

## INTRODUCTION

The Office of Clients' Rights Advocacy (OCRA) has provided advocacy services for the consumers of California's 21 regional centers for 8 years. As required by the contract between the Department of Developmental Services (DDS) and Protection and Advocacy, Inc. (PAI) for advocacy services, PAI hereby submits this Annual Report for Fiscal Year 2005-2006.

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. As OCRA moves into a new contract with DDS, staff remains dedicated to providing excellent service to people with developmental disabilities. OCRA is justly proud of its services and the difference that staff has made in the lives of so many people.

During the past year, OCRA handled 8,612 intakes and cases and provided over 285 trainings attended by approximately 10,643 people. This is truly representative of the dedication with which each staff person approaches his or her job.

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 all but one of the areas of performance discussed under Section II, Paragraph 3, and that one area was at 88 percent satisfaction. OCRA staff makes a strong effort to provide high quality advocacy services to the consumers that it serves. That effort is reflected in the statistics quoted, 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. Below are portions of a few of these letters:

...Without your offices' technical assistance, my daughter would still be having daily seizures, even with medication, and would not have the minimal accommodations she needed to handle daily life that the typical family takes for granted...For the first time in her life she looks me in the eye occasionally and smiles telling me without words how grateful she is not to

have to go out and deal with the noise we all take for granted until she is older and can understand life better.

I want to thank you...for the informative presentation on consumer rights and confidentiality you gave on May 4. Your wit and charm put staff at ease and opened the discussion of some very critical points. In particular, the examples you used of some of your cases were excellent.

Nuestra defensora-Angel legal. A quien le agradecemos tanto todo lo que ha hecho por nosotros. Por mi y mi familia. Gracias de todo Corazon. (Our advocate - Our legal angel whom we would like to thank for everything she has done for my family and me. Thank you with all my heart.)

Thank you for help me not pay the bill P.S. Because I have no money.

I want to sincerely thank Client's Rights...for the professional assistance and direction I received on behalf of my daughter....We simply would not have prevailed in our fair hearing process...without her at our side. She communicated in a clear and helpful way, was very detailed in her preparation, and was not intimidated by the "seasoned"... supervisors. She raised legal and logical points that ultimately resulted in a positive decision for services for my daughter. I hope we don't have to work together again, but if other issues occur I would look forward to having her help....

I don't know if I can fully express....my deep appreciation for all the effort and work you two have put in towards getting my son's drivers license returned to him. I'm sure we would have had a much tougher time getting his driving privilege back without your help. My son is a much better driver now and appreciates his license so much more.

...(W)e are all elated with the effective communication skills and legal expertise of your staff. It is with an out pouring of gratitude that we express our certainty that my son's fate would most certainly not be as optimistic were it not for the

compassionate hearts, hard working efforts and high level of legal counsel represented here by Clients' Rights. Please extend our deepest and most sincere appreciation to your "incredibly competent" team.

I wanted you to know how much I appreciate your help every time I have a crisis with my son and the services he is not receiving. So many times, as a parent, I don't know where to turn to get correct and up to date information concerning my son's rights...I don't know of any other organization that is quick, knowledgeable or efficient as you. It is very rare to find someone as dedicated to our children and parents as you are. Thank you for all your help and you are very much appreciated.

...I would like to take this opportunity to express our sincere thanks and appreciation to you for your training session on clients' rights. You were professional and communicated in a manner that got people interested in the topic at hand; but most importantly, you provided examples and elicited feedback. As a presenter, you are outstanding and we look forward to having you provide additional training on this vital topic (clients' rights) to our staff.

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. The agreed upon measures are:

**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 eleven 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 8,612 issues for consumers. It is clear that OCRA resolved

significantly more issues for people with developmental disabilities than required by the performance objective and that OCRA's staff continues to strive to provide as many services as it possibly can.

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

OCRA continues to exceed this performance objective. OCRA handled 8,612 requests for assistance during this reporting period. Of these, 124 were handled as requests for direct representation at hearing or filing of a formal complaint. This means that approximately 99 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 its performance standard in almost all areas surveyed. From the survey results, it is clear that OCRA consumers are overwhelmingly satisfied with the services provided by OCRA. With a 40 percent return rate, of those who answered the questions, 93 percent of the responders felt they were treated well by the staff, 92 percent understood the information they were provided, 92 percent believed their CRA listened to them, 88 percent believed they were helped by the CRA, and 91 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, 83 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 year. The chart below reflects the training dates.

OCRA has developed five 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 or shown to DDS, and though the current contract does not require the approval of DDS, OCRA welcomes comments from DDS. Additional trainings were developed on voting rights, consumer finance, fair hearing rights and a game called Clients' Rights Bingo. The game is similar to a traditional bingo game, except that pictures used depict various rights to which people with developed disabilities are entitled.

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. Each OCRA office met its mandated self-advocacy training on the following dates:

Alta CA RC	November 15, 2005
Central Valley RC	October 7, 2005
East Los Angeles County RC	October 16, 2005
Far Northern RC	July 27, 2005
Golden Gate RC	November 28, 2005
Harbor RC	July 18, 2005

Inland RC	August 22, 2006
Kern RC	May 19, 2006
Lanterman RC	March 8, 2006
North Bay RC	September 28, 2005
North Los Angeles County RC	September 9, 2005
Redwood Coast RC	April 21, 2006
RC of East Bay	January 27, 2006
RC of Orange County	July 20, 2006
San Andreas RC	June 12, 2006 June 14, 2006 July 3, 2006 July 12, 2006
San Diego RC	March 4, 2006
San Gabriel/Pomona RC	August 4, 2006
South Central Los Angeles RC	June 5, 2006
Tri-Counties RC	April 6, 2006
Valley Mountain RC	December 14, 2005 January 30, 2006
Westside Regional Center	February 1, 2006

**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 285 trainings during the past year. This was 56 percent or 124 more than required by this performance objective. 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.

Of the 285 trainings given, there was a combined attendance of approximately 10,643 people at the trainings. It is obvious that OCRA presented information to an extremely large 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, Lisa Navarro as the Northern California Outreach Coordinator, and Emma Hambright as the 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. The plans were updated on an annual basis. Effective this year, targeted outreach plans were developed for a two-year period as it is believed that OCRA staff will be able to develop a more consistent, on-going relationship with an underrepresented group if staff targets the group for a longer period of time.

Review of the statistics on OCRA's services to underrepresented groups show steadily increasing services to most people of color and underrepresented groups. A detailed report on targeted outreach and training is included here as Exhibit D. It is clear 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 the 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.**

Jeanne Molineaux, Catherine Blakemore, and Bob Baldo, the Executive Director of the Association of Regional Center Directors, met on December 15, 2005. At that time, it was agreed that there were no significant outstanding issues between OCRA and the regional center directors. Additional 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. Attached as Exhibit E is a list of the current members of the committee.

Vacancies on the committee are listed on PAI's website. 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 five consumer members and three family members who represent diverse geographical and ethnic backgrounds. Additionally, some of the members belong to other 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, that DDS does not already have, 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 2, 2006.

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

Each OCRA office provides 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. The 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:

##### ***Consumer Keeps Her Specialty Mental Health Services.***

A.M. is a 16-year old diagnosed with autism and anxiety disorder. In 2002, A.M. began receiving specialty mental health services at her group home. Last summer at A.M.'s mental health annual assessment, the county determined that A.M. no longer had a psychiatric diagnosis. Santa Barbara County Mental Health then terminated A.M.'s specialty mental health

services and day rehabilitation services. A.M. appealed. OCRA agreed to represent A.M. at the administrative hearing.

