	<b>181</b>	<b>48</b>	<b>45</b>	<b>1754</b>
<b>OCRA - Employment</b>																						
Employment	9	1	2	1			7	3	1	2									1	1	4	32
Employment Discrimination: Firing			4		2		1					3		1	1				4	1	4	21
Employment Discrimination: General			3				1					2								2	1	9
Employment Discrimination: Hiring								1				2	1							1		5
Employment Discrimination: Reasonable Accomodations	1		1		2	1			3	1				1					2		1	13
Long-Term Disability Benefits																					2	2
Supported Employment	1		1	1			1	1	2			1		1				1	3	1	1	15
Worker's Compensation											1								2	2	1	6
<b>Total</b>	<b>11</b>	<b>1</b>	<b>11</b>	<b>2</b>	<b>4</b>	<b>1</b>	<b>10</b>	<b>5</b>	<b>6</b>	<b>3</b>	<b>1</b>	<b>8</b>	<b>1</b>	<b>3</b>	<b>1</b>			<b>1</b>	<b>12</b>	<b>8</b>	<b>14</b>	<b>103</b>
<b>OCRA - Family</b>																						
Child Support		4						2		2	3			5	1	3	1	1			3	25
Dissolution			2	5			1	3		2	2	3		5	1	2		1		3	7	37
Family - Other	7	4	28	2	22		4	2	1	9	17	3	4	9	4	3	2	2	1	8	2	134
Guardianship of Minors			1	3				1		8	1	5	1	5		3		4	4	3	3	42
Parenting/Custody	4	13	7	7	2		1	10	1	4	5	7	1	7	1	6	5	1	4	5	9	100
Wills, Trust and Estate Planning		8	2		1			1			1		1	7			1		5	1	3	31
<b>Total</b>	<b>11</b>	<b>29</b>	<b>40</b>	<b>17</b>	<b>25</b>		<b>6</b>	<b>19</b>	<b>2</b>	<b>25</b>	<b>29</b>	<b>18</b>	<b>7</b>	<b>38</b>	<b>7</b>	<b>17</b>	<b>9</b>	<b>9</b>	<b>14</b>	<b>20</b>	<b>27</b>	<b>369</b>
<b>OCRA - Forensic Mental Health Issues</b>																						
Criminal Justice Issues		1			11	3	1	12	2			14		7						2	5	58
Diversions						1		1			4	5		2								13
Incompetent to Stand Trial (IST)								1						1				1		2	1	6
<b>Total</b>		<b>1</b>			<b>11</b>	<b>4</b>	<b>1</b>	<b>14</b>	<b>2</b>		<b>4</b>	<b>19</b>		<b>10</b>				<b>1</b>		<b>4</b>	<b>6</b>	<b>77</b>
<b>OCRA - Health</b>																						

Office of Clients' Rights Advocacy  
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	ARC	CVRC	ELARC	FNRC	GGRC	HRC	IRC	KRC	LRC	NBRC	NLARC	RCEB	RCOC	RCRC	SARC	SCLARC	SDRC	SGPRC	TCRC	VMRC	WRC	Total
CCS Eligibility			2							2	3	1						1			1	10
CCS Services		3	4	1	1	1				8		1		1		4		1		1	3	29
Denial of Coverage	5		1				2			2	2	1				2	1			1	3	20
In Home Nursing/Medical Care	2	2	1		8	1	2	1	3	6	1	1	1		5		2	4		2	9	51
Medi-Cal Eligibility			2			1	1		3		1	9		3		1	1	2	7	3	9	43
Medi-Cal Services	1		1	1	4	4	2	2	2	8		8		2		3	2	3	1	4		48
Medi-Cal Share of Cost/Co-Payment	1	1					1		1	1		6		1				3	5		2	22
Medical Treatment	2	6	1		16	3	7	11	4	7	3		2	4	3	1	2		13	5	6	96
Private Insurance			6			1	2			1	9		1					2	5		5	32
<b>Total</b>	<b>11</b>	<b>12</b>	<b>18</b>	<b>2</b>	<b>29</b>	<b>11</b>	<b>17</b>	<b>14</b>	<b>13</b>	<b>35</b>	<b>19</b>	<b>27</b>	<b>4</b>	<b>11</b>	<b>8</b>	<b>11</b>	<b>8</b>	<b>16</b>	<b>31</b>	<b>16</b>	<b>38</b>	<b>351</b>
<b>OCRA - Housing</b>																						
Housing Discrimination	2	1			2			2		2			1		3	1	2			2	1	19
Landlord/Tenant	1	1	18	18	2	2	1	9	5	6	13	7	2	10	1	4	6	7	2	12	24	151
Ownership of Property	1			1				5		2		1			1		1	2		1	3	18
Reasonable Accommodations	2	1	2	1	9	1	3	4	1	3	1	2		1	4		3	1			2	41
Section 8	1	2	1	1		1	1		2	6	2	4		1		2	4		2		2	32
Subsidized Housing		1	1	2		1			1					1					3			10
Zoning/Restrictive Covenants															2							2
<b>Total</b>	<b>7</b>	<b>6</b>	<b>22</b>	<b>23</b>	<b>13</b>	<b>5</b>	<b>5</b>	<b>20</b>	<b>9</b>	<b>19</b>	<b>16</b>	<b>14</b>	<b>3</b>	<b>13</b>	<b>11</b>	<b>7</b>	<b>16</b>	<b>10</b>	<b>7</b>	<b>15</b>	<b>32</b>	<b>273</b>
<b>OCRA - Immigration</b>																						
Citizenship Interview	2							1														4
Immigration			9	2	1	1			1	4	8	4	4		1	6		3	3			47
<b>Total</b>	<b>2</b>		<b>9</b>	<b>2</b>	<b>1</b>	<b>1</b>		<b>1</b>	<b>1</b>	<b>4</b>	<b>8</b>	<b>4</b>	<b>4</b>		<b>1</b>	<b>6</b>		<b>4</b>	<b>3</b>			<b>51</b>
<b>OCRA - Income Maintenance</b>																						
Disability Benefits and Work									1					3								4
IHSS Eligibility		6	17	4	1	1	6		4		4	16		4		3	5		5		10	86
IHSS Number of Hours	2	7	37	2	2	4	2		2		3	11	2	12		6	2	3	2		8	107
IHSS Protective Supervision	1	2	3		1		3		1		1	4		2		1		2	2		5	28
IHSS Share of Cost and Other			3	3		1						2	1			1			3		2	16
Income Maintenance	1		4	2			9	1			1	9		3		1	1		5	3	6	46
Other Program Eligibility	1	1	2			5			1			2		1		1			3		7	24
SSA Benefits, Child Benefits (SSDI)			1	3			2				2	5		3		1			3		10	30
SSI - Other	5	13	49	1	3		6	1	7		4	8		7	3	5	2	4	8	8	10	144
SSI Eligibility	3	8	25	9	5	6	5		3		6	31		9	1	11	2	5	11	5	23	168
SSI Overpayment	3	4	16	3	15	1	6		2		4	8		12		6	2	2	10	5	19	118
Welfare Reform														1								1
<b>Total</b>	<b>16</b>	<b>41</b>	<b>157</b>	<b>27</b>	<b>27</b>	<b>18</b>	<b>39</b>	<b>2</b>	<b>21</b>		<b>25</b>	<b>96</b>	<b>3</b>	<b>57</b>	<b>4</b>	<b>36</b>	<b>14</b>	<b>16</b>	<b>52</b>	<b>21</b>	<b>100</b>	<b>772</b>



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Report by Problem Codes

	ARC	CVRC	ELARC	FNRC	GGRC	HRC	IRC	KRC	LRC	NBRC	NLARC	RCCEB	RCOC	RCRC	SARC	SCLARC	SDRC	SGPRC	TCRC	VMRC	WRC	Total	
Personal Autonomy	6	4	5	4	12		14	8	5	7		12	1	4	4	6	6		8	9		115	
Recovery of Personal Property	1						2	2		1		1								1		8	
Rights of/Denial of Personal Possessions				1				1						3					4	3		12	
Rights of/Denial of Privacy - Association	1	1		5	1		5					4		1	1							19	
Rights of/Denial of Privacy - Mail	1								1		2											4	
Rights of/Denial of Privacy - Religion																1						1	
Rights of/Denial of Privacy - Search and Seizure																			1			1	
Rights of/Denial of Privacy - Sexuality		2										3			2	1				1		9	
Rights of/Denial of Privacy - Telephone	1				1		1						1							3		7	
Rights of/Denial of Recreation					1		1	1				1								1		5	
WIC §5325.1 Rights	1			1																	2	4	
<b>Total</b>	<b>11</b>	<b>7</b>	<b>5</b>	<b>11</b>	<b>15</b>		<b>23</b>	<b>12</b>	<b>6</b>	<b>8</b>	<b>2</b>	<b>21</b>	<b>2</b>	<b>8</b>	<b>7</b>	<b>8</b>	<b>6</b>		<b>14</b>	<b>19</b>		<b>185</b>	
<b>OCRA - Records</b>																							
Access	2				3		1			3	2	1	3	3	3	1	1			4		4	31
Breach of Confidentiality	1							1		1		3		1				1	1			2	11
Denial of Access		1							1		1	1		1			1					1	7
<b>Total</b>	<b>3</b>	<b>1</b>			<b>3</b>		<b>1</b>	<b>1</b>	<b>1</b>	<b>4</b>	<b>3</b>	<b>5</b>	<b>3</b>	<b>5</b>	<b>3</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>5</b>		<b>7</b>	<b>49</b>	
<b>OCRA - Regional Center Services</b>																							
Assessment of Needs	3		12	2	5	8	1	1	5	6	1	4	13		2		9	7	3	11	3	96	
Community Living Arrangements	2	1	2	3		4	6	1		3	4	14	3	1	2	4		1	5	3		59	
Coordination with County Mental Health		2		2						1										1		6	
Crisis Prevention Services	1						3	1				1				1	1	1	3	3		15	
Day Training and Activity		1	22	2	4	1	1		6	2		7		1	2	3		1	15	4	7	79	
Eligibility	58	28	37	24	26	14	38	14	11	27	7	23	20	12	28	23	14	19	37	29	23	512	
Family Support Services	16	7	2	9	6	7	19	5	5	8	10	14	17	11	3	10	6	1	17	4	13	190	
Hearing Procedures	18	3	14		1	4	11		4	12	21	5	3		1	9	11	34	7	1	12	171	
IPP Development	16	4	7	5	4	3	3	2	1	15	3	2	1	1	4	6	5	21	16	1	10	130	
IPP Implementation	9	1		5	4	1	2	1	1	5	5	2	2	2	2		4	4	4			54	
Lanterman Act - Case Management	12	5			1	2	2	6		10	15	15				11	2	1	7	1	1	91	
Lanterman Act - DDS Policies/Procedures	8		1							1	5	3				1			3		1	23	
Lanterman Act - Regional Center	12		1	2				4	15	10	28	4	1	4	27	2	2	1	4		1	118	
Licensed Residential Services					1	5					1						1	1	3			12	
Prevention Services				1	1		1						1	1	1	1		1	2	2	2	14	
Regional Center Services - Other	15	23	62	12	37	18	16	13	34	7	79	3	25	9	48	16	18	13	37	17	4	506	
Supported Living	2	1		1	8	4	3	1		5	6	3	1	2	4	1	5	3	12	6	7	75	
<b>Total</b>	<b>172</b>	<b>76</b>	<b>160</b>	<b>68</b>	<b>98</b>	<b>71</b>	<b>106</b>	<b>49</b>	<b>82</b>	<b>112</b>	<b>185</b>	<b>100</b>	<b>87</b>	<b>44</b>	<b>124</b>	<b>88</b>	<b>78</b>	<b>109</b>	<b>176</b>	<b>82</b>	<b>84</b>	<b>2151</b>	
<b>OCRA - Right to Culturally Appropriate Services</b>																							



**OFFICE OF CLIENTS' RIGHTS ADVOCACY**  
**Protection & Advocacy, Inc.**  
**100 Howe Avenue, Ste. 240N**  
**Sacramento, CA 95825**  
**Phone (916) 575-1615/Fax (916) 575-1623/TTY (916) 575-1624**

Memo

To: OCRA Advisory Committee  
From: Jeanne Molineaux, Director  
Date: 8/19/2004  
Re: Consumer Satisfaction Surveys 2004

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Attached are the results of the current Consumer Satisfaction Survey. The survey was sent out for the period of January 1, 2004, through June 30, 2004. Every fourth closed case was randomly selected from OCRA's computer intake system to receive a survey, which included a self-addressed stamped envelope.

Five hundred eighty surveys were mailed out. Two hundred and five people returned the survey. This represents a 35 percent return rate. The results were excellent. Of those responding to the questions, 93 percent of the respondents who answered the questions felt they were treated well by the staff, 94 percent understood the information they were provided, 95 percent believed their CRA listened to them, 84 percent believed they were helped by the Clients' Rights Advocate, 89 percent would ask for help from the Clients' Rights Advocate again. Lastly, 85 percent received a call back within two days.

OCRA is justly proud of the results of its Consumer Satisfaction Survey.

	<u>Satisfied</u>	<u>Not Satisfied</u>	<u>Did Not Check</u>
	☺	☹	
1. I was treated well by the staff.	183	14	8
2. My call was returned within two (2) days.	168	32	5
3. I could understand the information I got.	185	16	4
4. My Clients' Rights Advocate listened to me.	187	14	4
5. I was helped with my question/problem by my Clients' Rights Advocate.	165	33	7
6. I would ask for help from the Clients' Rights Advocate again.	175	22	8

**Comments:** <sup>1</sup>

- Maria Bryant was easy to talk to and she made me feel good about following thru.
- Doug Harris is competent , consistent, creative, and persistent. I enjoy working with him.
- I was very happy with the service I receive.
- ☺
- Lupe Moriel was very helpful & compassionate.
- I found the staff, Kathy and Jackie, very helpful.
- You did not help me or \_\_\_\_\_ at all!!! I will call you again. You were not helpful or even cared about my son!!
- The problem involved placement options and was resolved through other agencies.
- I don't know that this should have been mailed to me as your office was unable to take my case. Your office was understaffed and too

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<sup>1</sup> The comments are copied directly from the survey forms, including punctuation and spelling. If an adverse statement was made about a specific person or agency, the name was deleted for purposes of this report.

- busy to take us on. We had to seek our own counsel independent of your agency.
- Excellent care from our son's Tri-Counties Service Rep.
  - The advocate was total waste of time.
  - Necesito mas informacion como pueden ayudarme mas en mis necesidades y como aprender mas. (I need more information on how you can help me with my needs and how I can learn more.)
  - Mrs. Maggie Roberts has provided most professional and helpful action to improve and protect my son's education rights and rights by regional center. We really appreciate her guidance.
  - Tim has been an excellent advocate for consumers!
  - Thank you very much!!
  - My health is declining fast I have seizers (Cerebral Palsy) from RCRC pays H-Car for me but 77 hours isn't enough. It's really not enough hours for me. I shake real bad and I'm in a hospital bed. I need someone to stay with me. My husband goes to program I'm under a doctors care. I can't be alone doctor says.
  - Your office was very helpful and supportive. Thanks for helping special need families.
  - I have had two workers and they were both wonderful. Especially Tammy Enns. Kay Spencer is great also, I don't know what I would have done without them.
  - Regional Centers doesn't help there client very much.
  - Mrs. Katy Lusson was very helpful and understanding about the whole case.
  - Great job. I need more help.
  - I don't feel that enough was there to help me. Info and direction.
  - Attorney Kathy Lusson and Cindy Freeman were excellent. I just wish I could meet them in person.
  - Thanks, great service!
  - Both Mr. Poe and Ms. Quintero were extremely helpful and know their stuff.
  - Thank you for all the help especially Matt Pope!
  - This consumer is placed from out of the area, is extremely disabled and has no available family. It would be in his best interest to be conserved by the Public Guardian. I am hopeful that it necessary, CRA can help expedite the process.
  - CRA makes the wheels turn.



- The RCEB does good work. We'd like some "hands on" demonstration help, which has never happened. I can't remember calling the RCEB CRA.
- Brian Capra is an excellent Rights Advocate person. He assisted \_\_\_\_\_ in appealing for SSI benefits. She won \$18,000.
- Mr. Dennis Craig was very professional and responded well in a timely manner.
- El Sr. Matt Pope, nos trato muy bien, nos escucho y ayudo bastante, estamos muy agradecidos con el y nuestra coodinadora \_\_\_\_\_. Felicidades por tan buenos elementos, mil gracias. (Mr. Matt Pope treated us very well, he listened to us, and helped us very much, we are very appreciative with him and our coordinator \_\_\_\_\_. Congratulations for having such good employees, a million thanks.)
- Brian Capra is an excellent Rights Advocate person. I really enjoy working with him!
- A Celeste Palmer, gracias por ayudarme, por defenderme, y escucharme que Dios la bendiga. (To Celeste Palmer, thank you for helping me, for defending me, and listening to me, God bless you.)
- Me trataron excelentemente y me resolvieron muy bien mi problema y en corte tiempo. (I was treated excellently and my problem was resolved very well and in such short time.)
- I didn't feel that the staff understood my daughters ability, even I explained myself very well. I though that there was more info as how to get lawyers that deal with this. How to ask for conservatorship yourself.
- I am very thankful for all the help I receive.
- They are excellent! Brian and Meriah
- Excellent! Everything was immediate and wonderful.
- I was disappointed when I was told that I would not have representation and that my concerns/issues were not as important as the people they were currently helping.
- Gracias por su ayuda y su representacion. (Thank you for your help and your representation.)
- That she was a nice worker.
- Agradecer toda la ayuda y apoyo que nos dieron a mi e hijo. (I appreciate all the help and support given to me and my son.)
- I am thankful you are there to help.

- The worker is extremely busy and sometimes does not get back right away but is always ready to listen when I call again and is very helpful.
- Meriah Harwood the person who assisted me, was absolutely wonderful in helping with issues.
- Mr. Brian Capra went out of his way to explain more than twice to me what I wanted to know on behalf of my client.
- I disagree and complain of the Regional Center's service.
- It would be nice, if you could show some patience and sympathy.
- Que les agradezco mucho la amabilidad y el gusto como me atendieron y llevaron mi caso. Siempre les estare agradecida. Gracias. (I very much appreciate the amicability and the goodness of your attention in taking my case. I will always be appreciative. Thank you.)
- The CRA is always an excellent source of information and always responds in a timely manner. Thank you.
- The consumers are complaining that they are not getting called back and that they are not getting help. Please send a Spanish form to \_\_\_\_\_.
- Was told by the advocate she could assist. Scheduled a meeting-advocate requested it be in - explained I could not ...
- Maria Bryant was great.
- Frank does a good job.
- I didn't get any assistance at all whatsoever. I went by myself and won the case.
- Que me llame porque quiero que me ayude en otra cosa sobre el nino. (That you give me a call because I need assistance on another matter.)
- Please keep everyone peaceful. I know they worry about me a lot.
- Katy Lusson is a wonderful advocate.
- The people I spoke to were helpful. The book is the best!
- Meriah Harwood & Brian Capra are excellent advocates!
- He was pleasant over the phone and very helpful!
- Thank you-Lupe Moriel, Eva and Jacquelyn for your advice, patience and concern. \_\_\_\_ ....
- Kati Hornberger was the most responsive, knowledgeable and effective advisor I've used to help my autistic son. Thank you all for being there!

- Tambien siempre recomiendo sus servicios. (I always recommend your services.)
- Meriah Harwood is wonderful – follow up on information in a very thorough manner. Thanks!
- I was turned away and told that they were currently handling a high volume of cases so I should advocate for myself.
- Please keep Marsha Segal. We need her to help regional center clients when we have problems. I really feel Marsha Segal really cares and sensitive to my problem. I can call her if I need to ....

**OFFICE OF CLIENTS' RIGHTS ADVOCACY**  
**Protection & Advocacy, Inc.**

**MEMORANDUM**

Date: July 16, 2004

To: Jeanne Molineaux

From: Eva Casas-Sarmiento

Re: **Annual Outreach Report for the Period of July 1, 2003  
through June 30, 2004**

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**OVERVIEW**

OCRA has a strong commitment to providing services to consumers who are members of under served communities. To this end, OCRA has made a commitment to have each of its 21 offices develop target outreach plans where one underserved community of color is selected as a focus for outreach during the fiscal year. Each OCRA employee is required to complete a minimum of at least 3 outreach activities to a traditionally underserved community of color they have identified for the fiscal year. This commitment to conduct target outreach is done in an effort to ensure that OCRA resources are being equitably distributed among the diverse pool of regional center consumers and not just to those agencies/groups that already happen to know about OCRA.

OCRA employees from offices throughout the state were highly resourceful in seeking key contacts within their target underserved community. Some conducted "Intake Clinics" for consumers and family members from their regional center at remote locations selected by the target group members; some conducted substantive law trainings on topics selected by the target group members; others staffed information booths and tables at important conferences and trainings sponsored by the target group members. On some occasions, OCRA staff simply went to a private home and held informal talks with a small group of members from the target community. In most cases, target outreach activities resulted in a traditionally underserved group of consumers or their family members learning of OCRA for the very first time. Many of the target outreach activities were conducted in remote, rural communities such as in the Far North counties, Central Valley farm worker communities, and Imperial Valley and San Bernardino

communities. Other outreach activities took place in highly impoverished urban areas such as South Central Los Angeles and Oakland communities.

By conducting target outreach activities, OCRA seeks to, at a minimum, achieve parity with regional center demographics regarding the ethnicity of the consumers that OCRA serves. As the chart below indicates, this past year OCRA continued to make steady progress in our commitment to reach out to traditionally underserved communities of color. The number of Latino and Asian consumers served during this past fiscal year increased by one percent for each of these two groups. This brings OCRA yet one step closer towards at least achieving parity with regional center ethnicity demographics.

Ethnicity	% Regional Center Clients (current)	% OCRA Clients 03/04	% OCRA Clients 02/03	% OCRA Clients 01/02	% OCRA Clients 00/01	% OCRA Clients 99/00
African-American	10.71	10	10	9	9	8
Latino	30.26	28	27	24	24	24
American Indian or Alaskan Indian	.41	1	1	1	1	1
Asian	5.37	5	4	3	5	4
Pacific Islander	2.23	1	1	1	1	1
White	44.46	47	49	47	48	56
Multicultural (self-identified)	Not listed	3	4	4	4	3
Unknown/Other	6.57	5	4	11	8	8

## **CHANGES TO POLICIES AND PROCEDURES**

This past year also brought a few new changes to our existing policies and procedures affected by target outreach activities. In an effort to improve and streamline target outreach activities, OCRA made several changes in outreach reporting procedures and in employee hiring goals.

First, this past year OCRA began using a new electronic outreach report form to track outreach activities taking place throughout the state. Before this new outreach report form came into effect, information from hardcopy outreach reporting forms had to be tabulated manually. Now, employees no longer need to complete a hardcopy outreach report form. OCRA employees can now access this new outreach report form via the internet on our employee web page. The new software can easily be used to run reports to track different aspects of outreach throughout the state. This new on-line outreach report form allows OCRA to gather relevant outreach statistics more easily and efficiently.

Second, OCRA helped develop an employee web page that contains a master calendar of outreach activities being conducted by employees of all of PAI's different programs, not just OCRA. The on-line calendar of PAI outreach events is expected to help OCRA better coordinate outreach activities with other PAI employees.

Third, this past year 12 out of the 21 OCRA offices selected the Latino community as their target outreach community because of the overwhelmingly high number of Latino regional center consumers in the state. This required that OCRA pay special attention to the linguistic and cultural needs of this community. OCRA assessed the linguistic diversity of its existing staff. As a result, for some offices OCRA implemented changes in language diversity hiring goals in offices where there were vacancies to fill and which needed Spanish-speaking staff. In addition, an Assistant CRA was designated in the North and in the South to do Spanish intakes for those offices where neither the CRA nor ACRA speak Spanish. In an effort to also better utilize the language skills of existing employees, a rotation schedule was set up where staff who speak other languages are available to assist when necessary.

## **END OF PREVIOUS TARGET OUTREACH PERIOD**

By June 30, 2004, OCRA completed work on individual target outreach plans that had been in effect since July 1, 2003. The outreach committee will be evaluating

status reports and doing an analysis of whether OCRA employees met their target outreach goals and objectives set out in their outreach plans.

The outreach committee will also be working with staff to develop new target outreach plans that will be in effect from August 2004 through June 2005. Each office has received current statistics regarding their individual regional center ethnicity demographics and their individual office intake ethnicity demographics for the fiscal year 2003/2004. This data will help each office decide which underserved community of color they will focus their target outreach activities to during this new fiscal year. The outreach committee conducted three teleconferences with staff throughout the state to review OCRA's outreach structure and policies and procedures. The new target outreach plans are scheduled to take effect in August of this year and run for a period of eleven (11) months.

### **HIGHLIGHTS OF OUTREACH ACTIVITIES THIS PAST QUARTER**

1. Kern Regional Center - 6/5/04; H.E.A.R.T.S. Connection Spanish Support Group Training
2. Valley Mountain Regional Center – 4/12/04; Lao Family Outreach; Presentation on OCRA Services
3. Valley Mountain Regional Center – 4/26/04; Hmong Family Outreach Group in Stanislaus; Introduction to OCRA Services
4. Far Northern Regional Center – 5/12/04; El Grupo Apoyo, Rowell Family Empowerment Center; Special Education Training
5. Redwood Coast Regional Center – 5/11/04; Coyote Valley Education Center; Native American Outreach; Special Education Training
6. Redwood Coast Regional Center – 4/2/04; Lake County Spanish Support Group; Special Education Training
7. Golden Gate Regional Center – 6/5/04; MATRIX Parent Network and Resource Center; Spanish Special Education Training
8. North Bay Regional Center – 6/29/04; PRIDE Industries; 2-Day Training on OCRA Services and Intake Clinic
9. Central Valley Regional Center – 4/13/04; Exceptional Parents Unlimited; Spanish Support Group; Presentation on OCRA Services
10. San Andreas Regional Center – 6/28/04; Padres Apoyando a Padres; Presentation on OCRA Services
11. TriCounties Regional Center – 6/15/04; Santa Maria Family First Resource Center; Spanish Presentation on OCRA Services
12. Harbor Regional Center - 7/10/04; Booth/Table at the Lotus Festival (Asian Community)

13. Harbor Regional Center – 6/24/04; Chinese Parents Association for the Disabled; IPP Process Training
14. South Central Regional Center – 6/23/04; Corazon De La Familia; Presentation on OCRA Services and Early Start Services
15. Orange County Regional Center – 6/4/04; Fiesta Familiar Spanish Support Group; Presentation regarding OCRA Services, Regional Center and Special Education Services
16. Westside Regional Center – 6/26/04; Home Ownership Made Easy (HOME); Spanish Support Group; Introduction to OCRA Services
17. Westside Regional Center – 6/12/04; Fiesta Educativa Annual Educational Conference (Outreach to Latino Community); Table/Booth and IHSS Training
18. San Diego Regional Center – 4/24/04; San Diego Fiesta Educativa; Special Education Training
19. Lanterman Regional Center – 4/23/04; 27<sup>th</sup> Annual Conference on American Indians; Information Table/Booth
20. Lanterman Regional Center – 5/24/04; Grupo Esperanza Spanish Support Group; Presentation on OCRA Services
21. East L.A. Regional Center – 6/18/04; Spanish Parent Support Group; IHSS Training



## OCRA ADVISORY COMMITTEE

### **Advisory Committee Members:**

Eric Ybarra, Co-Chair (Stockton)  
John Graber, Co-Chair (Huntington Beach)  
Octavio Garcia (Santa Cruz)  
Billy Hall (Glendale)  
Maria Montenegro (Santa Ana)  
VACANT

Portia Lemmons, Board Liaison

OCRA Advisory Committee Meeting  
(By Telephone, March 6, 2004)

In Attendance:

Billy Hall	John Graber
Richard Wert	Eric Ybarra
Catherine Blakemore	Octavio Garcia
Jeanne Molineaux	Maria Montenegro

The meeting was called to order by John Graber and Eric Ybarra.

- 1) The purpose of the telephone meeting was to update committee members on proposed legislative and regulatory changes in regional center and other benefits, such as IHSS.
- 2) Jeanne discussed with the members the Legislative Analyst's Office recommendation of a 10% reduction in OCRA's budget. Committee members offered to help meet with members of both houses' finance department.

Respectfully submitted,

Jeanne Molineaux

OCRA ADVISORY COMMITTEE MEETING  
FRIDAY, MAY 21, 2004  
Embassy Suites Hotel  
Sacramento, CA  
10:00 a.m. – 3:00 p.m.

DRAFT MINUTES

Attendees:

Maria Montenegro, Leticia Soto – Maria’s interpreter, Eric Ybarra, James Knight – Eric’s attendant, Billy Hall, Octavio Garcia, Portia Lemmons by teleconference, Jeanne Molineaux, Alice Ximenez, Noelle Ferdon, Maria Bryant, Brian Capra, Lisa Navarro, Catherine Blakemore, Evelyn Abouhassan, Eric Gelber

Reading of last OCRA Advisory Committee Teleconference on March 6, 2004 -

Maria motioned to approve last teleconference meeting minutes. Billy motioned second. Minutes approved.

Review of current agenda.

Voting Machines and Accessibility – Catherine Blakemore gave update on topic. Secretary of State currently working with staff on “screen readers,” but at the current time, problem with no paper trail if this moves forward. If this moves forward, this would possibly increase staff in the DD PSA PAI Unit. Discussion on Conservatorship was brought up as well. Jeanne will find out about issue for Eric re large print on absentee voting ballots.

PAI Board Meeting in June –

Jeanne recommended that OCRA Advisory Committee members to PAI board meeting in June and do a report on the OCRA Bingo Game.

Evelyn Abouhassan gave update on PAI sponsored legislation and status. Billy, Eric and Maria said they were interested in testifying at future committee meetings when applicable. Jeanne recommended that Virginia and Evelyn do a training in the fall to train Billy, Eric and Maria on how to testify to prepare them for those situations where they have option to testify.

Next OCRA Advisory Committee Meeting –

Since Maria is a member of the Fiesta Educativa, she will be attending meetings regularly and she will give an update to OCRA Advisory Committee at future meetings.

OCRA Recruitment Reminder to everyone –

OCRA recruiting new members to OCRA Advisory Committee. Jeanne recommended that one more additional seat be created for the advisory committee so that a person from the Asian Community can be hired to reach underserved populations.

Adjourned 3:00 p.m.

## ADVOCACY REPORT

### OFFICE OF CLIENTS' RIGHTS ADVOCACY

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**SPRING, 2004**

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#### **BENEFITS**

#### **OCRA Successfully Appeals Denial of Eligibility by California Children's Services.**

L.E. is a 5-year-old girl with cerebral palsy. L.E. was in need of a wheelchair and other medical equipment, medical services, and physical and occupational therapy. L.E. did not qualify for full scope Medi-Cal. The school district has refused to provide therapy services stating they were not educationally-related. L.E.'s parents initially applied to CCS in January, 2003. California Children's Services (CCS) denied medical services, stating the consumer did not meet medical eligibility. CCS also failed to provide the consumer with adequate written notice of the denial.

OCRA agreed to provide direct representation and appeal the CCS determination. OCRA sent the first-level written appeal to the County Department of Health Services, and argued the merits of the case with both the administrative director and the medical director of County CCS. County CCS agreed to withdraw the denial and have the consumer evaluated by a different CCS-paneled physician. Following the new evaluation, the CCS medical director again denied that L.E. was medically eligible.

Following the second denial, OCRA submitted a new written appeal with additional medical information that addressed each of the physician's medical findings. Although CCS again denied eligibility, it granted eligibility following OCRA's filing for a hearing request. CCS is now providing therapies and medical equipment to L.E. Tim Poe, CRA, North Los Angeles County Regional Center.

**OCRA Fair Hearing Request Prompts Approval of Special Bed.**

M.G. is a young boy with spastic quadriplegia, a seizure disorder, severe visual impairment and other conditions. Violent involuntary movements of his muscles frequently throw M.G. from his bed. Over 2 years ago, his guardians requested that CCS provide a Vail bed to keep M.G. Safe. A Vail bed has side railings and a tent-like top. The guardian's request was denied. The CRA filed a "first-level" hearing request on M.G.'s behalf, receiving another denial based on the conclusion that the bed was "not medically necessary to treat or ameliorate the...neuromuscular condition." The denial suggested some alternative devices that the guardians had already tried unsuccessfully. The CRA filed a request for a fair hearing but before the hearing was scheduled, CCS reversed its position and granted the request for the bed. Lynne Page, CRA, Redwood Coast Regional Center.

**SSI Waives an Overpayment Allegedly Caused by an Award from a Class Action Lawsuit.**

The mother of J.L. called the OCRA office stating that she had received notice of an overpayment from Social Security. The notification indicated that J.L. was being charged for an overpayment resulting from an award of In-Home Supportive Services (IHSS) back wages. J.L. had received an award of \$2,000 plus interest from an IHSS class action case in 2001. Three years later, when determining SSI benefits, the Social Security office was counting the interest from the award as income.

OCRA gathered and reviewed all available records, researched the applicable law, and consulted with the attorney of the class action case. OCRA subsequently filed for a waiver and request for reconsideration and attended the reconsideration meeting. At the meeting, OCRA argued detrimental reliance, hardship, and fairness principles, and the overpayment was waived. Bernadette Bautista, CRA, San Diego Regional Center.