A.M. obtained an independent psychiatric evaluation. Based on this evaluation and the treating psychologist's diagnosis, OCRA argued that A.M. had a psychiatric disorder in addition to her autism. The administrative law judge (ALJ) determined that the county's experts did not work with A.M. other than at the annual assessments. Further, the ALJ determined that A.M.'s experts had been working with her for a longer period of time. The ALJ noted in his decision that, "The opinions of treating physicians are entitled to greater weight than 'one-shot consultants....'" The ALJ concluded that A.M. has a psychiatric disorder so A.M.'s specialty mental health services were to continue.

### **IHSS Hours Restored One Day Prior to Hearing.**

P.G. needs help with all his self-care. He cannot speak. While living with his brother in Fresno County, P.G. received 238.3 hours of IHSS, which included protective supervision. P.G. was removed from his brother's care and placed with his sister in Merced County. His IHSS hours were cut to 42.2 hours a month. OCRA was contacted.

OCRA worked diligently on behalf of P.G. and prepared for hearing. Due to the CRA's efforts, P.G.'s hours and protective supervision were restored to 234.3 without going to hearing.

### **OCRA Assists Client to Keep Service Dog at Home.**

B.M.J. contacted OCRA regarding her landlord's refusal to provide her with a reasonable accommodation by modifying the "no pets" policy and allowing her to keep her support dog, Princess. B.M.J. had lived at her current residence with Princess since approximately 1993, without any objection from the apartment management or other residents. However, B.M.J. reported to OCRA that the landlord had recently started to make verbal requests to get rid of the dog because of alleged "barking." B.M.J. reported that she has not received any complaints from her neighbors about the dog's barking. Subsequently, the landlord reportedly entered the apartment to remove the dog and "offered" to drive B.M.J. to the animal shelter to drop off Princess. Fearing eviction and retaliation from her landlord, B.M.J. accompanied the landlord to the animal shelter. OCRA

worked with B.M.J.'s regional center service coordinator and the animal shelter to get the shelter fees waived and the dog returned to B.M.J.

OCRA then drafted a letter to B.M.J.'s landlord advising him that removal of Princess from B.M.J.'s residence was contrary to state and federal anti-discrimination, tort, and landlord-tenant laws that protect individuals with disabilities who live with a service or companion animal from being denied housing because of policies that prohibit pets. Several days later, OCRA received a call from B.M.J.'s landlord, who agreed to allow the dog to remain in the apartment. In addition, OCRA requested that any future concerns regarding the animal should be presented in writing to accommodate B.M.J.'s cognitive disabilities. The landlord agreed to these requests.

### **G.G. Is Absolved of Debt.**

G.G. recently began receiving notices from a debt collection agency requesting more than \$400. G.G.'s group home administrator, in an effort to help, tried to negotiate a payment plan that G.G. could afford. The debt collection agency refused to cooperate and requested a higher monthly payment than G.G. could afford. G.G. is an SSI recipient and does not work.

G.G.'s group home administrator contacted OCRA for assistance with getting a lower monthly payment. OCRA explained that G.G.'s income from SSI was not subject to garnishment and therefore the debt collection agency would never be able to collect unless G.G.'s source of income changed. OCRA wrote a letter to the debt collection agency explaining G.G.'s situation and asked the agency to waive the debt. The collection agency contacted OCRA and after discussion agreed to waive the debt.

### **Residential Facility Withdraws 30-Day Notice.**

J.E. was being evicted from his residential facility due to his behaviors and the facility's inability to address his health concerns. J.E. contacted OCRA requesting assistance with the eviction. J.E. often separates himself from other residents and staff on group outings, disrupting the outings for everyone. The Assistant CRA contacted the care provider and was informed that J.E. had two previous evictions that had been withdrawn in order to give J.E. the opportunity to improve his behavior. The care provider was also

concerned with J.E.'s sugar intake and his diabetes and no longer wanted to be responsible for J.E.'s health. The care provider suggested a more restrictive placement in which J.E. could be more closely monitored. J.E. disagreed with this suggestion.

The Assistant CRA convinced the care provider to give J.E. one last opportunity and facilitated a meeting and a new IPP, the results of which were that appropriate supports and services were provided to keep J.E. in his current placement.

**OCRA Compliance Complaint Regarding Medi-Cal Billing Process for IEP Services Substantiated.**

N.S. receives special education. N.S. was made eligible for Medi-Cal through his participation in the DDS Waiver in October, 2004. N.S. is also insured under his father's group health plan through the father's employment. In January, 2006, N.S.' parents received copies of their private insurer's Explanation of Benefits indicating that some of the related services N.S. has received through his IEPs were billed to the private insurance by the California Department of Health Services (DHS). The district had billed DHS, which, in turn, billed N.S.' private insurance. N.S.'s father confirmed with the private insurance representative that the insurance company's payment of school-based services claims resulted in the reduction of N.S.' lifetime maximum benefits.

OCRA filed a compliance complaint with the Department of Education (DOE) alleging that N.S. had been denied a free, appropriate public education (FAPE) as a result of the billings and that the district had failed to obtain the requisite informed consent by N.S.' parents prior to accessing private insurance for reimbursement of school-based services.

When DOE contacted OCRA to obtain further explanation of the complaint, DOE determined it needed an extension of time to obtain legal counsel and join DHS and DDS. After extensive investigation, DOE concluded that the school district was out of compliance with federal law and that N.S. had been denied FAPE.

DOE ordered the district to cease submitting any further claims on behalf of N.S. for Medi-Cal reimbursement; to provide documentation that it had not directly submitted claims to N.S.'s private insurance; to request retraction of any and all payments it received from DHS; to request DHS reimburse N.S.'s private insurance; to request to the private insurance that the latter

reinstate N.S.'s lifetime maximum benefits; and to notify the governing board of the school district of the issues related to the complaint at a regularly scheduled public hearing.

## **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. 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, punitively withheld or improperly or unreasonably denied, may file a complaint with the Clients' Rights Advocate. The Complaint process is similar to that established by 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, or Assistant Clients' Rights Advocates working under the supervision of an attorney, can collect attorney's fees and costs similar to those collected by private attorneys or advocates for special education cases or other cases where there are statutory attorney's fees. OCRA collects fees only in special education cases or Writs of Mandamus. 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 consumer 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 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.

Five grievances were filed by consumers or their families against OCRA last year. Most of the grievances were resolved at the first level. Two of the grievances advanced to the second level, which is review by PAI's Board of Directors, Executive Committee. In both of the 2<sup>nd</sup> level filings, OCRA's staff's actions were upheld. One of the grievances advanced to the 3<sup>rd</sup> level, which is a review by DDS. DDS upheld OCRA's actions in the matter. Information concerning all 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 8,612 cases from July 1, 2005, through June 30, 2006. This represents a significant amount of advocacy assistance. 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 current OCRA statistics remain consistent with OCRA's previous statistics. For example, the largest number of consumers served by age, 2,290, has consistently been the 3-to-17 years-old age group. The next largest is the 22-40 age group with 1,200 people served. The consistency remains in the ratio of males to females served, also. OCRA has traditionally served more males than females, with approximately 60 percent of the consumers served being male and 39 percent being female. For one percent of OCRA's intakes, the gender is unknown. These statistics are consistent with the percentage of regional center consumers who are male versus female. As of July, 2006, 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 5,757 consumers or 66 percent of those OCRA served living in their family home. The next largest group served is those living independently, with OCRA serving 916 people or 10 percent with this living arrangement. DDS statistics show that 69.21 percent of regional center consumers live in their parent's home and 10.07 percent live independently.

OCRA's statistics on the ethnicity of consumers served from July 1, 2004,



through June 30, 2005, show OCRA's continuing commitment to serve underserved communities. The percentage of consumers from various ethnicities served by OCRA was:

Ethnic	% Reg Center Clients (current)	% OCRA Clients 05/06	% OCRA Clients 04/05	% OCRA Clients 03/04	% OCRA Clients 02/03	% OCRA Clients 01/02	% OCRA Clients 00/01	% OCRA Clients 99/00
Afric-Amer	10.60	10.0	10	10	10	9	9	8
Latino	31.26	29	29	28	27	24	24	24
Ameri-Indian or Alaskan Indian	.4	1	1	1	1	1	1	1
Asian	5.67	4	4	5	4	3	5	4
Pacific Islander	2.36	1	1	1	1	1	1	1
White	42.9	45	44	47	49	47	48	56
Multicult (self-ident)	Not listed	3	5	3	4	4	4	3
Unknown/ Other	6.81	6	5	5	4	11	8	8

OCRA's statistics show essentially the same level of service this year as last to most ethnicities, except the number of unknown or other increased by 1 percent to 6 percent, self-described multicultural decreased by 2 percent, and services to whites increased by 1 percent.

The types of problems which OCRA handles remain fairly consistent. For the time period covered by this report, OCRA handled 1,965 special education cases, 2,423 regional center matters, and over 900 cases in income maintenance which includes SSI, California Children's Services, and In Home Support Services, among other benefits. Over 400 cases were

handled involving health matters, and over 300 cases were handled in each of the following categories: conservatorships; consumer finance; family; and housing matters.

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 by 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.

## **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 8,612 cases last year, provided 285 trainings to approximately 10,643 people, met each of its performance objectives, and consistently receives high ratings on consumer satisfaction surveys. OCRA remains dedicated to ensuring that the rights of all of California's citizens with developmental disabilities are enforced.

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# **OFFICE OF CLIENTS' RIGHTS ADVOCACY LISTING**

**STATEWIDE TTY TOLL-FREE NUMBER 1-877-669-6023**

**Toll Free Number: 1-800-390-7032**

**Changes to office – as of August 1, 2006 – Change is *italicized*.**

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## **VALLEY MOUNTAIN REGIONAL CENTER**

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**San Diego**

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2. Alomar, Filomena	VMRC
3. Armand, Christine	SCLARC
4. Atamian, Lorie	FNRC
5. Bacigalupo, Anastasia	SCLARC
6. Bautista, Bernadette	SDRC
7. Bryant, Maria	ALTA – ON LEAVE
8. Casada, Katie	HRC
9. Casas-Sarmiento Eva	RCOC
10. Castellanos, Eulalio	CVRC
11. Cervantes, Veronica	IRC
12. Coleman, Jackie	ALTA
13. Chestnutt, Lisa	KRC
14. Maricris DelaCruz	NBRC
15. Delgado, Aimee	SGPRC
16. Di Verde, Tom	OCRASANDIEGO
17. Ferdon, Noelle	FNRC
18. Gallegos, Jacqueline	ALTA
19. Garcia, Lucy	ELARC
20. Geary, Valerie	KRC
21. Gladson, Marcie	OCRALA
22. Alba Gomez	SDRC – ON LEAVE
23. Gresham, Gail	OCRASAC
24. Hambright, Emma	LRC
25. Harris, Doug	RCRC
26. Harwood, Meriah	WRC
27. Hernandez, Yulahlia	NBRC
28. Lipscomb, Arthur	SARC
29. Lusson, Katy	GGRC
30. Marquez,Guadelupe	OCRALA
31. Martinez, Jessyca	IRC – TEMP
32. Miller, Jacqueline	RCOC
33. Molineaux, Jeanne	OCRASAC
34. Mottarella, Katherine	TCRC

35. Navarro, Lisa	OCRASAC
36. Neves, Leinani	VMRC
37. Ortega, Maria	OCRALA
38. Osborn, Manuella	OCRASAC
39. Palmer, Celeste	RCEB
40. Perez, Enid	CVRC
41. Phan, Jacqueline	TCRC
42. Pope, Matthew	ELARC
43. Quintero, Ada	NLACRC
44. Beatriz Reyes	IRC
45. Bebo, Ibrahim	NLACRC
46. Siegel, Marsha	RCEB
47. Spencer, Kay	CVRC
48. Jim Stoepler	RCRC
49. Torres, Gloria	SARC
50. Villafana, Nadia	SGPRC
51. Wagster, Irma	OCRALA
52. Ximenez, Alice	OCRASAC

**Updated as of August 1, 2006**  
**F:\docs\Alice\CRALIST.doc**

Office of Clients' Rights Advocacy  
Annual Report - July 1, 2005 through June 30, 2006  
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	3	14	5	3	3	2	10	8	2	2	2	2	3	1	8	7	6	7	8	6	5	107
3-17	38	151	151	74	60	85	154	103	104	69	32	121	97	71	163	170	93	123	191	94	146	2290
17-22	30	36	50	31	35	32	45	44	16	24	32	38	26	28	43	44	27	22	73	56	40	772
22-40	35	57	56	50	100	31	78	32	8	42	47	79	56	71	62	33	48	25	122	82	86	1200
40-50	19	24	21	26	41	7	23	16	5	27	25	45	21	44	20	7	20	13	47	43	43	537
50 and above	50	25	154	33	50	19	15	48	12	51	45	44	41	48	36	10	90	20	60	65	50	966
Unknown	6	1	4	1	4		1	2		1		1	1	2	1		2		1	5	1	34
<b>Total</b>	<b>181</b>	<b>308</b>	<b>441</b>	<b>218</b>	<b>293</b>	<b>176</b>	<b>326</b>	<b>253</b>	<b>147</b>	<b>216</b>	<b>183</b>	<b>330</b>	<b>245</b>	<b>265</b>	<b>333</b>	<b>271</b>	<b>286</b>	<b>210</b>	<b>502</b>	<b>351</b>	<b>371</b>	<b>5906</b>



Office of Clients' Rights Advocacy  
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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		1		2					2		315					1					322
Amador				1																8		9
Butte	2			164																		166
Calaveras																				12		12
Contra Costa										1		105										106
Del Norte														11								11
El Dorado	3	4																				7
Fresno		353																	1			354
Glenn				13																		13
Humboldt		1				1	1							104								107
Imperial																	14					14
Kern	1	2						321			1			1					1			327
Kings		29																				29
Lake						1				1			1	91							1	95
Lassen	1			3																		4
Los Angeles	2	1	705		2	337	1	4	219		202	2	2		5	350	4	372	2		533	2743
Madera		35														1						36
Marin		1			152							1										154
Mariposa		4												1								5
Mendocino		1								2				115								118
Merced		37										1										38
Monterey	1									1					47							49
Napa	1									86				1							1	89
Orange	2		1			3	1					1	334				2		3			347
Placer	27												3									30
Plumas				20																		20
Riverside						1	153						3			1						158
Sacramento	283			3	1					2									1		1	291
San Benito	1														16							17
San Bernardino							254						1		2			1				258