**C.M. Obtains Necessary IHSS.**

C.M. is a 4-year-old girl who was verbally denied IHSS twice, due to her age. After attending an OCRA training, C.M.'s mother called IHSS over the phone to apply again. When she was denied for the third time, the mother contacted OCRA. OCRA contacted the IHSS ombudsman and was given the contact information for a worker that would take her application over the

phone. OCRA helped the mother complete the self-assessment packet and prepare for potential questions from the IHSS worker during the assessment. After the assessment, C.M. was awarded 71 hours of IHSS per month. Katie Casada Hornberger, CRA, Harbor Regional Center

**Child Receives Needed Rate of Adoption Assistance Payment.**

D.M. is a young boy who has been diagnosed as having autism and mental retardation. D.M. has severe behaviors that make it difficult to care for him. D.M. has lived with his legal guardian since he was an infant. D.M. was removed by the Department of Children and Family Services (DCFS) from his biological mother because of neglect. D.M. is categorized as a “dual agency” child as he receives service from both the regional center and the Department of Social Services (DSS).

Foster parents of “dual agency” children are entitled to the regional center rate for placement rather than the standard foster care rate. D.M.’s legal guardian was getting the standard foster care rate for caring for D.M. D.M. was assessed by the regional center to require a 4d level of care. D.M.’s guardians sent the notice of the assessed rate to DSS and it refused to implement the regional center rate. D.M.’s parents filed for a hearing.

OCRA represented the family and negotiated with the county appeals worker. D.M.’s family was granted the regional center rate retroactive to the date of placement. The increase in the monthly payments is \$1,921 per month. He also received a retroactive award in the amount of \$111,500. This money will enable the family to secure all of the services and supports that D.M. needs to overcome his early hardships. Katie Casada Hornberger, CRA, Harbor Regional Center.

**Consumers Appeal Improper Medi-Cal Share of Cost.**

M.N. and R.C. each live in their own apartments. To pay their living expenses, each relies on Disabled Adult Child (DAC) Benefits on the Social Security wage records of a parent. Because their DAC benefits are more than \$810 per month, neither receives SSI or SSI-linked Medi-Cal. Each needs Medi-Cal, however, to cover Medicare co-pays and medical services their Medicare does not cover. When Alameda County assigned them a Medi-Cal share of cost, M.N. and R.C. were faced with the choice of paying for medical expenses with income

budgeted for other things, or else going without needed medical care.

Because of an OCRA training, M.N.'s independent living skills agency and R.C.'s supported living agency knew that certain DAC recipients had a legal right to receive Medi-Cal without a share of cost. The service providers contacted OCRA to confirm that because both M.N. and R.C. had lost SSI because of an increase in their DAC benefits, they were entitled to Medi-Cal without a share of cost. The providers helped M.N. and R.C. appeal the improper share of cost determinations, using forms and the legal authority OCRA had distributed at the training. Both appeals were successful and both consumers continue to receive Medi-Cal without a share of cost. Marsha Siegel, CRA, Regional Center of the East Bay.

**Department of Rehabilitation Funds \$7,000 of Auxiliary Equipment.**

E.Y. is diagnosed with cerebral palsy, epilepsy and a visual impairment. E.Y. is a college student at Delta Community College pursuing a degree in broadcast communication in radio and television. E.Y. qualified for Department of Rehabilitation (DR) services and requested auxiliary equipment in order to study and complete his homework at home. DR approved all of the specialized equipment which included a DELL computer with zoom technology, color printer, talking calculator, Parrot Organizer and a closed-caption TV with a zoom lens to enlarge prints of any document.

Although DR approved the auxiliary equipment a year ago, E.Y. had not received any of the equipment. E.Y. attempted several times to advocate for himself but received no response to his messages. E.Y. contacted OCRA for advocacy assistance. The Assistant CRA contacted DR. The DR counselor apologized for the delay and stated it was due to staff changes and lack of follow through. Although the authorization process had to be restarted, the DR counselor guaranteed the order would be authorized as soon as possible. The DR counselor called the following day and advised that items requested has been approved and ordered and the equipment would be delivered and installed in two weeks. Filomena Alomar, Assistant CRA, Valley Mountain Regional Center.



**5-Year-Old Awarded Significant Increase in IHSS Benefits.**

A.O. is a 5-year old girl diagnosed with moderate mental retardation, epilepsy and leukemia. A.O., who previously received 122 hours of IHSS, requires constant supervision due to self-injurious behaviors and her fragile medical conditions.

OCRA provided technical assistance to A.O.'s parent in preparing for the assessment by IHSS. This assistance included discussing the case with the consumer's physician and drafting an IHSS letter for the physician to sign. Following the new assessment, IHSS awarded A.O. an additional 161 hours, giving the consumer a total of 283 IHSS hours per month. Tim Poe, CRA, Ada Quintero, Assistant CRA, North Los Angeles County Regional Center.

**OCRA Representation at IHSS Hearing Preserves Entitlement to Protective Supervision.**

J.M. is a pleasant, mild-mannered young man who sometimes gets so frustrated at not being able to communicate his thoughts that he will bite himself. Because of this potential for self-injury, and because he has little safety awareness, he received protective supervision as one of his IHSS services. Contra Costa County proposed eliminating the protective supervision. J.M.'s mother contacted OCRA for help.

OCRA provided J.M.'s mother with PAI's IHSS Fair Hearing and Self-Assessment Packet. Because J.M. had originally been approved for protective supervision without its having been explained, OCRA worked with his mother to clarify what purpose protective supervision served, and what factors indicated it was needed. OCRA represented J.M. at his hearing. The administrative law judge's decision granted the claim and restored J.M.'s protective supervision. Marsha Siegel, CRA, Regional Center of the East Bay.

**CRIMINAL LAW**

**OCRA Provides Technical Assistance.**

OCRA received a call from E.W.'s social worker who had just been notified that E.W. had been arrested for drunk and disorderly conduct. E.W., who

had recently become eligible for regional center services, had a court hearing at the end of the week.

E.W. has a history of homelessness, substance abuse, and petty crimes. With regional center support, E.W. moved into a supported living apartment through a local agency. He had only been in the apartment for one day when he was arrested.

The staff from his SLS program was contacted. They thought that the charges were not important and were going to accompany E.W. to court. OCRA accompanied E.W. to his arraignment. The court showed a video explaining the legal and procedural rights of those accused of crimes. At the end of the video, E.W. asked if this was criminal court. He did not understand any of the video.

OCRA assisted E.W. in requesting a continuance and a public defender. E.W. qualified for defender services and will work collaboratively with OCRA to have the charges dropped or to create an acceptable diversion plan. Katy Lussion, CRA, Golden Gate Regional Center.

***Consumer Arrested under Patriot Act Obtains Federal Pre-trial Diversion in Texas.***

J.P. is a 47-year-old man with mild mental retardation, bipolar disorder and a heart condition. J.P. likes to travel to new places and has taken cross-country trips without a plan or money on several occasions. In early April, J.P. disappeared and his group home filed a missing person report. Soon after, J.P. called his service coordinator from a mental health facility in Florida complaining that he had not eaten in three days. The regional center contacted J.P.'s mother, who sent money for J.P. to travel back to California by bus. When the bus stopped in Texas, J.P. refused to get back on the bus. J.P. called police and claimed there was a bomb on the bus. Police traced the call and arrested J.P. at the bus station.

J.P. was charged in state court for making terrorist threats, interfering with public transportation and making a false police report. The Federal Bureau of Alcohol, Tobacco, and Firearms and Explosives also opened an investigation. The regional center helped a Texas court advocate to get a public defender appointed for J.P. It initially appeared that J.P. could possibly return to California under conditions of probation in Texas. Then

the federal government decided to take jurisdiction and charged J.P. with violations of the Patriot Act. The regional center contacted OCRA for assistance.

OCRA obtained a copy of J.P.'s file and learned that he had been in and out of the regional center system throughout his life. OCRA discovered documentation from 1981, where a similar incident had occurred in California, at which time, J.P. was admitted to a developmental center in lieu of incarceration. OCRA noticed J.P.'s latest psychological assessment did not assign a mental retardation diagnosis, despite all other reports identifying J.P. as having this disability. OCRA had the regional center write a record review summary explaining the discrepancy as a documentation error. OCRA also learned that J.P. had recently stopped taking his anti-psychotic medications because his mother believed the medications were sedating J.P. OCRA contacted the Federal Public Defender's Office in San Antonio and forwarded over this documentation. Further, OCRA contacted Texas' Protection and Advocacy system and requested that a staff person visit J.P. at the jail, ensure that he was getting his medications for his heart and mental health, and become involved in advocating for a less restrictive setting for J.P. pending his court hearing. With the information acquired from OCRA and the regional center, the Federal Public Defender was successful in getting the Patriot Act charges dismissed in exchange for a pre-trial diversion requiring J.P. to admit himself into a state hospital in Texas. Brian Capra, CRA, Westside Regional Center.

## **FAMILY LAW**

### **Consumer Received Visitation with Her Child.**

T.M. is a 24-year old consumer with mild mental retardation. The CRA was approached by T.M.'s social worker to represent T.M. in a domestic violence restraining order against her mother. According to T.M., her mother has physically, verbally, and financially exploited her for many years. T.M. reported being coerced by her mother to give up T.M.'s parental rights over her daughter through a guardianship. T.M. has not seen her daughter in over a year.

T.M. was married in January, 2003, and had a child with her husband. Problems with her mother escalated at that point. It took a lot of courage for T.M. and her husband to stand up to T.M.'s mother, but they did so with support from many relatives, friends, and professionals from the regional center.

OCRA agreed to represent at a hearing on the TRO that was filed by T.M. to prevent abuse by her mother. The courtroom was full of family members on both sides; nineteen people. After some contentious moments, the mother agreed to the restraining order. Also, court ordered mediation was ordered for T.M. and her parents to schedule visitation with her daughter. Enid Perez, CRA, Central Valley Regional Center.

## **HOUSING**

### **OCRA Assists Consumer in Eviction Matter.**

J.A. has mild mental retardation, a mental health diagnosis, and blindness. J.A. is a former developmental center resident now living in San Diego County under a supportive living services (SLS) program. J.A.'s SLS plan requires an overnight attendant. J.A. and a former SLS worker signed a lease, but the SLS worker transferred to another client and a new SLS worker from the same agency began serving J.A. In late February, J.A. and the former SLS worker were served with a 3-day notice to perform covenants or quit. J.A. and the new SLS worker met with the property manager, who informed J.A. that he was violating the lease because the new SLS worker was staying overnight 3 consecutive days and was not on the lease. J.A. and the new SLS worker agreed to remove the former SLS worker's name from the lease and add the new SLS worker's name. The property manager told J.A. and the new SLS worker to disregard the 3-day notice. When J.A. attempted to pay rent days later, his money was rejected and he and the former SLS worker were served with an unlawful retainer complaint. J.A.'s service coordinator contacted OCRA for assistance.

OCRA contacted the Legal Aid Society of San Diego and arranged for J.A. and his new SLS worker to obtain assistance in filing an answer to the complaint. OCRA advised the regional center to forward to the legal aid attorney the case ID notes documenting J.A. and the SLS worker's efforts to

comply with the property manager's request. J.A.'s attorney negotiated with the property management's attorney to have J.A. remain at the premises for 30 days, with the 24-hour support of the new SLS worker, until J.A. could find alternative housing. The eviction was rescinded and will not go on J.A.'s credit report. Brian Capra, CRA, Westside Regional Center.

## **PERSONAL AUTONOMY**

### ***Right to Refuse Medical Treatment Preserved.***

E.C. is diagnosed with mental retardation, type II diabetes, a moderate hearing impairment and multiple orthopedic medical conditions. E.C. resides at a nursing facility. E.C. recently endured a hip replacement whereby the first operation resulted in an infection and a second surgery was required within a two-week period. E.C. suffered unbearable pain as a result. When the regional center and medical staff approached the consumer again to do more diagnostic testing to determine the reason for the chronic hip problems, E.C. refused any further medical treatment or diagnostic tests. The regional center was considering a temporary limited conservatorship to have diagnostic testing done against E.C.'s will.

OCRA investigated the case. During the interview, E.C. was lucid and had a basic understanding of her medical concerns but was adamant about not wanting further testing or surgeries. The team reviewed her doctor's recommendations with her but she still declined any further tests. E.C. was willing to get more treatment if it were a "life or death" situation but, since it was not, E.C. was exercising her right to refuse medical treatment. E.C. was capable of making her own medical decisions. The CRA agreed to advise the regional center nurse manager of E.C.'s personal choice to refuse further medical treatment at the present time.

The CRA represented E.C. in the regional center's medical clinic to advocate that E.C. made an informed choice to refuse medical treatment. The team recognized that the consumer was lonely and most likely the etiology of the refusal to accept medical treatment was from

the trauma she experienced during post-operation medical treatment (e.g. multiple hip surgeries, bone scans, x-rays and knee infection).

The CRA suggested connecting E.C. with a companion or support person. RC agreed to fund a residential care home visit three-to-five times per week for a few hours. This person could come to the nursing facility to visit and provide social activities to help E.C. The team is hopeful that this companion home visit plan will renew E.C.'s desire to be more independent and productive again rather than frustrated and confined to her hospital bed all day.

E.C.'s right to refuse medical treatment was supported by finding a creative accommodation of supports and by not pursuing a temporary conservatorship. Leinani Neves, CRA, Valley Mountain Regional Center.

### **OCRA Assists Client in Challenging His Conservatorship.**

B.K. is a young adult male with mild mental retardation. Two years ago, B.K.'s father petitioned for, and obtained, a limited conservatorship over B.K. The conservatorship included the right to fix B.K.'s residency and to contract on B.K.'s behalf. After the conservatorship was granted, B.K. worked at a department store for a year and was going to be offered a full time position. He learned to balance his checkbook with a calculator. He improved his health and lost weight. He developed a circle of friends and went to church with his best friend. He showed interest in further building his social network by asking to attend summer camp. He expressed interest in getting his driver's license and living independently.

B.K.'s father had different opinions about how B.K.'s life should be. B.K.'s father made B.K. stop attending church with his friend because B.K.'s family was raised with a different religion. B.K.'s father ignored B.K.'s money management skills and, as representative payee, kept all of B.K.'s earned income and SSI benefits. Among other items, B.K. needed money to purchase a belt after he lost weight and to ride the bus. B.K.'s father disregarded B.K.'s desire to live independently. When B.K.'s group home administrator and regional center service coordinator advocated for B.K. to live independently, B.K.'s father made complaints against them and had a new service coordinator assigned. B.K. and his group home administrator called OCRA for assistance in terminating his conservatorship.

OCRA contacted the regional center and apprised it of B.K.'s wish to terminate his conservatorship. The regional center discovered that it was not notified of the first conservatorship. The regional center contacted the probate investigator, who agreed, after meeting B.K., that termination proceedings should be pursued. The Probate Volunteer Panel (PVP) attorney assigned to B.K.'s case was the same PVP attorney who represented B.K. during the first conservatorship. The PVP attorney wanted a report from the regional center as a condition for representing B.K. in the termination proceeding. OCRA requested that the regional center obtain a report from its psychologist establishing B.K.'s capacity to make his own decisions. With this report, the PVP attorney agreed to assist B.K. in terminating his conservatorship. Brian Capra, CRA, Meriah Harwood, Assistant CRA, Westside Regional Center.

### **Consumer Makes Difficult Decisions.**

Y.S.'s regional center social worker contacted the OCRA office about Y.S., a 30-year old woman who has a dual diagnosis of mental retardation and schizophrenia. She is currently in a residential and day program and doing quite well. Before that, she had been living with her mother and grandmother in another county.

The mother had been investigated for fraud relating to Y.S.'s SSI checks. The grandmother and mother reside in different counties and both were pressuring Y.S. to leave her program and live with one of them. Mother, especially, was pressuring Y.S., and was also calling her residence and leaving threatening messages for the staff.

OCRA visited Y.S. at her day program. She said that she was very happy at work and home and did not want to leave but felt that she had to listen to her mother. She also said that she had not seen her mother for quite some time and missed her. We asked her if she would like to visit her mom and she became quite excited.

OCRA worked with the regional center and the residential provider to arrange a visit between Y.S. and her mother. The residential program was willing to transport Y.S. The visit was arranged for a long weekend. However, before the visit actually happened, Y.S.'s mother made several more threatening calls to both the regional center and the residential

provider, indicating that if Y.S. came to see her, she would not let her leave. The CRA again went to see Y.S. and explained the situation, and asked her what she wanted. She said that she wanted to see her mother, but she did not want to leave her programs.

OCRA assisted Y.S. in writing a letter to her mother, telling her that she was not going to travel to see her, and inviting her mother up to visit her. Y.S. seemed content with this resolution, as she was very worried about traveling to her mother's home and not being allowed to leave. Her mother has responded that she will visit Y.S. in the near future. Katy Lusson, CRA, Golden Gate Regional Center.

**O.L. Learns Self-Advocacy Skills And The Importance Of Standing Up For His Rights.**

O.L. is a 19-year old bilingual man who loves to play his keyboard and care for his pet parakeet. O.L. had the goal of living in a group home, away from his parents. After repeated attempts and finally securing placement, he was continuously removed from his new group home without his consent by his parents.