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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
San Diego													3			1	392		1			397
San Francisco					125					1												126
San Joaquin				1																259		260
San Luis Obispo					1														53			54
San Mateo		1			156										1							158
Santa Barbara															1			1	191			193
Santa Clara										1		1			297		1					300
Santa Cruz															41					1		42
Shasta				56																		56
Siskiyou				3																		3
Solano										105		3										108
Sonoma										170		1			4							175
Stanislaus		2		2											1					125		130
Sutter	2																					2
Tehama				46																		46
Trinity		1		1																		2
Tulare	9	77			1							1								1		89
Tuolumne																				23		23
Unknown			2	1			3			3			1							1		11
Ventura		5															1	1	464		1	472
Yolo	15																					15
Yuba	15			5	1																	21
<b>Total</b>	<b>366</b>	<b>554</b>	<b>709</b>	<b>319</b>	<b>441</b>	<b>343</b>	<b>413</b>	<b>325</b>	<b>219</b>	<b>375</b>	<b>203</b>	<b>431</b>	<b>348</b>	<b>324</b>	<b>415</b>	<b>353</b>	<b>415</b>	<b>375</b>	<b>719</b>	<b>429</b>	<b>536</b>	<b>8612</b>

Office of Clients' Rights Advocacy  
Annual Report - July 1, 2005 through June 30, 2006  
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	68	12	7	22	26	8	21	4	7	4	9	32	14	9	48	13	3	4	20	6	29	366
Autism	27	80	105	32	28	59	86	51	65	39	23	84	72	33	74	99	67	56	112	41	105	1338
Cerebral Palsy	11	24	25	18	36	23	45	15	12	22	14	50	27	27	26	35	30	22	45	36	64	607
Dual Diagnosis - 5th Category	4	1			2		1		1	1	1	8		3					2	2	5	31
Dual Diagnosis - Autism		2		2			5	1	3	1	2	2	1		12	2			1	3	6	43
Dual Diagnosis - Cerebral Palsy		3					9		1	3	1		3		7	1			10	4		42
Dual Diagnosis - Epilepsy	2	1	1		1	2		1		1	3		2	2	8			2	5	2	1	34
Dual Diagnosis - Mental Retardation	14	19	7	3	14	4	7	6	4	11	29	19	10	14	29	6	1	5	23	6	18	249
Early Start	1	10	3	4	4	11	10	6	10	5	8	11	5	1	2	6	1	13	14	7	16	148
Epilepsy	4	26	25	23	27	4	33	3	2	2	10	14	8	9	11	11	18	14	19	12	57	332
Mental Retardation	59	140	164	118	174	61	147	164	32	99	90	150	77	159	113	106	111	96	263	250	162	2735
Unknown	20	29	156	21	28	32	17	24	29	38	7	3	60	58	46	22	87	37	34	23	13	784
<b>Total</b>	<b>210</b>	<b>347</b>	<b>493</b>	<b>243</b>	<b>340</b>	<b>204</b>	<b>381</b>	<b>275</b>	<b>166</b>	<b>226</b>	<b>197</b>	<b>373</b>	<b>279</b>	<b>315</b>	<b>376</b>	<b>301</b>	<b>318</b>	<b>249</b>	<b>548</b>	<b>392</b>	<b>476</b>	<b>6709</b>

Office of Clients' Rights Advocacy  
Annual Report - July 1, 2005 through June 30, 2006  
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	1	3		12		1	2	3				4	2	13	2			1	1	4	2	51
Asian	6	6	36		28	6	4	3	5	2	3	42	19	2	29	2	3	19	5	5	12	237
Black (Not Hispanic/Latino Origin)	17	21	9	8	31	27	38	34	13	29	21	73	5	12	17	77	13	7	12	34	91	589
Hispanic/Latino	30	111	192	29	43	54	114	69	73	55	42	68	79	14	93	163	83	97	121	78	75	1683
Multicultural (Self-Identified)	11	13	17	7	13	12	19	4	2		4	8	4	3	16	3	2	12	15	12	24	201
Other						1					1		1					1	1			5
Pacific Islander	2	1	2		2	4	2	3	3	7	3	7	5	1	7	1	3	5	4	5	3	70
Unknown	19	4	148	7	7	14	21	1	10	43	11	3	23	23	6	2	32	5	6	4	13	402
White (Not Hispanic/Latino Origin)	95	149	37	155	169	57	126	136	41	80	98	125	107	197	163	23	150	63	337	209	151	2668
<b>Total</b>	<b>181</b>	<b>308</b>	<b>441</b>	<b>218</b>	<b>293</b>	<b>176</b>	<b>326</b>	<b>253</b>	<b>147</b>	<b>216</b>	<b>183</b>	<b>330</b>	<b>245</b>	<b>265</b>	<b>333</b>	<b>271</b>	<b>286</b>	<b>210</b>	<b>502</b>	<b>351</b>	<b>371</b>	<b>5906</b>

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 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	87	106	142	89	124	70	118	102	45	80	63	129	89	91	111	95	109	75	188	150	135	2198
Male	91	200	267	128	168	104	204	149	98	127	116	200	153	169	217	171	163	132	312	200	233	3602
Unknown	3	2	32	1	1	2	4	2	4	9	4	1	3	5	5	5	14	3	2	1	3	106
<b>Total</b>	<b>181</b>	<b>308</b>	<b>441</b>	<b>218</b>	<b>293</b>	<b>176</b>	<b>326</b>	<b>253</b>	<b>147</b>	<b>216</b>	<b>183</b>	<b>330</b>	<b>245</b>	<b>265</b>	<b>333</b>	<b>271</b>	<b>286</b>	<b>210</b>	<b>502</b>	<b>351</b>	<b>371</b>	<b>5906</b>

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Report by Living Arrangement

	ARC	CVRC	ELARC	FNRC	GGRC	HRC	IRC	KRC	LFC	NBRC	NLARC	RCEB	RCOC	RCRC	SARC	SCLARC	SDRC	SGPRC	TCRC	VMRC	WRC	Total
Adult Residential Facility	21		1	21	4	1	23	20	1	3	4	35	6	1	11	1	21		54	29	9	266
Board and Care	22	1			3		10	3		5	22	3	2		3		1	1	13	1	1	91
Childrens Group Home		1	1	2	2	1	4	12		2		14	3		3	1	6		19	5	1	77
Community Residential Home	1	14	3	1	23	1	1	3		3	4	3			3			3	5	32	2	102
Detention Center								1				2			1							4
Developmental Center	11				2	1	4	10	1	2	5	2	1	1	5	3			1	2	1	52
Federal Prison					1																	1
Foster Care	3	4	1	1		8	2	1		2	3	8		2	1	3			3	1	4	47
Foster Family Home	3	12		3			4				1			2	1	8	1		2	2	1	40
Halfway House	2																					2
Homeless	2	2		2			2			4		4	2	2	2	1	1		1	1	8	34
ICF DD	2	2			1		1						2	3				1	3		1	16
ICF DD-H			2		5						3	7	6	1					9	2	1	36
ICF DD-N	1			1			1						4						3	4	1	15
ICF/MR/Nursing Home		1		1						2	3		1		3				1	1		13
Independent Housing	52	32	10	84	41	41	35	60	9	37	34	61	32	77	28	10	31	15	46	96	85	916
Intermediate Care Facility/Nursing Home			2		1		2			2			1			3			2	2		15
Jail	3	1		4	3	2		1		8	6	2	3	2		2			5		2	44
Large Group Home (more than 3 beds)	3	21	2	3	41	15		5	2	11	3		12	9	36	1	5	15	2	1	5	192
Legal Detention								1				1										2
Municipal Detention Facility/Jail			1				1			1					1					1		5
Nursing Home	1	4			1		1				6		3						2			18
Other	5	19	15		2	1	2	2	4	1	2	3	4		2		8		1	1		72
Other Federal Facility		1	1		1			1													1	5
Parental or Other Family Home	180	386	612	149	280	264	303	191	196	246	95	255	223	158	284	316	257	335	464	232	331	5757
Prison		2			1						1		1		1		1		4	1		12
Private General Hospital Emergency Rooms		1	1		1			1		1		1					1			1		8
Private Institutional Hospital/Treatment Facility	2				1	1	1	2		2		2			2				3	2	2	20
Private Institutional School										6			1			2						9
Psychiatric Wards of Private General Hospitals					1					2									3			6
Psychiatric Wards of Public General Hospitals		6		1		1	1			4		1			2			2	3			21
Public Institutional Hospital/Treatment Facility	3	6		4	5		1	1	1	2	1			2	2		1		3		3	35
Public General Hospital Emergency Rooms	1			1																		2
Public Institutional Living Arrangement	1			2			1	3		1		2			1							11
Public Residential School	1																		1			2
Semi-indepent Home or Apartment		31		1	11		1			5	1	2	4	23	8	1	1		39		70	198
Small Group Home (3 beds or less)		3		3		2		2					2	3				1	1		3	20
Specialized Nursing Facility/Nursing Home	1	1	1									3	6	1	3				1	1	1	19
Supervised Apartment	32	1		23	6	1				8	6	13		27	4		1		15	1	1	139
Unknown	13	2	54	14	4	2	13	5	4	16	3	7	31	11	5	1	79	2	10	10	2	288
<b>Total</b>	<b>366</b>	<b>554</b>	<b>709</b>	<b>319</b>	<b>441</b>	<b>343</b>	<b>413</b>	<b>325</b>	<b>219</b>	<b>375</b>	<b>203</b>	<b>431</b>	<b>348</b>	<b>324</b>	<b>415</b>	<b>353</b>	<b>415</b>	<b>375</b>	<b>719</b>	<b>429</b>	<b>536</b>	<b>8612</b>

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<b>OCRA - 4731 Complaint</b>																						
4731 - No Jurisdiction			2												1							3
4731 - Regional Center	4	3	1	1		3	2	2		5	1	3	1	1				3	2	1	1	34
4731 - Service Provider	1	2	1	1				5		1	3		1			2	1	4	4	1	2	29
<b>Total</b>	<b>5</b>	<b>5</b>	<b>4</b>	<b>2</b>		<b>3</b>	<b>2</b>	<b>7</b>		<b>6</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>7</b>	<b>6</b>	<b>2</b>	<b>3</b>	<b>66</b>
<b>OCRA - Abuse</b>																						
Coercion	1											3				1						5
Exploitation (Financial)	5		1		3			2		3	5	6		5	1				12	5	5	53
Exploitation (Physical/Emotional)	2			1	3			1				1		4					1	1	1	15
Inappropriate/Excessive Medical Treatment												1			1				1		1	4
Inappropriate/Excessive Medication								2		1					1							4
Inappropriate/Excessive Physical Restraint							1			1	1	1		1	1		1			2		9
Inappropriate/Excessive Seclusion								1														1
Other Abuse		1	3	5	10		3	8	2	1	2	3	1	4	5		3	1		12	4	68
Physical Assault	6		3	2	9		7	4		2		1	1	5		1			1	7	4	53
Sexual Assault		1	2		10		1	5		1	1	1				3	1		4	3	3	36
Staff Attitude/Behavior	1		3	1	8			2		1		2			2		1		1		3	25
Staff Retaliation			1	2			3			1												7
Verbal Abuse			1		2			1			1		2	1	3		1		1	2		15
<b>Total</b>	<b>15</b>	<b>2</b>	<b>14</b>	<b>11</b>	<b>45</b>		<b>15</b>	<b>26</b>	<b>2</b>	<b>11</b>	<b>10</b>	<b>19</b>	<b>4</b>	<b>20</b>	<b>14</b>	<b>5</b>	<b>7</b>	<b>1</b>	<b>21</b>	<b>32</b>	<b>21</b>	<b>295</b>
<b>OCRA - Assistive Technology</b>																						
California Children's Services (CCS)																						1
Employment																						1
Medi-Cal					1												1					2
Other AT			2										4	2	2	1	2			1	1	15
Regional Center	2												2	2		1				1		8
Social Security						1							14									15
<b>Total</b>	<b>2</b>		<b>2</b>		<b>1</b>	<b>1</b>							<b>20</b>	<b>4</b>	<b>2</b>	<b>2</b>	<b>3</b>			<b>3</b>	<b>2</b>	<b>42</b>
<b>OCRA - Consent</b>																						
Capacity/Incapacity of Client				1					1		2		1	1	1		1				2	2
Informed Consent	3		1					1		1	2				2				4	5	3	22
Substitute Judgment			1								1								2	1		5
<b>Total</b>	<b>3</b>		<b>2</b>	<b>1</b>				<b>1</b>	<b>1</b>	<b>1</b>	<b>5</b>		<b>1</b>	<b>1</b>	<b>3</b>		<b>1</b>		<b>6</b>	<b>8</b>	<b>5</b>	<b>39</b>
<b>OCRA - Conservatorship</b>																						
Change of Conservators								2					1							3		6
Conservatee's Rights	4	2		1	1		2				21	3	1	3	1					4	4	6
Conservator Duties			2		2			1			3				2			1	3	1	3	18
Establishing Conservatorship (General)	6	1	11	1	1	2	7		1	7	1		8			7	5	17	2	3	2	82
Establishing Conservatorship (Limited)	4	1	8		4	4	1	13		5	3	7	1	4	5	4		1	34	28	12	139
LPS Conservatorship										1												1
Termination of Conservatorship	4	1		2	2	1		1			3	1		3	2	1				2	1	24
<b>Total</b>	<b>18</b>	<b>5</b>	<b>21</b>	<b>4</b>	<b>10</b>	<b>7</b>	<b>10</b>	<b>17</b>	<b>1</b>	<b>13</b>	<b>31</b>	<b>11</b>	<b>11</b>	<b>10</b>	<b>10</b>	<b>12</b>	<b>5</b>	<b>19</b>	<b>48</b>	<b>37</b>	<b>23</b>	<b>323</b>
<b>OCRA - Consumer Finance</b>																						
Debt Collection	6		10	13	19	2	3	1		5	3	7	1	11	10	1	1	1	8	2	9	113
Other Consumer Finance	8	7	25	10	7	2	10	13	1	13	4	6	9	10	14	3	10	2	16	12	10	192
Special Needs Trust	2	1	5	3	1	3			1	4	5	5	4	3	2		8	4	9	12	11	83
<b>Total</b>	<b>16</b>	<b>8</b>	<b>40</b>	<b>26</b>	<b>27</b>	<b>7</b>	<b>13</b>	<b>14</b>	<b>2</b>	<b>22</b>	<b>12</b>	<b>18</b>	<b>14</b>	<b>24</b>	<b>26</b>	<b>4</b>	<b>19</b>	<b>7</b>	<b>33</b>	<b>26</b>	<b>30</b>	<b>388</b>
<b>OCRA - Discrimination (Other than Employment)</b>																						
Architectural Barriers					1	1	1						1				1					6
Discrimination		1	1	2	2		2		1	1	1	1	3	1	4	1	2	1	4	3	5	36
Higher Education (Public and Private)			1				1				1						2					5
Insurance Discrimination																1						1