The lack of control over his environment and the instability affected his moods and made O.L. depressed. This caused him to act violently, which eventually landed him in the crisis center. Finally O.L. had enough and approached OCRA for help. OCRA assisted O.L. to communicate his need for independence to his parents.

OCRA assisted O.L. in drafting a contract that outlined when and under what conditions O.L. would accept his parents as visitors to his home. O.L. also wanted to include in his contract the consequences that his parents would have to pay if his wishes were not respected. After a long and difficult meeting, O.L.'s parents began to understand that their son was growing up and needed more independence and discretion over his own life. They promised to respect his wishes and hoped that their relationship would improve over time. Yulahlia Hernandez, CRA, Cristina Bravo Olmo, Assistant CRA, North Bay Regional Center.



### **OCRA Advises Client on Social Security Benefits.**

K.E.'s primary source of income was \$790 in SSI benefits. Previously, K.E. had been paying \$560 in rent and when she moved into another apartment, her rent increased to \$675. Both of K.E.'s parents have been deceased for years and the father, who died recently, set up a special needs trust (SNT) for K.E. prior to his death. The SNT is managed by K.E.'s cousin. K.E.'s independent living skills (ILS) worker contacted OCRA, upon request of K.E.'s cousin, to determine how much money K.E. could receive from the SNT and still be eligible for SSI and Medi-Cal. Their concern was that with the raise in K.E.'s rent, K.E. had very little to live on after bill payments and her quality of life would diminish.

OCRA informed K.E.'s ILS worker and K.E.'s cousin that the SNT income is unearned income and would count against K.E.'s SSI payments dollar for dollar after the first \$20 received each month. OCRA advised K.E. to apply for Social Security benefits under the Dependent Adult Child (DAC) program, which, depending on the benefit amount, could replace the SSI. More importantly, the DAC benefit disregards income so more SNT money could be disbursed to K.E. for her to live on after paying rent and her bills. K.E. applied and was granted eligibility for DAC benefits of \$781 per month. The DAC benefit, when combined with K.E.'s earnings from her supported employment program, replaces her SSI payments. This will allow for over \$200 from the SNT to help supplement K.E.'s monthly income and still keep K.E. eligible for zero share of cost Medi-Cal. Brian Capra, CRA, Westside Regional Center.

### **OCRA Helps Consumer Get New Clothes.**

J.T. is a 47-year-old consumer with mental retardation. He approached OCRA at an outreach presentation and asked for help in getting new clothes. OCRA contacted the regional center. After speaking with the program manager at the regional center, OCRA found out that J.T. had between \$400 and \$500 in his P & I account. The regional center agreed to take J.T. shopping for new clothes. Nadia Villafana, Assistant CRA, Inland Regional Center.

## **REGIONAL CENTER**

### ***N.V. Is Eligible for Regional Center Services.***

N. V. is a 4-year-old girl who received services from the regional center as part of the Early Start program. At age three, N.V.'s parents were informed that N.V. would no longer be eligible to receive regional center services because she did not have autism. N.V.'s parents disagreed, claiming that the regional center failed to consider documentation of the severity of N.V.'s disability. OCRA agreed to investigate.

Upon review of N.V.'s case file, including recent psychological assessments, OCRA concluded that N.V. was a strong candidate for regional center eligibility. OCRA discussed N.V.'s service needs and diagnosis with her parents, and prepared them for the informal appeals process. N.V.'s parents attended the informal meeting with the regional center. At the meeting, they argued that N.V. did meet the criteria for substantial disability under the Lanterman Act. N.V. was found eligible for regional center services. Emma Hambright, CRA, Lanterman Regional Center.

### ***Adoptive Mother Learns Advocacy Skills and Gets Regional Center to Pay for Respite and Summer Camp.***

D.S. loves to spend time with his friends and outdoors. After many years of being shifted around from foster families to group homes, D.S. found a new home with his loving adoptive family. Due to D.S.'s exceptional needs, his adopted mother receives assistance for his care through the Adoption Assistance Program (AAP).

As D.S. began his life as a teenager, his behavior became increasingly more difficult to handle and his single mother needed more time to rest. It was crucial that his mother receive help from the regional center's respite programs to keep D.S. in his home and out of an institution. D.S.'s mother repeatedly requested respite but the regional center refused the mother's request on the grounds that AAP should pay for respite.

With help from OCRA, D.S.'s mother realized that AAP funds do not need to be used as a funding source for things for which the regional center should pay. OCRA attended a meeting with the regional center. OCRA

agreed to attend the meeting as a teaching opportunity for D.S.'s mother to learn advocacy strategies.

By the end of the meeting, the regional center not only agreed to pay for respite, but to also pay for D.S. to attend a summer camp designed for children with developmental disabilities for a week this summer near the Santa Cruz mountains. D.S.'s mother was excited to have learned advocacy skills that she will be able to use in the future. Yulahlia Hernandez, CRA, Cristina Bravo Olmo, Assistant CRA, North Bay Regional Center.

### **Case Settles Before Hearing.**

W.D. is a teenager with Prader-Willi Syndrome. His parents had applied for regional center eligibility for W.D. several years ago. The regional center denied eligibility because W.D. was not mentally retarded. His parents wanted to apply again as they were quite worried about what would happen to W.D. when he became an adult.

OCRA assisted W.D.'s parents in obtaining the assessments and letters of support that would be beneficial in the process of becoming eligible for regional center services. W.D.'s parents wrote a narrative about his behavioral and adaptive functioning. OCRA assisted the parents in putting a file together to present to the regional center.

W.D.'s mother had been to the regional center for one evaluation and felt that the regional center did not consider how severely Prader-Willi impairs W.D., despite his high IQ. She asked if OCRA would contact the psychologist before her next meeting. OCRA agreed to do this.

OCRA contacted the psychologist and made an argument based upon W.D. needing services similar to a person with mental retardation. Because of the behavioral and adaptive deficits associated with Prader-Willi and because Prader-Willi clients are almost always served through the regional center system, OCRA argued that even with his high IQ, W.D. would never be able to live and function independently. Furthermore, except for his IQ, W.D.'s condition was similar to that of a person with mental retardation and his treatment needs were exactly the same as people with Prader-Willi Syndrome who were mentally retarded.

The mother and W.D. returned for a second assessment. The mother reported that this meeting was far more successful than the first meeting. W.D. was been found eligible for regional center services. Katy Lusson, CRA, Golden Gate Regional Center.

### **OCRA Secures Emergency Nursing Hours.**

Medi-Cal abruptly cut M.B.'s nursing hours down from 116 to 40 per week. M.B., who requires around the clock care of a nurse, was unable to attend school because of the reduced hours, and M.B.'s mother had to stay home from work. In addition, M.B.'s mother and father had to take turns staying up throughout the night to monitor M.B. for choking and medication administration.

This was creating an unbearable hardship for M.B.'s family and created a substantial risk of institutionalization. M.B.'s parents called upon OCRA for help. OCRA asked for an emergency meeting with the regional center to assess M.B.'s need for emergency nursing. The day following the meeting, the regional center had a nurse at M.B.'s home assessing his need for nursing services.

The report came back in support of M.B.'s need for 24-hour nursing care. The regional center had a nurse secured for M.B. within a few days. Yulahlia Hernandez, CRA, Cristina Bravo Olmo, Assistant CRA, North Bay Regional Center.

### **Regional Center Funds Lift Chair.**

L.F. is a 54-year-old woman who sustained a traumatic brain injury (TBI) and several other physical injuries from a car accident some years ago. L.F. is diagnosed with mental retardation and severe osteoarthritis. L.F. has difficulty transferring from a sitting position to standing and as a result has re-injured herself multiple times. L.F.'s doctor prescribed a lift chair for home use to regain physical health while using the medical equipment to relieve the stress of the transfers. Medi-Care only agreed to pay 20% of the chair. L.F. then requested the regional center fund the remaining balance. The regional center denied L.F.'s request for medical equipment based on the fact that it considered the request to be for furniture which the regional

center claimed it did not fund. Moreover, the regional center did not believe that the lift chair was a medical necessity.

L.F. contacted OCRA for assistance in filing the appeal. The CRA submitted a timely request for an appeal and requested an informal meeting. The CRA followed-up three weeks later, and the informal meeting still had not been scheduled. The CRA then contacted the regional center executive director, who responded by immediately agreeing to fund the lift chair because the appeal was never scheduled, which was a procedural violation. Noelle Ferdon, CRA, Far Northern Regional Center.

**Parent Successfully Mediates Regional Center Funding of Autism Assessment.**

The regional center agreed to fund an autism assessment at UC Davis to determine if M.N. has autism. The assessment was included in M.N.'s Early Start Individual Family Service Plan (IFSP). After waiting several weeks for the referral, M.N.'s mother decided to explore other autism clinics to complete the early start assessment in a timely manner. Mother felt that with each passing week, invaluable clinical behavior treatment was being lost. Mother considered UC San Francisco (UCSF) and discussed this with her service coordinator, who agreed to attend the appointment, if necessary. UCSF completed its assessment and found M.N. to be autistic and the regional center found M.N. eligible for services.

After the mother submitted the bill for reimbursement, the regional center refused to pay for the assessment stating that it did not agree to pay for a UCSF autism assessment in writing in the IFSP. The mother felt she received a mixed message since the service coordinator offered to help and knew that the family intended to utilize the UCSF rather than the UC Davis referral because of the significant delays. The mother appealed the denial and contacted OCRA for technical assistance with the mediation.

The mother was fully prepared for the mediation and offered her legal arguments. The regional center recognized these arguments and advised the mother to make certain that any services she would like for

her son in the future should be written into the IFSP. Mom agreed and the regional center agreed to fully fund the assessment. Leinani Neves, CRA, Valley Mountain Regional Center.

**Regional Center Listens to Consumer.**

T.H. is a 55-year-old male who lives in his own apartment. T.H. was having problems with his supported living agency workers. On several occasions, he reported these problems to his service coordinator but no action was ever taken. T.H. contacted OCRA for assistance in obtaining a new service coordinator. T. H. also mentioned that both his manual and electric wheelchairs needed repairs.

OCRA staff assisted T.H. in writing a letter to the regional center to request a new service coordinator and an IPP meeting. OCRA agreed to represent T.H. at the IPP meeting. Prior to the IPP meeting, OCRA staff assisted T.H. in developing his self advocacy skills. After listening to T.H., the regional center agreed to change his service coordinator, change the supported living agency and to repair both of his wheelchairs. T.H remarked that this was the first time he felt like someone had listened to him and that it felt good. Aimee Delgado, CRA, Rita Snykers, Assistant CRA, San Gabriel/Pomona Regional Center.

**Regional Center Agrees to Fund Partial Cost of a Summer Socialization Program.**

H.B. is a young boy with autism. The parents called OCRA for assistance in preparing for a fair hearing because the regional center denied funding for H.B.'s summer, "extended enrichment program". The regional center denied the request on the basis that the programs were day care and the responsibility of the parents.

OCRA agreed to assist H.B.'s mother to prepare for mediation and hearing. The Assistant CRA helped the mother prepare the fair hearing exhibit packets. OCRA staff met with the mother prior to the mediation. The mother was told that she had to explain each part of the unique enrichment program and how it would meet H.B.'s socialization needs. At mediation, the mother accepted the regional center's offer to fund \$600.00 towards the

cost of the program. Aimee Delgado, CRA, Rita Snykers, Assistant CRA, San Gabriel/Pomona Regional Center.

**OCRA Gets Automatic Door Opener for Consumer.**

J.G. lives alone in his own apartment. He has cerebral palsy and uses a power wheelchair. He has services from an independent living agency worker for only 5 hours per day. The worker assists him with various activities of daily living such as dressing, bathing, cooking, and cleaning. For the remainder of the day, J.G. must find ways to provide for his own needs.

J.G. needed an automatic door opener to be able to continue to live safely in his apartment and maintain his independence. J.G.'s poor muscle strength, use of a wheelchair, and the configuration of his apartment front door and entry hallway made it difficult for him to maneuver his wheelchair in order to open and close his front door. Without the automatic door opener, J.G.'s ability to independently go out into the community for activities such as grocery shopping, medical appointments, and leisure was seriously compromised. His safety was also seriously compromised without the automatic door opener. In the event of an emergency, such as fire or earthquake, J.G. would be seriously at risk of injury if he were not able to get out of his apartment quickly.

OCRA asked the regional center to fund the automatic door opener but the regional center refused after an occupational therapist recommended against it. The regional center denied the request on the grounds that it was not a cost-effective use of resources and not medically necessary. OCRA contracted with a different occupational therapist, who agreed with J.G.'s doctor that the door opener was medically necessary. OCRA presented the independent evaluation along with pictures of J.G. attempting to open the door and written statements from J.G.'s independent living worker. OCRA staff conducted a search of companies that would be able to sell and install the device for J.G. A mediation conference was held and the regional center retracted its initial denial and approved the automatic door opener. Eva Casas-Sarmiento, CRA, Guadalupe Moriel, Assistant CRA, Regional Center of Orange County.

**OCRA Helps Parents Get Retroactive Respite Payments.**

W.M. and B.M. are young twins who were receiving 48 hours of respite from the regional center. The regional center issued a notice of action informing the parents that respite services would be discontinued within 30 days. The parents filed a timely appeal and asked for 48 hours of respite to continue pending the appeal. The regional center refused to continue to fund the 48 hours of respite pending a final hearing on the issue. For various reasons, dates for the hearing kept getting postponed. Almost one year later, a hearing on the issue of respite had not been held. The family had gone without respite during the entire pendency of the appeal.

OCRA met with the parents and reviewed their records. OCRA prepared an opinion letter for the parents citing relevant Lanterman Act laws pertaining to aid paid pending an appeal along with an analysis of the local regional center purchase of service guidelines and how they applied to this particular request for respite.

With the opinion letter as a guide, the parents proceeded to hearing. The hearing officer found that the regional center had wrongly denied respite during the pendency of the appeal proceedings and ordered that retroactive payments be issued to the family. Eva Casas-Sarmiento, CRA, Guadalupe Moriel, Assistant CRA, Regional Center of Orange County.

**SPECIAL EDUCATION**

**Compliance Complaint Secures IEP Meeting, a Change of Placement, and Compensatory Services.**

G.R.'s mother and the child's La Familia case manager came to OCRA for help in getting the school district to convene an IEP meeting at which it had promised to review recommendations of the Regional Center of the East Bay's Autism Clinic. Not only had the school district been unresponsive to G.R.'s mother's requests, but G.R. had begun complaining about being hit in the classroom. He became so afraid of the classroom and his teacher that G.R.'s mother started keeping him home from school. Shortly after that, a school truancy officer contacted the family to warn his mother that she might be subject to prosecution.



To document the situation, OCRA advised G.R.'s mother to submit a written request for an emergency IEP meeting and to explain the reason why she was keeping G.R. home from school. Next, and because the district had already failed to meet its commitment for the regular IEP and had not yet begun its promised assessments, OCRA filed a compliance complaint with the California Department of Education. Shortly after the complaint had been filed, the school district began its assessment of G.R. After the allegations in the complaint were sustained, the promised IEP meeting took place. G.R.'s diagnosis of autism was confirmed on his IEP, his placement was changed, and related services confirmed. The IEP also provided for the following compensatory services: intensified speech and language therapy for two-and-a-half months, and three months of ABA training for classroom staff from a non-public agency. It was also agreed that G.R. would be permitted to transfer to one of the district's autism classes in the fall if his mother, after visiting the classes, decided the autism class would be more appropriate for him. Celeste Palmer, Assistant CRA, Regional Center of the East Bay.

**Full-Inclusion Case Settled at the IEP Meeting.**

A.R. has been fully included in his local elementary school. Because of a medication change, A.R.'s behavior problems escalated in the 4<sup>th</sup> grade. The district then recommended that A.R. be placed in a neighboring school district's special day class for students with autism. The parents did not agree with the recommendation and did not sign the IEP. The district filed for a due process hearing against the parents and would not agree to mediate. OCRA agreed to represent A.R. at hearing. OCRA hired an expert to observe A.R. for an entire school day and write a report. The expert noted that the morning classroom aide was much less effective than the afternoon aide and actually provoked A.R.'s inappropriate behaviors. Concurrently, the district curtailed its pursuit of a due process hearing. OCRA provided the district with the expert's report. An IEP was subsequently held to plan for A.R.'s promotion to a full inclusion classroom in the 6<sup>th</sup> grade. After the family signed the IEP, the district withdrew its request for a due process hearing. Matt Pope, CRA, East Los Angeles Regional Center.

**Consumer Obtains the Services of an Independent Inclusion Specialist.**

Z.L. is diagnosed with autism. When he was first placed in a regular education classroom, his mother requested the services of a full inclusion specialist. The school district denied the mother's request. OCRA agreed to assist the mother in obtaining the services of a full inclusion specialist for Z.L. at school. OCRA hired a full inclusion specialist to assess the child's needs, but the school district denied the request to have this specialist assess Z.L.'s school program. OCRA filed a request for an administrative hearing on behalf of Z.L.