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Public Accomodations (Hotels, Restaurants, Etc.)	2		2			1					1		2	3		2	2		1	1	3	20
Public Services (Federal, State, Local)	6			1		3				1	1	2	2	2			2			1	1	22
Racial Discrimination								2		1							1					4
Transportation (Public and Private)						5	1		1	1							1		3	4		16
<b>Total</b>	<b>8</b>	<b>1</b>	<b>4</b>	<b>3</b>	<b>3</b>	<b>10</b>	<b>5</b>	<b>2</b>	<b>2</b>	<b>4</b>	<b>4</b>	<b>3</b>	<b>8</b>	<b>6</b>	<b>4</b>	<b>4</b>	<b>11</b>	<b>1</b>	<b>8</b>	<b>9</b>	<b>10</b>	<b>110</b>
<b>OCRA - Education</b>																						
Adult Education Programs	1	1	1	4					1	1		1	2		1	1						14
Assessment	5	5	3	4		5	2		1	3		5	6	1	10	8	3	3	6		3	73
Complaint Procedures	6	5	17	3		4	20	5	3	3	2	10	1	3	22	11		4	10	3	5	137
Day Care										1									1	1	1	4
Due Process Procedures		5	7	1	1	5	1	1	2		1	2	1	2	4	2	2	6	6	3	2	54
Eligibility	2	8	2		1	1			1	2						2	3	1	2		1	26
Extra Curricular Activites		1								1			1				1		3			7
FTP Culturally Appropriate Services						1	1															2
Full Inclusion (Except Pre-School)	1	1	7		1	2	2		1			7	2	2	3			1	3	2		35
Higher Education			1	1				1		1				1	2			1				8
Home/Hospital Instruction	1	2		1	1		3	1		1		1		1		2			1	2		17
IEP Development	16	31	67	27	32	10	31	51	20	13	3	6	4	14	15	33	13	47	28	9	12	482
Least Restrictive Environment		11	3	2	5	1		1	2	3		2	2	1	2	2	3	9	2		2	53
Mental Health Services							1								1	1			1			4
Non-Public School Placement	4	1	3	2			1	1	1	4		9	3	2	4	4	1	2	10	1	5	58
OT/PT	2	1	2	2					9		1		3		1	1		5	3	2		32
Other Education	1	16	71	3	7	5	8	11	6	8	1	5	4	4	4	4	13	22	6	7	2	208
Part C - Early Start/Early Intervention						3						8	2		1		1	9		1	4	29
Positive Behavioral Intervention	4	10	1	5			3	2	5			3	4	2	5	4	1	4	10	3	1	67
Preschool Full Inclusion		1																1	4			6
Preschool Programs	1	11	1	2		4	1		1	1		10	1		13	5	1	6	9	3	2	72
Public School Placement	3	26	9	7	7	11	2	5	9			11	5	7	16	8	5	5	26	11	4	177
Related Services	11	18	15	3	9	13	1	2	3	4		14	10	3	33	8	2	27	25	9	1	211
Residential Placement						1	1					1							1			4
Suspension/Expulsion	1	4	2			1	3	6	1			4	1	4	3		4		8	3		45
Transition Planning		1	4	4		1	2	1	2	2		3	1		1	2	2	8	4	2	4	44
Transporation	7	9	7	4	6	1	1	1	1	3		10	3	3	15	2	7	2	8	4	2	96
<b>Total</b>	<b>66</b>	<b>168</b>	<b>223</b>	<b>75</b>	<b>70</b>	<b>69</b>	<b>84</b>	<b>89</b>	<b>69</b>	<b>51</b>	<b>8</b>	<b>112</b>	<b>56</b>	<b>50</b>	<b>156</b>	<b>100</b>	<b>62</b>	<b>163</b>	<b>177</b>	<b>66</b>	<b>51</b>	<b>1965</b>
<b>OCRA - Employment</b>																						
Employment	2		3	1		1	1			1			3		1		7		3	3	1	27
Employment Discrimination: Firing		3	2	1	2			2		6	1	1	1		1		2	2	1	2	1	28
Employment Discrimination: General	1	1			1		2	2				1							4		1	13
Employment Discrimination: Hiring												1										1
Employment Discrimination: Reasonable Accomodations			1			1				2	1									1	1	7
State Disability Benefits						1		1														2
Supported Employment	1		2									1		1			1		1	1	2	10
Worker's Compensation							1			1												2
<b>Total</b>	<b>4</b>	<b>4</b>	<b>8</b>	<b>2</b>	<b>3</b>	<b>3</b>	<b>4</b>	<b>5</b>		<b>10</b>	<b>2</b>	<b>4</b>	<b>4</b>	<b>1</b>	<b>2</b>		<b>10</b>	<b>2</b>	<b>9</b>	<b>7</b>	<b>6</b>	<b>90</b>
<b>OCRA - Family</b>																						
Child Support	1	1	2	1						1	1	1	1	2		1					3	15
Dissolution		3		3			2			5		1		1	1	1	1			1		20
Family - Other	3	2	23	2	25	1	3	5		6	4	1	7	7	6	1	7	4	4	15	4	130
Guardianship of Minors			2		2	3				2				6		1			4	1	2	23
Parenting/Custody	2	12	5	7	2		2	5	1	8	2	4	3	6	1	4	2	2	10	4	5	87
Wills, Trust and Estate Planning	2		5	1	4	1				1		1	1	5			3		2	2	3	31
<b>Total</b>	<b>8</b>	<b>18</b>	<b>37</b>	<b>14</b>	<b>33</b>	<b>5</b>	<b>7</b>	<b>10</b>	<b>1</b>	<b>23</b>	<b>7</b>	<b>8</b>	<b>12</b>	<b>27</b>	<b>8</b>	<b>8</b>	<b>13</b>	<b>7</b>	<b>20</b>	<b>23</b>	<b>17</b>	<b>306</b>