The case was settled before hearing and the district agreed to allow an independent inclusion specialist into the classroom to observe Z.L. OCRA then wrote a letter to the district requesting that many of the goals and objectives in the IEP be revised and that the district provide Z.L. with the services of an inclusion specialist. At Z.L.'s most recent IEP meeting, the district agreed to all of the requested IEP revisions and hired an independent inclusion specialist to provide consultation to Z.L. and all of the other full inclusion students at his school. Katherine Mottarella, CRA, Jacqueline Phan, Assistant CRA, Tri-Counties Regional Center.

**Student Receives Services Beyond Those Designated In IEP.**

K.S. is a young student with a traumatic brain injury. In April, 2004, her family relocated to a new district in a new county. Several months prior to the move, the family contacted the new school to notify it of the family's intention to enroll K.S. and to provide them with information about her, including her current IEP. K.S. was placed in a special day class similar to the one in the old district but the new district did not implement essential portions of her IEP. K.S. did not receive OT or PT services, speech and language therapy or the time designated for her to be included with her non-disabled peers. K.S.'s mother tried repeatedly to have the IEP implemented but the district responded that they did not believe the services were educational and, in the case of the PT, the school did not have a therapist on staff. After 30 days the district had not conducted an IEP meeting and the parent called the OCRA office for assistance.

OCRA filed a compliance complaint with the California Department of Education on behalf of K.S. After the compliance complaint was filed, the school district agreed to contract with a private OT, to pay related

transportation costs, to provide speech therapy, and to include K.S. in a regular second grade classroom. The district further agreed to compensate for the services lost and to provide for extra minutes of service to compensate for the regression K.S. was experiencing.

The school district will issue a county-wide letter notifying schools of their responsibility to conduct an IEP meeting within 30 days of an administrative placement. Kay Spencer, Assistant CRA, Central Valley Regional Center.

**Youngster Successfully Transitions from Early Start to School.**

OCRA was contacted by S.V.'s mother when S.V. was about to turn 3. S.V. has Rhett Syndrome and has cognitive and orthopedic disabilities. S.V. also has severely delayed speech and language skills. Mother contacted OCRA to make sure that S.V. had a smooth transition from Early Start to school.

Mother met with the IEP transition team and S.V. was offered a placement in a school that entailed a 40-minute bus ride. This offer was not acceptable. OCRA assisted in filing an appeal.

Counsel for the school district contacted OCRA and negotiated for several weeks regarding a more appropriate placement. OCRA requested letters from S.V.'s physician and occupational therapist stating that the ride would be deleterious to S.V.'s health. OCRA also requested a letter from the speech therapist saying that a bi-lingual language program would not meet S.V.'s needs, as her language acquisition was severely delayed and she needed to be in a program that was English-language enhanced. These letters were sent to the school district for consideration.

After many days of negotiating with the district, it agreed to place S.V. in a program close to S.V.'s home that has all of the appropriate services. Katy Lusson, CRA, Golden Gate Regional Center.

**Student Included In Washington D.C. Trip.**

C.C. is 13-years-old and in the 8<sup>th</sup> grade. During his annual IEP meeting in September, 2003, C.C.'s IEP team discussed participation in extra curricular activities including the 8<sup>th</sup> grade trip to Washington D.C. At the conclusion of the meeting, his teacher asked the regional center representative to assist in funding a portion of the trip. After consideration, the regional center

notified the parent that it would fund \$1,000 of the \$1,400 cost of the trip. C.C. signed up for the trip. At that time, the trip was full and he was placed on the waiting list.

Throughout the year, the district reported to the parent that the trip was full. Eight weeks prior to the trip, the parent learned that there were unfilled spaces. The school district did not return the mother's calls. She was ultimately told by a district representative that her child was a liability and "no one wants to be responsible for C.C." The parent requested an emergency IEP meeting and contacted the OCRA office for representation.

OCRA met with the parent and, prior to the meeting, contacted the superintendent. The superintendent directed his staff to determine if it could add C.C. and to work to include him. OCRA represented at the IEP meeting. The district apologized to the parent and stated that it was working to take C. C. on the trip. In the district's view, C.C. needed 1:1 assistance.

The school district offered to pay for the parent's trip to serve as C.C.'s attendant. The details have been worked out. C.C., his mother, and his friends are looking forward to the trip. The district met internally to look at its procedures and to insure that in the future, all students are included. Kay Spencer, Assistant CRA, Central Valley Regional Center.

### ***CRA Helps Grandmother Continue Advocacy For Her Grandson.***

R.D. is a 4-year-old autistic boy who receives special education. His grandmother, who is his primary caregiver, contacted OCRA for advocacy assistance. R.D. resides with his grandmother.

Due to his employment responsibilities, R.D.'s father is unable to attend most of R.D.'s IEP's and, therefore, had signed a power of attorney giving R.D.'s grandmother authority to make school decisions. The school district was questioning R.D.'s grandmother's presence at the IEP's. They also were refusing to accept the power of attorney as valid.

The CRA attended R.D.'s IEP to discuss the issue of the power of attorney. The CRA explained the importance of R.D.'s grandmother attending and at times signing the IEP on the father's behalf. The school district reviewed the Power of Attorney and accepted it as valid. This allows R.D.'s

grandmother to continue to advocate for her grandson. Veronica Cervantes, CRA, Inland Regional Center.

***IEP Meetings Restores 1:1 Aide and Obtains Related Services and Transition Plan.***

K.M.'s parents contacted OCRA for help after their 20-year-old son had been suspended from school for pulling an aide's hair. His parents knew that K.M. was not a violent person, but because K.M. was non-verbal, he would use physical contact as the only way he could attract someone's attention. K.M.'s parents felt that if he were provided the 1:1 aide promised on his IEP, he would be better behaved and more likely to benefit from his schooling. OCRA's review of school records disclosed a series of problems: 1:1 assistance had been curtailed as of the most recent IEP; behavioral concerns had not led to a functional behavioral assessment or positive behavior intervention plan; related services were reduced without assessments or explanation; and while IEP meeting notes registered the parents' desire that K.M. have more opportunities for inclusion, nothing had been done to insure inclusion.

OCRA explained to K.M.'s parents their child's rights and the inadequacies in his education program. Over four IEP meetings, OCRA and K.M.'s parents successfully advocated for a functional assessment and positive behavior intervention plan; a 1:1 aide; an occupational therapy assessment that resulted in services and equipment; community integration and training activities; and, despite an assistive technology (AT) assessment that found him "not ready" to use AT, a 3-month trial period with AT devices, so as to determine whether the devices can assist K.M. in learning and communicating with other people. Celeste Palmer, Assistant CRA, Regional Center of the East Bay.

***School District Provides Student with a Laptop Mounted on His Wheelchair.***

J.C., an 11-year-old diagnosed with cerebral palsy, was not benefiting from the special education services provided by his school district. OCRA obtained an independent assessment outlining J.C.'s special education needs. The assessment outlined the need for a laptop mounted on J.C.'s wheelchair to allow him to access and progress in the general curriculum. After several

discussions, school officials agreed to provide the mounted laptop computer. Eulalio Castellanos, CRA, Kern Regional Center.

**School District Agrees in IEP to Necessary Staffing for Transfers.**

L.A. is a teen-ager with severe CP and mental retardation. She and her parents speak only Spanish. Her mother requested OCRA's help at an IEP to assure adequate staffing at transfer points between services as L.A. uses a wheel chair. After initial hesitation at the IEP meeting, the school district agreed to 2 to 1 staffing at all transfer points in the IEP and to provide an activity log for the parents' use.

L.A.'s mother requested the IEP be translated to Spanish prior to signing. After two weeks, no translation was provided. Upon inquiring about the translation, OCRA learned the district had forgotten to provide it to the parents and a Spanish translation was finally provided. Doug Harris, Associate CRA, Redwood Coast Regional Center, Lake County.

**Proposed Termination of Behavior Support in School Reversed.**

M.G. is a 10-year-old regional center consumer with mental retardation and CP. Behaviors, including scratching and poking other students, have interfered with M.G.'s educational progress and led to suspensions. M.G. and her family speak only Spanish.

M.G.'s mother contacted OCRA when she learned that the school district special education program recommended phasing out the 1:1 behavior aide already in place, even though M.G. had just been suspended for scratching another student's eye. OCRA contacted the school and learned that a behavior analysis was pending and, without the IEP team's agreement, the special education director had ordered the behavior consultant to develop a fade plan for the behavior aide. The behavior consultant did not agree with this goal, however.

OCRA went to the IEP with the parents and, with the support of the behavior consultant, advocated for continuation of the aide provided by the school, and inclusion of a behavior aide in the behavior plan developed through a current behavior analysis. Doug Harris, Associate CRA, Redwood Coast Regional Center, Lake County.

**School District Reverses Expulsion Recommendation and Permits Student to Participate in Graduation Ceremonies.**

B.G. is a 14-year-old diagnosed with mental retardation. She was suspended from school with a recommendation for expulsion. B.G. was also being denied participation in her graduation ceremonies. B.G. was accused of theft because she used a forged check to buy a book at a book sale. However, B.G. was under the impression that her mother had given her permission to take the check to buy the book. B.G., because of her disabilities, did not understand that only her mother could sign the check. B.G.'s mother confirmed that she gave B.G. permission to buy the book and intended to write a check. School officials were not swayed by B.G. or her mother's explanation. OCRA provided counsel and advice to B.G.'s mother about which points to bring out during her meeting with school officials in regards to the suspension and recommendation for expulsion. B.G.'s mother met with school officials and the school district reversed its decision. B.G. was readmitted into school and allowed to participate in her graduation ceremonies. Eulalio Castellanos, CRA, Kern Regional Center.

**Client Obtains Appropriate School Placement.**

C.M. is a 17-year-old, African-American male who has seizures, blindness, and a severe sensory-neural hearing loss. C.M. attended a Los Angeles Unified School District (LAUSD) Special Education Center but had been absent for extended periods of time due to his disabilities. Additionally, C.M. was the only blind-deaf student on campus and C.M.'s mother was concerned that in this placement, C.M. could not fully participate in his school program. C.M.'s mother attended an IEP meeting to discuss her concerns that the school could not provide appropriate services for C.M. While the IEP team agreed that C.M.'s multiple disabilities were unique to the campus, the district was not convinced that a placement change was necessary. C.M.'s mother contacted OCRA for assistance in placing C.M. at a school that would meet his needs. C.M.'s mother also expressed a desire to develop more advocacy skills to help her son.

OCRA met with C.M.'s mother to review C.M.'s previous IEPs and discuss C.M.'s special education rights. OCRA referred C.M.'s mother to the Foundation for the Junior Blind, a local non-public school that serves blind-deaf students. OCRA suggested she contact the school, arrange for a tour, meet with the administration to discuss C.M.'s educational needs, and

request another IEP meeting if she was satisfied with what the foundation had to offer. OCRA provided her a sample interview checklist to use to evaluate the school program and keep notes for the upcoming IEP meeting. The mother liked the foundation and the program being offered for her son, and arranged for the foundation's special education director to attend C.M.'s IEP meeting.

OCRA staff continued to work with the parent to prepare for the IEP meeting. At the meeting, C.M.'s mother was an impressive advocate for her son and the IEP team ultimately agreed that a change of placement was warranted. C.M. now attends a specially designed school and instructional setting with facilities and equipment that enable him maximum learning opportunities. Christine Armand, Assistant CRA, South Central Los Angeles Regional Center.

### **OCRA Helps To Maintain Speech Therapy For Client.**

A.J. has mental retardation and epilepsy. At his last IEP meeting, the school told A.J.'s mother that continuing to provide speech therapy to A.J. was a "lost cause" and that he would never be able to speak. A.J.'s mother contacted OCRA for assistance in defending against the school's proposed termination of speech therapy services.

OCRA assisted the parent with obtaining an assessment of A.J. by the school's speech and language professionals through its assistive technology program. The professionals assessed A.J. and concluded that he would benefit from continued speech therapy based on his verbal abilities. Given the results of the assessment, the district not only reinstated speech therapy, but also increased it by 30 minutes a week, as well as giving compensatory time for the lapse in the service. OCRA further negotiated training for mother with the speech therapist on new techniques and materials to be used at school and home. Anastasia Bacigalupo, CRA, South Central Los Angeles Regional Center.

### **OCRA Provides Dispute Resolution on Behalf of Parents Against School District.**

E.A. is a 3-year-old boy diagnosed with autism. At the last IEP meeting, the district informed E.A.'s parents that E.A.'s occupational therapy would be eliminated and that his speech therapy would be reduced due to the limited



progress he was making. E.A.'s parents protested both moves by the district. Additionally, E.A.'s parents had not been able to have E.A. in school for over two months due to a paperwork issue regarding E.A.'s Temporary Support Assistant (TSA). E.A.'s parents contacted OCRA for counsel as to what their rights were.

OCRA agreed to negotiate with the district on E.A.'s behalf. Through an informal conference, OCRA was able to achieve all three of his parents' goals. First, occupational therapy was reinstated and increased to twice a month. Second, speech therapy was increased to twice a month, with one session allocated for individual instruction as E.A.'s parents had requested. Lastly, the attendance issue was resolved and E.A. was allowed to start school the following Monday with an aide. Anastasia Bacigalupo, CRA, South Central Los Angeles Regional Center.

### **CDE Finds School District Out of Compliance.**

S.W. was not receiving speech therapy as required under her IEP. OCRA filed a compliance complaint on her behalf against the school district to compel the delivery of S.W.'s speech therapy. The California Department of Education (CDE) investigated and concluded that the district had failed to provide speech therapy. CDE ordered the district to provide S.W. with compensatory speech therapy. Eulalio Castellanos, CRA, Kern Regional Center.

## **TRANSPORTION**

### **Bus Driver That Was Harassing Clients Is Removed.**

J.R. and O.R., both diagnosed with mental retardation, were transported to and from work by shuttle bus. The shuttle bus driver verbally harassed and rushed the clients to leave work early. The service coordinator for J.R. and O.R. complained to the bus company, with no success. OCRA intervened and the bus driver was replaced. Eulalio Castellanos, CRA, Kern Regional Center, Valerie Geary, ACRA, Kern Regional Center.

## **OUTREACH**

### ***IPP Training to the Chinese Parents Association for the Disabled.***

OCRA was invited to give a presentation about IPPs on June 26<sup>th</sup> to the Chinese Parents Association for the Disabled (CPAD). This group contains parents and consumers from the Orange County to San Gabriel catchment areas. There are representatives of Lanterman Regional Center, Harbor Regional Center, Regional Center of Orange County, San Gabriel/Pomona Regional Center, Eastern Los Angeles Regional Center, and Inland Regional Center. This was an exciting opportunity to outreach to a community that has not been reached by OCRA in the recent past.

The training was all day and included traditional dancing and watercolor art. In the evening, OCRA presented information about the IPP process, Lanterman Act rights and then took questions from the audience. OCRA staff was invited to join the group for dinner and visit with the families of CPAD. Staff was invited to come back anytime! It was a successful outreach and OCRA has already received calls from the CPAD members. Katie Casada Hornberger, CRA, Harbor Regional Center, Emma Hambright, CRA, Lanterman Regional Center.

### ***Bi-lingual Trainings Are Effective and Popular.***

Starting in August, 2003, the CRA and Assistant CRA from OCRA's San Andreas Regional Center Office, conducted several outreach sessions to consumers and families in the area. These outreach events and training were scheduled in order to provide educational information and to introduce OCRA to the surrounding communities. Outreach and training was provided in both English and Spanish and included more than 11 trainings. The outreach and trainings throughout the year were extremely positive and fun for all involved. OCRA looks forward to meeting more SARC consumers and families in the year to come. Marvin Velastegui, CRA, Gloria Torres, Assistant CRA, San Andreas Regional Center.

# **OFFICE OF CLIENTS' RIGHTS ADVOCACY**

## **ADVOCACY REPORT**

**Winter 2003**

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### **BENEFITS**

#### **Judicial Error Corrected!!**

L.L. is a young woman who receives In Home Support Services (IHSS). In 2001 she was assessed to require 20.1 hours of personal care services. These services include such tasks as meal preparation or clean-up, bowel and bladder care, feeding, dressing, and bathing hygiene. As her needs were over 20 hours in these areas, L.L. met the criteria for "severely-impaired." At a hearing in 2001, she was found by the Administrative Law Judge (ALJ) to be eligible for protective supervision. As a "severely-impaired individual" she was therefore entitled to 283 hours per month of service. Yet, the ALJ made a mistake and classified her as "non-severely impaired" and therefore only entitled to 195 hours per month. Her advocate at the time requested a rehearing but was denied.

In January, 2002, OCRA filed a Writ of Mandamus to secure the additional hours for L.L. OCRA worked with the Attorney General's office to achieve a settlement. In December, 2003, the Superior Court Judge signed the negotiated settlement agreement. This agreement provides that a new decision will be issued classifying L.L. as "severely-impaired" and the county will pay L.L. the difference between what she received and to what she was entitled retroactively to the date of the initial application. Katie Casada Hornberger, CRA, Harbor Regional Center.

#### **Appropriate Services Granted!**

J.C. is a 4-year-old girl with autism and mild mental retardation who resides with her mother and two brothers. In August, 2002, J.C.'s mother, O.C., contacted the county requesting an assessment for IHSS services. The County denied IHSS services and O.C. contacted OCRA for assistance.

With OCRA's help, O.C. appealed the county's determination and agreed to conditionally withdraw J.C.'s appeal to allow the county to reassess J.C. The county took nearly one year to complete three separate home assessments and issued a Notice of Action (NOA) in July, 2003, authorizing just 35.9 hours of IHSS. The county denied protective supervision and related services and authorized few personal care services, citing J.C.'s young age as its reason. The county stated that J.C. primarily required only parental care and supervision. OCRA agreed to represent J.C. at hearing.

At hearing, OCRA argued J.C. required protective supervision, related services and more personal care services than what the county had authorized. The ALJ agreed with OCRA that J.C. required protective supervision and awarded 195 hours of IHSS per month back to August 7, 2002. O.C. received \$24,169.28 in retroactive payment. OCRA is assisting O.C. in reporting this retroactive payment to the Social Security Administration (SSA) in order to ensure that this money does not get misconstrued as countable income or an immediately available resource towards J.C.'s SSI eligibility. Now O.C. can pay off the debt she has incurred as a single mother of three children without financial support, upgrade her vehicle to one more reliable, and have enough left over as move-in costs for her Section 8 housing. Brian Capra, CRA, Westside Regional Center.

### **OCRA Helps Consumer Battle Medi-Cal.**

While riding down the street in her motorized wheelchair, G.W. was hit by a car. She sustained injuries from which she recovered, but her wheelchair was destroyed. The police found the driver totally at fault.

G.W. requested another motorized chair from Medi-Cal. Medi-Cal stated that they would not authorize a manual chair until an assessment was done to determine whether G.W. could "safely" use a motorized chair. G.W. had safely used a motorized chair for over 14 years. This occurred over the course of 5 months, during which time G.W. was homebound and becoming increasingly depressed.

The service coordinator contacted OCRA because of the difficulty G.W. was having in obtaining an assessment. Through the advocacy of the Assistant CRA, the assessment was finally accepted by Medi-Cal. G.W. will soon receive her motorized chair and enjoy her freedom again. Yulahlia

Hernandez, CRA, Cristina Bravo Olmo, Assistant CRA, North Bay Regional Center.

**OCRA Advocates for IHSS Benefits.**

S.F. and L.F. are a married couple in their 40's, both with a diagnosis of mental retardation. The living conditions in their mobile home were sub-standard. S.F. has diabetes and is unable to regulate his sugar levels himself. As a result his levels were in a very dangerous range most of the time. L.F. suffers from renal failure and goes to dialysis 3 times per week. Had she been able to follow her doctor's dietary instructions, she probably would not have a need for dialysis.

The couple was desperately in need of assistance with regulating their medications and their diet as well as assistance in keeping their house clean. Both seemed to have a diet that aggravated their medical conditions. When IHSS went out to do an assessment, the worker simply asked them if they were able to do certain things, such as cook and clean. They proudly answered that they could. So the worker ignored the obvious unkept conditions in their home and determined the couple was completely able to take care of its own needs and were thus ineligible for IHSS.

OCRA took this matter to hearing and argued that the social worker did not take into consideration the cognitive limitations of both S.F. and L.F. which resulted in their inability to maintain themselves in a safe and habitable environment and that it was the social worker's duty to evaluate the cognitive and emotional impairments of applicants. The judge agreed and found both S.F. and L.F. eligible for IHSS services. Maria Bryant, CRA, Lorie Atamian, Assistant CRA, Far Northern Regional Center.

**OCRA's Assistance In Obtaining Remand from Appeals Council Results in a Fully Favorable SSI Eligibility Decision.**

C.J. is a 35-year-old woman with moderate mental retardation. In April, 2000, C.J. applied for SSI. SSA denied C.J.'s application and she appealed. On June 11, 2001, C.J. went to a hearing and did not prevail. The ALJ adopted the opinion of SSA's consultative examiner, who concluded that C.J. was malingering. OCRA filed a request for review of the ALJ's decision with the Appeals Council on August 8, 2001. The Appeals Council denied C.J.'s request for review on May 3, 2002.

On May 5, 2002, OCRA submitted to the Appeals Council a request to reopen C.J.'s case. Along with the reopening request, OCRA attached a position statement asserting that the ALJ had abused his discretion and committed legal error during the hearing, and that his decision was based on a lack of substantial evidence and void as against public policy. OCRA included a new psychological evaluation report by the same psychologist who found C.J. eligible for regional center services along with other regional center documents. The Appeals Council agreed that the ALJ had based his opinion on a lack of substantial evidence and vacated the decision, remanding the case back to the same ALJ for further development. On September 15, 2003, OCRA attended C.J.'s remanded ALJ hearing. During a pre-hearing conference on the record, the medical expert agreed with the regional center psychologist's findings that C.J. met the criteria for SSI eligibility. Accordingly, the same ALJ who previously denied C.J. on the basis of malingering issued a fully favorable decision.

On December 31, 2003, C. J. attended her first interview with SSA to determine her retroactive and ongoing benefits. After offsetting C.J.'s retroactive SSI payment for her welfare benefits received over this time, C.J.'s net retroactive award will be approximately \$26,000, which will be issued in increments of \$9,300 every 6 months for the next year and a half. C. J. intends to purchase a home through Home Ownership Made Easy (H.O.M.E.) for her and her six children, with considerable down payment assistance coming as a result of her participation in the Section 8 Housing Tenant Voucher Program over the past year. This program allows people who have participated in the Section 8 program for one year as a tenant to get monthly mortgage subsidies through Section 8 by transferring his/her voucher to the Los Angeles County Housing Authority. Brian Capra, CRA, and Meriah Harwood, Assistant CRA, Westside Regional Center.

**Foster Parent Should Receive Regional Center Rate.**

D.A. and R.A. are brothers. Both are regional center clients who have lived in the same foster home since 1995. Since that time, the county has paid the foster parent the county rate for the brothers' care when she should have been paid the regional center rate. After learning of the mistake, the foster mother appealed the county's rate determination and called OCRA for assistance. The county thereafter began paying the regional center rate. OCRA represented D.A. and R.A. at the administrative hearing and

requested retroactive payments for them from 1995 to the present. The hearing decision is pending. Eulalio Castellanos, CRA, Kern Regional Center.

**OCRA Representation in Medi-Cal Appeal Gets County to Discontinue Medi-Cal Share of Cost.**

J.G. knew that he needed dental work and a new pair of glasses, but he couldn't afford either. In order for Medi-Cal to pay for them, J.G. would first have to pay his \$329 monthly Share of Cost. Alameda County had assigned this Share of Cost, because instead of SSI, J.G. received more than \$900 a month in Disabled Adult Child Social Security (DAC) benefits. Paying his Medi-Cal Share of Cost would result in his having only \$620 left per month, and that wasn't enough to cover his expenses.

J.G. persuaded an optician to accept payments for an eye examination, but he couldn't keep up with the payments, and he couldn't get the new glasses he needed. On learning about this, J.G.'s regional center case manager contacted OCRA. When OCRA met with J.G., he explained that he had received SSI and Medi-Cal without a Share of Cost before his mother died, but that the SSI had stopped once he began receiving DAC benefits on his deceased mother's Social Security account. This should not have happened. Federal law states that people who lose SSI for that reason have a right to continue getting Medi-Cal without a share of cost. When OCRA helped J.G. file an appeal to remove the Share of Cost, a County Appeals Unit worker researched J.G.'s claims and realized the mistake. The county immediately ended his Share of Cost and agreed to provide for Medi-Cal coverage of the eye examination he had gotten. Now that he has Medi-Cal without a Share of Cost, J.M. can get the health care he needs. Marsha Siegel, CRA, Regional Center of the East Bay.

**OCRA's Success in Getting New Wheelchair for Man Ends Lengthy Wait and Avoids Further Injury.**

V.H. is a 57-year-old man diagnosed with cerebral palsy and tuberculosis who uses a wheelchair for ambulation. V.H. lives independently with supported living services, and has recently recuperated from a bout of pneumonia. In February, 2003, a therapist discovered that V.H.'s wheelchair brakes were worn and required repair. The durable medical equipment vendor took the wheelchair to make the repairs. In the meantime, the supported living vendor

provided an inadequate “loaner” wheelchair. V.H. utilized this uncomfortable and unsafe wheelchair until December, 2003, when the loaner’s seat collapsed and V.H. fell through, suffering a detached toenail and a severe rug burn. The supported living vendor then referred the case to OCRA to assist in expediting the long-delayed wheelchair repairs.

The Assistant CRA immediately contacted the wheelchair vendor to investigate and to advocate for a prompt repair. Although admitting its unacceptable quality of service, the vendor then required a new prescription. The Assistant CRA contacted the regional center’s Occupational Therapy Coordinator who had a new prescription quickly written to prevent further delay. Filomena Alomar, Assistant CRA, Valley Mountain Regional Center.

**OCRA Assists Client at Final Hour.**

R.W., a regional center consumer diagnosed with mental retardation, was denied SSI eligibility. R.W.’s Independent Living Services (ILS) worker contacted OCRA requesting assistance on behalf of R.W. An SSA eligibility hearing was scheduled for R.W., but R. W. had not been able to secure legal representation for the upcoming hearing. OCRA requested a continuance on behalf of R.W. to try to gain sufficient time to gather additional documents and information. The SSA denied the request for continuance, stating that R.W.’s case had been continued twice. OCRA prepared to represent R.W. at her SSI eligibility hearing, assuring that R.W.’s ILS worker and a regional center service coordinator would attend the hearing on R.W.’s behalf. The hearing officer found RW eligible for SSI benefits. Maria Bryant, CRA, Alta California Regional Center, Lisa Navarro, Assistant CRA for Special Projects.

**IHSS Hours Reduction Successfully Appealed.**

L.W. is an adult with Down Syndrome living in the community with his parents. He was notified by Lake County that IHSS services would be reduced from the maximum of 283 hours per month to 195 hours because he had alternative resources for these services and because he no longer met the definition of a “severely impaired” individual. L.W.’s mother, the IHSS provider, contacted OCRA for help.



OCRA assured that an appeal was filed in time for aid to continue unchanged pending the appeal, and arranged for the mother to document the actual hours spend providing services contained in the IHSS program. The mother testified at the hearing about the actual hours needed. With this detailed information, OCRA could argue at the hearing that the consumer is “severely impaired.” The ALJ accepted OCRA’s position that regional center services cannot be considered alternative resources based on a State Department of Social Services All-County Directive. The ALJ’s decision fell slightly short of finding the consumer met the “severely impaired” definition because he did not require quite the 20 hours per week for necessary personal care tasks. However, relying on All-County Letter 93-30, the ALJ correctly ordered that the maximum of 283 hours per month be maintained because the consumer was entitled to protective supervision of 195 hours in addition to other awarded services. This totaled more than 283, so continuation of the maximum hours was ordered. Doug Harris, Associate CRA, Redwood Coast Regional Center.

**M.L. Continues to Be Eligible For SSI.**

M.L. is a 44-year-old year old male who was diagnosed with autism in 1978. He was originally granted SSI because of his autism diagnosis. In May, 2001, M.L. was found by the SSA to be no longer disabled. M.L. filed a timely appeal and OCRA agreed to represent him at the administrative hearing. OCRA hired an expert who evaluated M.L and prepared a report which was submitted to the SSA. At the hearing, the ALJ did not take any testimony but concluded that based on all of the evidence in the record, M.L.’s disability has not ceased. M.L. continues to be eligible for SSI. Katherine Mottarella, CRA, Jacqueline Phan, Assistant CRA, Tri-Counties Regional Center.

**IHSS Termination Appealed Resulting in Restoration and Increase.**

E.H is a regional center consumer who had been living with her mother, who was her primary caregiver. E.H. relied, in part, on 195 hours per month of IHSS hours of support to maintain her in the community. In April 2003, E.H.’s mother encountered personal problems, making it impossible to continue providing IHSS support and E.H was temporarily placed in a group home. E.H. returned to live with her mother in July when the mother’s problems were resolved. The mother tried to have the IHSS restored,

including payment for services rendered during the first half of April for which a time sheet had not previously been submitted. The county told E.H.'s mother it was too late to process the April time card. It also made and broke three appointments to reassess E.H.'s current IHSS needs and restore services. Her mother then contacted OCRA. OCRA advised her to file a state hearing request for both the failure to pay her for April, and to act on the request to reassess E.H.'s current need and begin services. After the appeal was filed, the county appeals representative contacted E.H. and began a series of negotiations attempting to resolve E.H.'s IHSS problems. With OCRA's counsel, E.H.'s mother successfully negotiated payment for April, 2003 and an increase to the IHSS maximum of 283 hours per month. Doug Harris, Associate CRA, Redwood Coast Regional Center.

## **CRIMINAL JUSTICE**

### **Judge Suspends Woman's 6 -Year Prison Sentence.**

A 45-year-old consumer with cerebral palsy lived with her elderly husband, who was very ill, until his death. With no generic resources to help and support this couple with disabilities in the community, they went without crucial healthcare and independent living services for years. When K.P.'s husband died, K.P. was charged with his death. After some investigation, the criminal charges were reduced to charges of elder abuse. While her charges were pending, the regional center found K.P. eligible for services and agreed to recommend and provide supported living services. When the probation report recommended a locked facility, the regional center changed its clinical and case management recommendation to a developmental center placement, refusing to provide any community-based placement or 24-hour support despite its first agreement to do so. In light of this new regional center recommendation, defense counsel requested OCRA's technical assistance and advocacy.

OCRA provided technical assistance and support to private defense counsel on the mandates of the Lanterman Act obligating the regional center to provide a wide variety of supports and services to ensure the consumer resides in the least restrictive environment. At defense counsel's request, the CRA attended the sentencing hearing and advocated that K.P. could be maintained safely in a community placement to serve out her probation terms. The CRA reviewed how 24- hour supported living works, to what

extent one-to-one support could be provided by the regional center and how emergency support may even be more effective than the probation or police department could offer for someone with K.P.'s disabilities. Despite the prosecutor's and probation department's adamant objections, the judge agreed with OCRA and suspended the 6-year prison sentence, believing that the consumer could be safely supported in the community on strict probation with 24-hour support. K.P. presently resides in a crisis care home with 24-hour support until an apartment can be located and prepared to meet K.P.'s unique needs. Leinani Neves, CRA, Valley Mountain Regional Center.

**Young Man with Head Injury Obtains Positive Treatment Outcome in Juvenile Court.**

When T.C. was 9, he was struck by a motor vehicle while riding a bicycle and received multiple orthopedic injuries and a severe closed head injury. T.C. is now 16, and his mother came to OCRA seeking assistance when T.C. became involved with juvenile court. Mother had applied for regional center eligibility when TC was 15, and, while the regional center psychologist found he had a full-scale IQ in the mildly mentally retarded range, the multi-disciplinary team found him ineligible.

The CRA attended T.C.'s juvenile hearings and informed his Public Defender and the judge that T.C. was involved in the regional center eligibility process. The judge granted continuances to permit T.C. to obtain an extensive psychological evaluation by an independent clinical psychologist and to await T.C.'s eligibility determination. At an informal meeting, the regional center reviewed the new psychological evaluation, and found T.C. eligible for regional center services as a person with a condition similar to mental retardation. At the next juvenile court hearing, as a new client of the regional center, T.C. became eligible for the diversion program, including treatment and positive interventions rather than incarceration. Enid Perez, CRA, Central Valley Regional Center.

## FAMILY LAW

### *OCRA Outreach Results in Intervention with Child Protective Services for Monolingual Cantonese Speaking Family.*

OCRA did an outreach at the Chinese Families of the Disabled yearly conference. At that time , OCRA met with a family who has an 18-year-old son. A.Y. has autism and is in his last year of high school. He has a younger brother who went to school with a bruise on his arm. He told his teacher and the nurse that A.Y. had injured him. Child Protective Services (CPS) had been called and had visited the family and given them a list of conditions that had to be met. The parents felt that their son could not have injured his brother and did not understand why they had to meet the conditions set by CPS.

A therapist at the Chinese Public Health Clinic as well as a family friend contacted OCRA, while the parents were in their office. They translated for OCRA and were able to find out the names of the various agencies and individuals the family had contacted regarding this matter. OCRA called the regional center and spoke to the social worker, explaining the importance of regional center involvement, as CPS would want to see that the regional center client would be receiving treatment and other services to deal with his possible aggression towards his brother.

OCRA contacted all of the parties and arranged a meeting at the regional center. It was asked that the social worker, supervisor and psychologist be present. OCRA also assisted the therapist at Chinese Public Health Services in composing a letter to the court explaining the family's compliance with the requirements set by CPS. At the regional center meeting, service options for A.Y were discussed. The regional center agreed to provide out-of-home weekend respite for A.Y. and to contract with a behavioral specialist. The family agreed to find a therapist for both their sons.