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<b>Total</b>	<b>2</b>	<b>1</b>								<b>2</b>				<b>1</b>	<b>1</b>			<b>1</b>	<b>1</b>		<b>3</b>	<b>12</b>	
<b>OCRA - Neglect</b>																							
FTP Admission to Institution													1										1
FTP Dietary Needs																	1						1
FTP Discharge Planning										1													1
FTP Medical Diagnostics or Other Evaluation												1											1
FTP Medical Treatment							1					1								1		1	4
FTP Mental Health Treatment																	1						1
FTP Personal Care							1				1					2	1			2			7
FTP Personal Safety (Client to Client Abuse)			1														1						2
FTP Personal Safety (Conditions in Institutions)																	1						1
FTP Treatment: Medication Side Effects															1								1
Other Neglect		2	5		1							3		2	1		2		3	1			20
<b>Total</b>	<b>2</b>	<b>6</b>		<b>1</b>		<b>2</b>			<b>1</b>	<b>1</b>	<b>5</b>	<b>1</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>7</b>		<b>4</b>	<b>3</b>	<b>1</b>	<b>40</b>		
<b>OCRA - Placement</b>																							
Board and Care Conditions	1	2	1	2	1		2			1			1		1					2	2		16
Board and Care Evictions	1				1	1	4			3		1	6							1	3		21
Childrens' Group Homes		1		1	1	2	2	4		1			2	1	1		1			3		1	21
FTP Community Residential Placement		3	2		3	2	3	2	1	3	2	7	1	2	2		4			8	1	1	47
FTP Community Services	1											2		1									4
Return to Community from Institution	4	3	3	1		1	1	1	2	4		1		1	3			2	2	3	1	33	
Supported and Transitional Housing		3	6	6		2		1		1			2		1		1	1	7	2	2	35	
Unit or Institution Transfers	2	1	1			1		1		2		1		3	1	1					1	1	16
<b>Total</b>	<b>9</b>	<b>13</b>	<b>13</b>	<b>10</b>	<b>6</b>	<b>9</b>	<b>12</b>	<b>9</b>	<b>3</b>	<b>15</b>	<b>2</b>	<b>12</b>	<b>12</b>	<b>8</b>	<b>9</b>	<b>1</b>	<b>6</b>	<b>3</b>	<b>23</b>	<b>12</b>	<b>6</b>	<b>193</b>	
<b>OCRA - Privacy/Personal Autonomy</b>																							
Personal Autonomy	5	2	10	2	19		2	3	1	4		15	2	12	8	1	5			8	14	1	114
Recovery of Personal Property	4	1	1									1		1	2	1		1		1		13	
Rights of/Denial of Personal Possessions	1	1	1	3			1					1			1					2	2	15	
Rights of/Denial of Privacy - Association	2	4		2	2						2	3		1						3	1	20	
Rights of/Denial of Privacy - Mail	1	1				1																3	
Rights of/Denial of Privacy - Search and Seizure				1	1																1	3	
Rights of/Denial of Privacy - Sexuality			1	1				1			3	1		1			1				1	10	
Rights of/Denial of Privacy - Telephone	1	3	1				1	1					1	1						1	2	1	13
Rights of/Denial of Recreation													2									2	
WIC §5325.1 Rights																					10	10	
<b>Total</b>	<b>14</b>	<b>12</b>	<b>14</b>	<b>9</b>	<b>22</b>	<b>1</b>	<b>4</b>	<b>5</b>	<b>1</b>	<b>4</b>	<b>5</b>	<b>21</b>	<b>2</b>	<b>18</b>	<b>12</b>	<b>2</b>	<b>6</b>	<b>1</b>	<b>11</b>	<b>34</b>	<b>5</b>	<b>203</b>	
<b>OCRA - Records</b>																							
Access	4		4			2	1			3			1	2	1	3	3	2	2			1	29
Breach of Confidentiality			1			1		1				1	1		1					2		2	10
Denial of Access	2		1				1	1		2				1		1		1				4	14
<b>Total</b>	<b>6</b>		<b>6</b>			<b>3</b>	<b>2</b>	<b>2</b>		<b>5</b>		<b>1</b>	<b>2</b>	<b>3</b>	<b>2</b>	<b>4</b>	<b>3</b>	<b>3</b>	<b>4</b>		<b>7</b>	<b>53</b>	
<b>OCRA - Regional Center Services</b>																							
Assessment of Needs	12	8	6	2	1	17	24	2	1	6	3	8	8	2	6	19	2			2	9	2	140
Community Living Arrangements	7	4	2	10		4	6	2		8	5	1	2		2	5	1	1	16	3	1	80	
Coordination with County Mental Health		1				1					1	1				1						5	
Crisis Prevention Services		1				1						1		1	1	1				1		7	
Day Training and Activity	9	4	2	5	20	18	2		1	3	2	5	4	4	4	3	1	4	14	7	1	113	
Eligibility	18	58	37	18	17	22	56	18	21	29	11	20	33	15	37	31	15	16	22	16	28	538	
Family Support Services	6	2	8	4	3	21	24	5	10	28		7	9	3	9	8	1	9	7	11	7	182	
Hearing Procedures	3	6	1			9	7	1	5	11	1	6	8		4	6	1	13	9		27	118	
IPP Development	10	22	4	13	4	13	8	1	3	13	1	2	2	3	3	12	1	13	14		13	155	
IPP Implementation	2	9	1	5		1	3		1		3	5	5	3	1	1	1		16		1	58	



Office of Clients' Rights Advocacy  
 Annual Report - July 1, 2005 through June 30, 2006  
 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	16	15	5	5			6	11	1	40	5	3	39	124	35	2	271	3	3	13	3	600
1 - Rights information/consultation	194	317	668	243	303	215	395	171	54	152	42	229	249	163	306	173	134	313	625	398	209	5553
2 - Referral to other advocacy services, including the service provided by PAI and area boards	33	19	9	6	12	26	4	63	8	108	12	4	28	5	5	23	7	43	27	9	121	572
3 - Fair hearing process / procedures	7	15		1		17	4		31	17	4		6	7	1	14	3	11	14		35	187
4 - Informal regional center / provider problem resolution	57	72	7	32	30	39	1	27	48	34	121	70	9	7	33	48			20	3	59	717
5 - Informal generic service agency problem resolution	34	110	15	27	92	37	1	29	70	19	18	116	9	17	34	88			15	6	104	841
6 - Direct representation in an informal fair hearing		2		1	2			1	3				4		1	2						16
7 - Direct representation in an appeal for generic services	6		2	2		5		20	4			2	1	1		3			8		2	56
8 - Direct representation at a formal fair hearing	4	2	3		2	3	1	3		3		4	3						4			32
9 - W and I 4731 complaint filing	5					1				1	1							5	2		3	18
10 - Court Litigation	10	2		2			1			1		3							1			20
<b>Total</b>	<b>366</b>	<b>554</b>	<b>709</b>	<b>319</b>	<b>441</b>	<b>343</b>	<b>413</b>	<b>325</b>	<b>219</b>	<b>375</b>	<b>203</b>	<b>431</b>	<b>348</b>	<b>324</b>	<b>415</b>	<b>353</b>	<b>415</b>	<b>375</b>	<b>719</b>	<b>429</b>	<b>536</b>	<b>8612</b>

**OFFICE OF CLIENTS' RIGHTS ADVOCACY**  
**Protection & Advocacy, Inc.**  
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**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: July 18, 2006  
Re: Consumer Satisfaction Surveys – January 1, 2006, through  
June 30, 2006

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Attached are the results of the current Consumer Satisfaction Survey. The surveys were sent out for the period of January 1, 2006, through June 30, 2006. Every fourth closed case was randomly selected from OCRA's computer intake system to receive a survey, which included a self-addressed stamped envelope.