OCRA contacted the CPS worker after the meeting as agreed and gave her an update and reiterated the family's compliance with CPS requirements. The CPS worker stated that the family was not in danger of having its younger son removed from the home if the family continued to comply with the CPS plan. Katy Lusson, CRA, Golden Gate Regional Center.

### **Mother Increases Visitation with Child.**

R.A. is a consumer diagnosed with mild mental retardation. She has a 9-year-old daughter, M.M., who is also a consumer of the regional center. R.A. does not have custody of her daughter and her visits are at the discretion of her ex-mother-in-law who has legal guardianship of M.M. The visits are inconsistent, minimal and never overnight.

R.A. petitioned the court for termination of the guardianship. The petition was denied and the court recommended that R.A. receive a complete psychological evaluation before any change to the visitation schedule could result. The court investigator required that the evaluation come from a specific doctor in order to assure the competency of the report. The consumer could not afford to independently pay for this particular doctor's services. The regional center denied her request for financial assistance saying that the court order to get an evaluation was not based on her disability.

R.A.'s visitation rights remained inconsistent and the legal guardian continued to deny R.A. any overnight visits with her daughter, saying that this evaluation had to take place before she could allow a change. OCRA asserted that the denial of guardianship over the daughter was based on R.A.'s lack of parenting skills, which is based on her developmental disability of mild mental retardation.

The regional center changed its position and agreed to pay for the evaluation. Also, parenting skills classes will be put into the IPP so that R.A. can have overnight visits with her daughter and feel confident about her abilities to care for M.M. Noelle Ferdon, CRA, Far Northern Regional Center.

## **HOUSING**

### **Eviction from Subsidized Housing Prevented.**

M.W lives independently in subsidized housing with supported living services. He has both developmental and psychiatric disabilities. He and his supported living staff neglected to pay the rent for November and December, 2003. M.W. was served with a summons and complaint for Unlawful

Detainer (UD) on December 14, 2003, because he had not responded to a three-day notice to pay or quit the premises. The supported living staff contacted OCRA the morning of the last day to file an answer to the UD. OCRA prepared a response to the UD and counseled the consumer and his supported living staff regarding grievance process rights in the consumer's subsidized apartment. In addition, a strategy was suggested for negotiating with the landlord's attorney to try to get the UD rescinded. The answer was filed on time. The supported living staff contacted the landlord's attorney. All past due rent was paid and accepted, and the UD withdrawn, allowing the consumer to remain in his subsidized housing. Doug Harris, Associate CRA, Redwood Coast Regional Center.

**30-day Notice Rescinded and Behavior Modification Services Provided at Group Home.**

I.W. is a 13-year-old boy who has autism and who lives in a level-4i group home. I.W.'s father called OCRA when I.W. received a 30-day notice to vacate the home because of incontinence. The group home owner had requested behavior modification services from the regional center. However, she did not receive a response to her request. OCRA discussed with the owner of the group home I.W.'s imminent threat of being institutionalized should he be required to vacate the home and the process for receiving services from the regional center. OCRA then worked with the regional center to have I.W. evaluated by a behaviorist. The regional center agreed to purchase 20 hours per week of one-on-one behavior intervention services, and the group home owner rescinded the 30-day notice. Joe Tontodonato, Assistant CRA, San Diego Regional Center.

**PERSONAL AUTONOMY**

**Blanket Denial of Rights Averted at Group Home.**

OCRA received a flurry of telephone calls from panicked consumers, family members, and service providers during the holiday week. At least a half dozen consumers and their family members had been told by the staff at their group homes that they could no longer (1) watch television with commercials, (2) have visits with family outside the home, (3) have unsupervised outings in the community, (4) have pets, or (5) use their home

walkie talkies. The residents were told that their treating psychologist had ordered these denials of rights as part of their treatment plan. With the Christmas and New Year holidays fast approaching everyone was extremely upset at the blanket denials that had been imposed.

All of the consumers who contacted the OCRA office live in one of three homes operated by the same owner. As part of the home's program, all of the residents in these three group homes participate in weekly counseling sessions with the same licensed psychologist.

The CRA called an emergency meeting at one of the group homes with representatives from the regional center, day programs, group home agencies, consumers, and family members. Prior to the meeting, the CRA conducted an investigation of the denial of rights allegations by speaking individually with each consumer who called and/or their family member, the group home owner, and representatives from the regional center.

At the meeting, the CRA presented information to everyone regarding the denial of rights process and how good cause must exist for each individual denial of right. The CRA was able to obtain confirmation from the regional center that none of the denials would take place. The regional center assured all of the residents and their families that all decisions regarding denial of rights would go through the IPP planning process in the future and not be solely the decision of the treating psychologist. Eva Casas-Sarmiento, CRA, Guadalupe Moriel, Assistant CRA, Regional Center of Orange County.

### **J.L. Obtains Necessary Accommodations to Maintain His Job.**

The parents of J.L., an adult consumer, contacted OCRA after J.L. was threatened with termination from his job of many years at a local bank. J.L. was reported to have performance issues and was believed not to be "growing" with his job.

Investigation revealed that J.L.'s alleged performance issues coincided with the hiring of a new supervisor. Further investigation revealed that this supervisor was acting in a manner that was insensitive to both J.L.'s disability of autism and his Chinese culture. This insensitivity caused J.L. a great deal of anxiety and stress, which in turn resulted in performance issues.

PAI staff worked in conjunction with OCRA staff to help J.L. and his family advocate for disability and culturally appropriate accommodations from his employer. PAI and OCRA staff convened a meeting involving J.L., his father, his employer, Department of Rehabilitation staff, regional center staff and staff from a supported work program to review J.L.'s job description, discuss changes expected to occur in J.L.'s job duties over the next year, and explore accommodations that would support him in performing his job duties. To help clarify disagreements between the client and employer regarding J.L.'s performance, the Department of Rehabilitation agreed to fund an Employment Situation Assessment and full time job coach services.

J.L. remains on the job at this time, with a new supervisor, clarified job duties and accommodations necessary to perform those job duties. He is now flourishing. Katherine Mottarella, CRA, Tri-Counties Regional Center, Michelle Uzeta, Protection & Advocacy, Inc.

### **Consumer Uses Small Claims Court to Collect Damages.**

In August, 2002, R.S. began working in an enclave at a local company supported by habilitation services. His multiple diagnoses includes Prader-Willi Syndrome, which can include inappropriate food-taking behavior. The habilitation services agency staff was aware that his work environment must be void, or reasonably void, of food. Otherwise, he would eat any food available, including that belonging to coworkers. Three weeks after his hiring, workers at the company reported food missing from their area. A brief investigation found that R.S. had taken the food. R.S. was terminated. During the investigation, the employer broke into R.S.'s locker.

OCRA referred R.S. to the State Department of Fair Employment and Housing, advising that he request an investigation for discriminatory practice. R.S. filed a complaint against the employer. After investigating, the Department found that the employer was not aware of the Prader Willi diagnosis and was therefore not liable for failure to provide reasonable accommodation.

R.S. again contacted OCRA for assistance. The CRA suggested that he file with the Small Claims Court and provided the appropriate PAI publications. R.S.'s mother filed a discrimination suit in Small Claims Court naming both the employer (for the broken lock) and the habilitation services agency (for three times his lost wages) as defendants. The habilitation services should



have requested an accommodation from the employee to prevent the problems from arising. The mother, who is the conservator, was appointed Guardian Ad Litem. At the trial, she cited Title III of the Americans with Disabilities Act and the State Unruh Act for the legal rationale. The mother utilized the services of the Small Claims Court Advisor in her preparation of the case.

Less than one week before the trial, the employer settled for \$500. However, the habilitation services provider would not settle. R.S. proceeded to trial against the one remaining defendant. At trial, the court ordered the habilitation services agency to pay \$445. in damages for its actions. Matt Pope, CRA, Eastern Los Angeles Regional Center.

## **REGIONAL CENTER**

### **C. G. Gets Regional Center Services.**

C.G. and her adopted mother received 16 hours a month of respite for the past 2 years from the regional center. The regional center terminated respite in May, 2003, without written notice. The family was given a number of reasons verbally by the service coordinator explaining the reason for termination. C.G.'s mother contacted OCRA for help.

OCRA agreed to provide technical assistance. The CRA instructed C.G.'s mother to request an appeal packet verbally and follow up with a written request. C.G.'s mother made several requests and was never provided with an appeal packet by the regional center. The service coordinator finally sent C.G.'s mother a letter in October, indicating that C.G. was unable to appeal because the authorization for respite had expired in May. C.G.'s mother decided to file for hearing and the CRA assisted in filling out the appeals form. One week after the fair hearing request was sent, C.G.'s mother received a phone call from the regional center indicating that respite would be reinstated and compensatory hours would also be given, retroactive from June 1, 2003. Aimee Delgado, CRA, Rita Colleen Snykers, Assistant CRA, San Gabriel/Pomona Regional Center

### **Regional Center Agrees to Provide Services.**

K.A. and K.A., twin sisters, had been diagnosed in the past with mild cerebral palsy and mild mental retardation. They received regional center services as young children, but services stopped when their mother began to home school them at the age of 6. Before their 18th birthday, their mother requested services be reinstated for her daughters from the regional center and was denied.

The family called OCRA for help. The Assistant CRA agreed to provide technical assistance. The Assistant CRA guided the mother on how to carefully request and prepare for the regional center intake process. OCRA reviewed the regional center files and school files and recommended that the mother get independent evaluations on her daughters. The mother had an independent evaluation done on the twins and, with the help from OCRA, was successful in having the twins' cases reactivated by the regional center. Aimee Delgado, CRA, Rita Colleen Snykers, Assistant CRA, San Gabriel/Pomona Regional Center.

### **Denial of Regional Center Eligibility Reversed.**

E.M. is a 19-year-old woman who first applied for regional center services in 1987 and was denied. She applied a second time when she was about to turn 18 and was again denied in March of 2002. Neither denial was appealed. She again applied for eligibility in 2003, after asking OCRA for assistance.

E.M. struggled throughout her life with significant behavioral and intellectual limitations and suffered major psychiatric problems in her mid-teens when her father became ill and subsequently died. Testing by the schools and the regional center over the years had consistently identified speech and language delays amidst general delays in motor, social and academic skills. Nevertheless, cognitive estimates varied from low average to mild mental retardation with the latter scores usually being attributed to various causes such as lack of cooperation and emotional problems.

OCRA asked an independent psychologist to review E.M.'s case and perform his own evaluation. He concluded that her scores in the range of mild mental retardation most likely were an accurate reflection of her cognitive skills and that prior evaluators had misread the reason for the

scores. The CRA, with input from the psychologist, developed a case for eligibility based on E.M.'s requiring treatment similar to someone with mental retardation. After reviewing the analysis, the regional center requested additional functional information from E.M.'s school and the family, and finally found her eligible for regional center services. Frank Broadhead, CRA, Redwood Coast Regional Center.

### **Housing Agreed to for Consumers.**

The facility in which numerous regional center consumers were living closed. The facility staff then moved all of the consumers into community homes, except for 7 consumers. The facility could not place these consumers because the regional center considered these consumers at a lower-needs placement level.

The facility could not place the consumers until the need of each consumer was resolved. The CRA and Assistant CRA conducted a training to the parents of consumers on the fair hearing process. OCRA also contacted the Area Board 12 and together met with facility staff to provide technical assistance on establishing the need of each consumer. The regional center then agreed to raise the levels of all consumers to level 3 and the consumers were all moved into community homes. Bernadette Bautista, CRA, Rubidia Vasquez, Assistant CRA, Inland Regional Center.

### **Regional Center Offers Respite to Consumer-Mother.**

P.C. is an adult consumer living with her partner, their four year-old son, and her 6-year-old daughter from a prior relationship. P.C. received respite services for her children while her son was involved in the Early Start Program. When he reached age three, those services were terminated as the son does not have a developmental disability. P.C.'s daughter also does not have a disability. Several months later, due to stresses of parenting, medical issues, and family crises, P.C. again asked for respite to help maintain her family. The regional center refused, stating respite was only possible if the children were regional center consumers.

P.C. and her partner contacted OCRA. OCRA concluded they were entitled to respite. The Lanterman Act provides parents with developmental disabilities the same array of services and supports provided to parents of children with developmental disabilities. This includes respite for parents,

as well as child care and similar services. P.C. and her partner appealed the denial and OCRA agreed to represent them at a fair hearing. One week prior to the hearing, the regional center contacted OCRA and indicated there was no need for a hearing given the laws OCRA had cited. The notice of action was rescinded and the regional center agreed to contact the family to determine the amount of respite services needed. Doug Harris, Associate CRA, Redwood Coast Regional Center.

### **Regional Center Reverses Denial of Eligibility.**

D.T. was a client of the regional center for 4 years due to a diagnosis of mental retardation. He was on SSI, lived in a board and care home Monday through Friday, and worked at a day program. Unexpectedly, D.T. was terminated from regional center eligibility on the basis that he was no longer developmentally disabled.

The CRA and Assistant CRA met with the consumer's father to educate him regarding eligibility, began gathering medical and academic records, and spoke to the regional center appeals specialist regarding eligibility. The regional center then agreed to continue the consumer's eligibility. Bernadette Bautista, CRA, Inland Regional Center.

### **Consumer Found Eligible Under 5<sup>th</sup> Category Prior to Hearing.**

R.B. is 20-years-old and has cognitive impairments and a severe hearing loss as well as mental health issues. She had applied for regional center eligibility under the 5<sup>th</sup> category, and had been assessed by the regional center team. R.B.'s mother called OCRA to ask for assistance because R.B. had not received a Notice of Action from the regional center.

During investigation, OCRA determined that when the regional center had done its home visit, the sign language interpreter had eliminated the signs that did not make sense and had put R.B.'s signs into English order. OCRA called the regional center and requested a second home visit with a different interpreter. OCRA was also to be included in the meeting.

OCRA arranged for R.B. to have an independent assessment by a team that knew how to assess people with multiple disabilities and with hearing impairments. The assessment was completed and sent to the regional

center. Before the scheduled appointment with the regional center staff, R.B. received a letter from the regional center finding her eligible for regional center services. Katy Lusson, CRA, Golden Gate Regional Center.

**OCRA Settles Regional Center Eligibility Case for Youngster.**

A.R. is a 4-year-old boy with a diagnosis of pervasive developmental disorder not otherwise specified (NOS). A.R. sought regional center eligibility under the criteria for ‘autism’. The regional center denied eligibility.

OCRA agreed to provide direct representation at the eligibility hearing. OCRA began the process of obtaining records and contacting potential witnesses. OCRA retained a neuropsychologist to complete a comprehensive review and submit a report regarding his findings. OCRA also contacted the staff at A.R.’s current educational placement, and asked if they could submit a letter concerning regional center eligibility. OCRA began working on the evidence packet and completing the witness preparation in order to proceed to the hearing.

OCRA submitted the expert’s report and the educational placement’s letter to the regional center a few days before the document exchange was scheduled. After reviewing the additional information, the regional center contacted OCRA and agreed to settle the case and find A.R. eligible for services. Marvin Velastegui, CRA, Gloria Torres, Assistant CRA, San Andreas Regional Center.

**Mediation Secures Early Start Agreement for ABA, Speech Therapy, and Occupational Therapy Services.**

J.M. was already close to 3-years-old when she was found eligible for Early Start services because of a diagnosis of autism. Eight to twelve weeks later, the recommended speech therapy and occupational therapy began. With not much time remaining before her third birthday, her parents and the regional center discussed how to provide a recommended intensive autism program. The regional center contracted for an assessment by an Applied Behavior Analysis (ABA) agency. ABA techniques were so successful that J.M. made progress during the assessment. Her parents wanted her to receive in-home ABA, but since she was now three, they could not persuade the

regional center to provide the service. J.M.'s parents paid for the ABA themselves. They then contacted OCRA, who advised them that Early Start law forbids delay in the provision of services and forbids cost to the child's parents.

After discussing the situation and reviewing J.M.'s records, OCRA agreed to represent her in an Early Start appeal. At mediation, OCRA and her parents set out the facts and dates relating to J.M.'s assessments, the recommendations for services, and the actual provision of services, as well as the parents' concerns and hopes for their daughter. With this understanding of the situation, and even though J.M. had already turned three, the parties reached a mediation agreement that the regional center would reimburse J.M.'s parents for the cost of the speech therapy assessment and ABA services already paid for, and would provide additional, or compensatory, speech therapy, occupational therapy, and ABA services. Her parents are advocating for comparable services in her preschool program. Marsha Siegel, CRA, Regional Center of the East Bay.

### **Regional Center Provides Dentures.**

M.D. is a 61-year-old man with a diagnosis of epilepsy, mild mental retardation and deafness. He spent much of his childhood in state hospitals prior to his diagnosis of deafness. M.D. has no upper teeth and only seven lower teeth. He was denied funding for dentures by DentiCal and subsequently made a request to the Regional Center to provide funding. They too denied him, stating that the loss of his teeth was not a direct result of his developmental disability. The Assistant CRA took this matter to an informal hearing and argued that the loss of his teeth was due to the large amounts of Dilantin and Phenobarbital he has taken to control his seizures, thus making the loss of his teeth a direct result of his developmental disability. The regional center agreed and is paying the entire amount of the cost to get M.D. his much-needed dentures. Lorie Atamian, Assistant CRA, Far Northern Regional Center.

## **SPECIAL EDUCATION**

### **Compensatory Classes Obtained.**

R.B. is a 20-year-old attending a Los Angeles Unified School District High School. He currently resides in a regional center group home. His group home administrator was present at his last few IEP meeting but R.B.'s mother was not present. When his mother secured copies of the documents, she discovered that R.B. was not receiving any Speech and Language (LAS) services despite the fact that he clearly needed them. His prior goals included utilizing a Picture Exchange Communication System (PECS) and simple signs.

R.B.'s last IEP stated that no LAS services had been provided because no therapist was available. R.B.'s mother and regional center caseworker filed for hearing to secure both future services and compensatory time. They contacted OCRA for help at the mediation with the school district. OCRA represented at the mediation on behalf of R.B.

At the mediation, OCRA secured 30 hours of compensatory services and future services. The compensatory services must be completed by the end of the 2003/2004 school year when R.B. will finish his educational career with the district. The LAS services actually started the next week before an implementation IEP was drafted. R.B. is now receiving the services he needs to be more independent when he completes high school next spring. Katie Casada Hornberger, CRA, Harbor Regional Center.

### **Student Will Remain in His Regular Education Classroom.**

D.W. is diagnosed with autism. D.W.'s school district also wanted to label D.W. as having an emotional disturbance with a tendency to engage in inappropriate sexual touching. The district wanted to transfer D.W. out of the regular classroom to a more restrictive environment. Consequently, the district requested an evaluation from the County Department of Mental Health. D.W.'s parents contacted OCRA. OCRA attended an IEP meeting and requested a simultaneous independent evaluation. The conclusion from both evaluations was that D.W. was doing well in the regular education classroom with his one-to-one aide. As a result, D.W. will remain in his

current educational placement. Eulalio Castellanos, CRA, Kern Regional Center.

**School District Will Provide Sign Language Instruction.**

A.V. is a student diagnosed with autism who requires sign language instruction. A.V.'s mother requested such services for her son and called OCRA when the school district denied them. OCRA contacted the district's Director of Special Education and after some informal advocacy, the district agreed to provide the additional instruction. Eulalio Castellanos, CRA, Kern Regional Center.

**Minor Returns to School with Health Aide Assistance and a Full Assessment of Special Education Needs.**

Y.R., a 7-year-old diagnosed with cerebral palsy and seizure disorder has not attended school this year or received a school assessment to address her special education needs. The school refused to allow Y.R. to attend school until Y.R.'s mother or the regional center provided a nurse. Y.R.'s mother contacted OCRA for assistance.

OCRA agreed to discuss the matter with the school, Y.R.'s doctor, and regional center staff and assist in creating an effective strategy for having Y.R. return to school with appropriate services in place. The school agreed to Y.R.'s return to school with a school district classroom health aide and to conduct a full evaluation of Y.R.'s special education needs, including occupational and physical therapy. Tim Poe, CRA, North Los Angeles County Regional Center.

**Student Retains In-Home Behavior Therapy.**

I.I. is a client of the regional center and attends school in the Los Angeles Unified School District. The parents contacted OCRA after an unsuccessful IEP meeting. At the IEP meeting, the parents had refused to sign an IEP that would have taken away in-home behavior therapy. The district wanted to terminate the full 10 hours per week of therapy. The parents filed for due process.

At the mediation, the CRA argued that I.I. continued to need the therapy. After negotiation and discussion, the school agreed to cut the weekly therapy



by 2 hours per week from 10 hours to 8 hours, and to increase the monthly supervision of the therapist from 4 hours to 6 hours per month. Matt Pope, CRA, East Los Angeles Regional Center.

**Immediate Full inclusion Placement With 1:1 Aide Is Result of OCRA Advocacy.**

J.H. was placed in a special day class for children with severe disabilities. Perhaps because there was no full time teacher, the children in the special class were particularly rowdy, and J.H.'s behavior began to deteriorate. During this same time period, J.H. was being successfully mainstreamed, with one-to-one support, into a general education first grade reading class. J.H.'s parents decided that inclusion in a full time general education placement would be more appropriate for J.H., and began requesting an IEP meeting. After a month of unanswered requests for an IEP meeting, J.H.'s parents contacted OCRA.

An IEP meeting was scheduled and held for J.H., at which his parents and OCRA advocated for full inclusion. School district members of the IEP team were firmly opposed to such placement and said he could not be fully included because he was below the first grade academic level. The staff also maintained that J.H. should not be fully included because his self image would suffer.

The district scheduled a second IEP meeting to which the Director of Special Education was invited. The Assistant CRA worked to keep the IEP team focused on J.H.'s right to the least restrictive environment and his record of successful mainstream experiences when he was provided with full support. The day after this IEP meeting, J.H. was placed in a general education first grade as a full-inclusion student, with full one-on-one support. Celeste Palmer, Assistant CRA, Regional Center of the East Bay.

**Sexual Abuse Complaint Filed and Investigated.**

Z.R. is a 7-year-old boy who has autism and who was sexually abused at school. Z.R.'s mother had Z.R. examined at a hospital then called OCRA to determine what else to do. OCRA confirmed that the abuse had been reported to the child protective services agency and to the police. OCRA recommended convening an emergency meeting with Z.R.'s mother and regional center service coordinator plus school personnel. OCRA requested

that the service coordinator contact the regional center's on-call psychologist, who performed an emergency evaluation. OCRA also asked the service coordinator to purchase the services of a behavioral specialist to perform an assessment of Z.R. to evaluate his need for psychological treatment. A new educational placement was obtained at the emergency IEP. Finally, OCRA requested and secured double the respite hours for Z.R.'s mother pending a change in Z.R.'s educational placement.

Subsequently, OCRA assisted Z.R.'s mother in filing a complaint with the Superintendent's Office of the School District as well as the Professional Practices Division of the Commission on Teaching Credentialing. Joe Tontodonato, Assistant CRA, San Diego Regional Center.

***Student Makes Swift and Significant Progress.***

B.G., a 9-year-old student with autism, was attending a special day class for students with severe disabilities in his mountain community. He was successfully mainstreamed with the support of a one-on-one paraprofessional who provided services including assistance with his academic goals, communication training including American Sign Language, behavioral intervention, sensory integration therapy, and a home program 5 times per week. None of these services were documented in his IEP and when the paraprofessional moved, all of his services stopped. B.G.'s progress also stopped.

B.G. developed very aggressive behaviors and showed regression in his academic, social, and communication skills. The family reported regression and aggressive behaviors in the home. The district reassigned him to a classroom of children described as "medically fragile." School personnel reported 100-150 aggressive acts each day. He caused injury to himself and the staff, hospitalizing one. B.G. was suspended for 10 days, and the police were called. The SELPA director questioned the regional center about an out-of-home placement into an urban school district that would provide an appropriate program.

OCRA demanded that the district create a program for B.G. that was designed for a student with autism. OCRA contacted a non-public school (NPS) for children with autism that was considering opening a school in a community one hour away. The district agreed to fund an Independent Educational Evaluation (IEE) by the NPS. The NPS attended B.G.'s

IEP/Manifestation Determination meeting and participated in designing an educational program. Following suspension, B.G. began to attend a program created for him. The district provided a classroom, a supervising teacher and two aides. The NPS provided an aide and a behaviorist to lead the program and to train the district staff. Within days, B.G.'s aggressive behaviors were reduced to 1-2 per day. He began to make academic progress, to communicate his needs, and to interact socially with the staff. The NPS completed the IEE and recommended that B.G. be integrated with his peers. He is working on academic goals and is expected to be speaking 10-20 words by the next reporting period. Kay Spencer, Assistant CRA, Central Valley Regional Center.

**Special Education Student Reclassified.**

J.P. is a 5-year-old boy in a regular education kindergarten class. His parents contacted OCRA because J.P. was supposed to be receiving resource services and was not. The parents were also concerned that J.P. was not receiving all of the services in his IEP. After reviewing J.P.'s IEP, OCRA became convinced that J.P. was actually a full-inclusion student who had been misclassified and would be better served if he was classified as a full-inclusion student.

OCRA called the school administrator and scheduled an IEP. The CRA suggested that if J.P. were reclassified as a full-inclusion student, he would receive the services of a full-inclusion specialist. This would give J.P.'s parents the type of coordination they were requesting. It was also requested that a resource specialist provide compensatory services for the time missed. At J.P.'s IEP, the team agreed to classify him as a full-inclusion student. They also agreed to the compensatory time from the resource specialist. Katy Lusson, CRA, Golden Gate Regional Center.

**OCRA Assists Family to Specify and Implement IEP Goals.**

E.F. is in a special education day class. The regional center case manager sought OCRA's assistance with E.F.'s special education problems. After speaking to E.F.'s mother, it determined that E.F. was not receiving the speech and language services identified in her IEP. It was also determined that E.F.'s goals and objectives were vague and unmeasurable and that her placement needed to be re-evaluated.

At the IEP, OCRA was able to have E.F.'s goals and objectives rewritten. The IEP team agreed to provide the speech and language services as written in the IEP. The administration also agreed to show the mother two new placement options for her child and to reconvene the team after she visited these classes. Katy Lusson, CRA, Golden Gate Regional Center.

### **OCRA Puts a Halt to Lunchtime Segregation.**

K.L. attended high school and was in a special education class. A new rule had been implemented stating that students who attended special education classes could not leave the cafeteria at lunchtime because it was too dangerous for them to wander around in the playgrounds.

OCRA went to the school and investigated the lunchtime procedure. After confirming that the procedure segregated special education students, OCRA spoke with the principal about the procedure. The lunchtime procedure was immediately changed and more staff were added to supervise the students. Bernadette Bautista, CRA, Inland Regional Center.

### **One-to-One Aide to Assist with Special Activities.**

J.A. is a mainstreamed student in high school. This is her first year of high school and she has been attending a high school out of her district because last year's IEP team had recommended this placement. J.A. has mild mental retardation due to fetal alcohol exposure. She was adopted as an infant and her mother had always provided her with many activities in settings that were not specifically for youngsters with disabilities.

J.A. was in the church choir and had recently gone on a five-day trip with the choir during which she had no special support or supervision. J.A. and her mother were unhappy because J.A. had been excluded from extra-curricular activities and her special education teacher was being overly protective with her. One example of this was that J.A. wanted to eat lunch with the general population and her teacher wanted her to eat with the special education students. The mother had attempted to negotiate with the

district administrator to get J.A. transferred to her home school but without success.

Mother called and asked OCRA to represent J.A. at the IEP meeting that had been set-up to discuss these issues. OCRA interviewed J.A. and determined that indeed J.A. did want to transfer and was not happy in her present placement. OCRA spoke to the administrator and an IEP meeting was set. At the meeting, the teacher and administrator agreed that J.A. had been treated unfairly in relation to the extra-curricular activities. The IEP team determined that J.A.'s needs were not being served in her present class and that her home school had a program that would be better able to meet her needs. The school also agreed to provide a one to one aide to assist J.A. with the extra-curricular activities that she is entitled to attend, which includes drama club and a choral group. Katy Lusson, CRA, Golden Gate Regional Center.

### **School Addresses Many Needs.**

N.S. is a 5-year-old girl who has Down Syndrome, is non-ambulatory, and legally blind. The school district had refused to assess the child's physical therapy (PT) needs for more than two years and were changing her placement from a vision-impaired pre-school program to a kindergarten program with no vision component. In spite of the facts that N.S. could not walk, that her parents had asked for physical therapy many times over a period of more than two years, and that her condition was not covered under other programs, the school district maintained that that it was not responsible for PT.

When the district insisted that N.S. be placed in a kindergarten classroom that did not provide any vision services, N.S.' parents sought help from OCRA. OCRA advocacy at an IEP meeting resulted in a signed Assessment Plan for PT, for a durable medical equipment needs assessment, and for a U.C. Berkeley vision assessment. It was also decided at that meeting that N.S. would remain in her current placement for the vision-impaired until the recommendations from the vision assessment could be reviewed.

When the district failed to meet required timelines, OCRA filed a complaint with the California Department of Education. At a subsequent IEP meeting, the school district agreed to provide N.S. with ongoing PT for two hours per

week, plus an additional 20 hours compensatory education before August, 2004, and 10 hours per year of extra consult time for classroom staff and parents. The school district also provided N.S. with a walker, a car seat and a stroller, and is acquiring leg supports. It was decided that N.S. will stay in the vision-impaired program unless the vision report recommends otherwise. Celeste Palmer, Assistant CRA, Regional Center of the East Bay.

### **Special Education Settlement Reached through Mediation.**

When K.R.'s behavioral outbursts increased to a level no longer suitable for a regular education setting, he was placed in a special day classroom. In his SDC class, he was receiving minimal attention from various aides assisting in the classroom. K.R.'s behaviors continued to exceed controllable levels. In October, 2003, at the recommendation of an IEP meeting held in April, 2003, K.R.'s mother asked that a one-to-one aide be assigned to K.R. throughout his school day and that the district conduct a Functional Behavioral Analysis (FBA) in order to develop an appropriate behavioral intervention plan (BIP).

The district refused the first request stating that K.R. receives one-to-one *attention* from the aides in the classroom. K.R.'s mother then filed for fair hearing. When she also filed a compliance complaint to get the FBA done, the district agreed to conduct the FBA. Despite the recommendations made in the FBA and the BIP, no one-to-one aide was offered.

OCRA agreed to proceed to Fair Hearing with the mother. At mediation, the district representatives initially continued to assert that K.R. receives one-to-one attention satisfactory to his needs. The various assessments showed that K.R. is more responsive to individual attention, and is more functional when he has one specified person around him consistently. The district finally agreed to provide a full time one-to-one aide who will work only with K.R. The district also agreed to extend his aide time from 8:30 a.m. to 2:30 p.m., his entire school day. C. Noelle Ferdon, CRA, Far Northern Regional Center.

**OFFICE OF CLIENTS' RIGHTS ADVOCACY  
ANNUAL REPORT  
(July 1, 2003 – June 30, 2004)**

**DENIAL OF CLIENTS' RIGHTS**

<b>Regional Center</b>	<b>Good Cause</b>	<b>Right(s) Denied</b>	<b>Date Denial Began</b>	<b>Date of Review</b>	<b>Date of Restoration</b>
CV03	I	V	4/15/04	6/10/04	Pending
CV03	I	V	6/10/04	7/13/04	Pending
KRC001	I	P	11/20/03	1/5/04	5/7/04
RCRC92-015	I	P	4/16/92	9/1/03	TBA
RCRC92-015	I	P	4/16/92	10/1/03	TBA
RCRC92-015	I	P	4/16/92	11/1/03	TBA
RCRC92-015	I	P	4/16/92	12/1/03	TBA
RCRC92-015	I	P	4/16/92	1/20/04	TBA
RCRC92-015	I	P	4/16/92	2/20/04	TBA
RCRC92-015	I	P	4/16/92	3/20/04	TBA
RCRC92-015	I	P	4/16/92	4/20/04	TBA
RCRC92-015	I	P	4/16/92	5/20/04	TBA
TCRC0407	O	C	4/15/04	5/15/04	Pending
TCRC0407	O	C	5/17/04	6/17/04	6/24/04

**Clients' Rights:**

- M** To keep and be allowed to spend one's own *money* for personal and incidental needs.
- V** To see *visitors* each day.
- C** To keep and wear one's own *clothes*.
- T** To have reasonable access to *telephones*, both to make and receive confidential calls, and to have calls made for one upon request.
- L** To mail and receive unopened correspondence and to have ready access to *letter* writing materials, including sufficient postage.
- P** To keep and use one's own personal *possessions*, including toilet articles.
- S** To have access to individual *storage* space for one's private use.

OCRA Attorney's Fees July 1, 2003 - June 30, 2004

Date	From		Case #	Amount
8.31.03	State of California	Deparini	3776	\$3,362.71
2.29.04	Ocean View Elementary School	Lewis	500713	\$2,000.00
Total FY 2004				<u>\$5,362.71</u>



OFFICE OF CLIENTS' RIGHTS ADVOCACY  
ANNUAL REPORT  
JULY 1, 2003 - JUNE 30, 2004

CONSUMER GRIEVANCES WITH CONTRACTOR

DATE OF RESOLUTION LETTER	COMPLAINT (INITIALS)	NATURE OF COMPLAINT	STATUS	OUTCOME
9/6/03	V.S.	Failure to represent in RC Eligibility and Special Education matter	Closed	Explanation and offer to assist further
1/6/04	R.B.	Provision of regional center services	Closed	Concur with staff actions
7/26/04	M.G.	Failure to represent in least restrictive placement matter	Closed	Concur with staff actions