Six hundred and seventeen surveys were mailed out. Two hundred and forty-nine people returned the survey. This represents a 40 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, 92 percent understood the information they were provided, 92 percent believed their CRA listened to them, 91 percent would ask for help from the Clients' Rights Advocate again, 88 percent were helped by the CRA, and 83 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.	232	11	6
2. My call was returned within two (2) days.	207	30	12
3. I could understand the information I got.	230	14	5
4. My Clients' Rights Advocate listened to me.	230	11	8
5. I was helped with my question/problem by my Clients' Rights Advocate.	220	21	8
6. I would ask for help from the Clients' Rights Advocate again.	226	13	10

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

- I am very happy with the help that Jackie Coleman has given us.
- This reference also came to use from Far Northern Regional Center.
- I'm so glad this form was sent since I've thought many times I need to send a Thank you/Appreciation note to Maria Bryant.....
- This form was filled out for both parties which had a council meeting with CVRC.
- Que es una excelente – profesional. Gracias por su ayuda. (Thank you for your help. You are an excellent professional.)
- CRA is very helpful & valuable resource for my job.
- Muchas gracias por ayudar a mi hijo. (Thank you very much for helping my son.)
- La personal que me ayudo es muy eficiente y muy profesional. (The person that assisted me is very efficient and professional.)
- They were great! Very knowledgeable & Helpful.

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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.

- Que muchas gracias y estoy muy agradecida con ellas. (Thank you very much and I am grateful to them.)
- The problem was not your field of expertise, but referral was helpful.
- Daily used phone contact with staff, but not w/Clients' Rights Advocate.
- I got the help I need.
- Our Clients Rights Advocate is so very helpful. She is a great listener as well as a professional who really knows her field of practice. Katie Casada Hornberger is an excellent advocate!
- Estoy muy agradecida de todo Corazon le doy gracias a dios por aber conocido a la abogada y a su asistente que dios los bendiga a todos..... (I am very grateful with all my heart, I thank God for having met the advocate and her assistant. May God bless all of you.....)
- They have no one available to go to an IEP with me – no advocates as they are too busy!
- Referred by Pediatrician who did not know criteria for being accepted as patient. What a waste of time!
- Your services are greatly appreciated! Thank you.
- Dear Ms. Cervantes: The purpose of this letter is to tell you thank you for all of your help on the above-mentioned matter. With your guidance, I was able to receive payment for \_\_\_\_ \_\_\_\_\_. You were very helpful in simplifying what I needed to do.....
- Esta agencia es “muy importante” para los padres que tenemos hijos con discapacidad..... (This agency is “very important” for parents with disabled children.....)
- I was treated extremely well by the staff. I would definitely ask for help from the Clients' Rights Advocate again. Very professional and dedicated to resolving issues.
- Quede tan decepcionada que nunca mas buscaria ayuda en este lugar y no es la primera vez. No se porque existen estos lugares si no ayudan. (I am so disappointed that I would never again look for assistance in this place. This is not the first time. I don't know why these places exist if you don't help.)
- I wasn't happy with decision.
- The staff is wonderful. They treated my case with respect and urgency. I felt very well taken care of! They never even mentioned PAI.
- Yulahlia was great.

- I want to talk more with my Clients' Rights Advocacy to listen to us about help with budget with check, Bank Acct. Take to the Dr. when we need.....
- My call was returned within the same day. Katie Casada & Bebo Saab were very helpful.
- My mentally challenged son was arrested – is still going through the court system even though he has been deemed incompetent to stand trial by 2 psychiatrists – and when I first contacted the CRA \_\_\_\_\_ because the crime is a felony – he said he “ had no experience in such matters” and couldn't help us. A call to PAI resulted in my being told to “go with the CRA” because he's “very comptent”.....
- Obtain report of judge from \_\_\_ San Diego, CA Sept. Oct. 2005. I was born with a blood disease & from this blood disease unfortunately I have to be hospitalize from time to time.....
- We really didn't go into \_\_\_ case. I just mentioned an issue to \_\_\_\_.
- There was no follow up.
- Thank You.
- Kathy Mottarella & Jackie Phan are always responsive & very well informed.
- Agradesco toda su informacion qu me dieron muchas gracias por todo. (I appreciate all the information you provided me, thank you for everything.)
- Gracias por apoyar a las personas que carecemos de informacion. El apoyo y la comprension que recibi me fue de mucha utilidad. Gracias otra vez. (Thank you for supporting the people who need information. The support and understanding that I received was very helpful. Thanks again.)
- They were extremely helpful.
- It isn't made clear when you will physically help and when you won't.
- Aimee Delgado is a caring, knowledgeable professional!
- Christine and Anastasia are amazing. They are knowledgeable and pleasant to work with. I have gained assistance from OCRA dealing with 3 agencies.....
- Consejos sobre representacion en el proximo I.E.P. de \_\_\_ en 9/06. Aprovecho pare darle las gracias a la Srita. Bacigalupo..... (Advice about I.EP. representation for \_\_\_ on 9/06. I would like to take this opportunity to thank Ms. Bacigalupo.....)



- Muchas gracias por la ayuda recibida por parte de la Lic. Anastasia pero seria mayor que todos hicieramos mayor el trabajo para no necesitar de abogados. (Thank you very much for the assistance I received by Attorney Anastasia but it would be better if we all did a better job so we wouldn't need attorneys.)
- Gracias por su ayuda y orientacion y ayudarme en todas mis dudas. (Thank you for all of your guidance and help with all of my questions.)
- I know that the CRAs must carry a heavy caseload, but the quality of service was superb.
- Muchas Gracias. (Thank you very much.)
- This office is invaluable to me!
- As the parent (& advocate) of a consumer, I find the CRA (specifically Kathy Mottarella invaluable. Kathy is extremely helpful in advising me so that I can put together the most efficient program for my son.....
- I was given a clear understanding of my daughter's right for reasonable accommodation.
- No help with problem was referred by VMRC to PCS which wrongfully terminated me from job I was good at! VMRC didn't want anything to with it. Problems with workers.
- I wanted to reiterate what I have conveyed to Filomena and Leilani who have assisted me in dealing with VMRC and obtaining my daughters rights through mediation. Without your offices' technical assistance, voicing their concerns directly to my daughters case worker, and assisting me as to how to proceed with issues.....
- We spoke in person when our CRA was in our San Andreas office.
- We have suffered for several years at the hands of \_\_\_\_\_ School District, every direction I look for help, I constantly heard sorry (budget cuts) San Joaquin County lost its funding.....until CRA. My calls were always returned promptly even during the entire office being moved to another building.....
- Son muy atentos y muy serbisiales. (You are very attentive and service oriented.)
- Son muy profesionales y hacen un exelente trabajo. (You are very professional and you do an excellent job.)
- I'm really going to miss Brian Capra!
- Great and fast information!
- It took months for a return call – then from an “assistant”.

- Me gustaria que hubiera mas informacion acerca de las defensoras que existen. (I would like more information available about other existing advocates.)
- **I rec'd excellent Response for my Consumer by Maria Bryant Thank You!**
- They need to be more active and supportive during mediations and Due Process hearing.
- Hi, Katie had helped me when Know one else could, I wish I know about her a long time ago. She is very helpful to me.....
- I appreciate this service without do process this services. I would be up the creak without a paddle. Without this service not only my rights would have been violated. I would not have known how to get out of it. I would like to thank my lawyer Enid Perez for her help in all of her understanding.....
- I would ask help for help from the Clients' Rights Advocate again. "With hesitation due to the drown out process...CRA needs to be organized in a manner that allows her to get right to the point."
- Matt provided excellent input/feedback regarding both Regional Center and IHSS matter(s). Only recently became aware of CRA as a Resource! Why is it such a secret? I am grateful for the assistance Received.  
Thanks
- Gracias por ayudarme y estoy muy agradecida por toda la allude que me brindaron. (Thank you for helping me. I am very grateful for all the help you provided me.)
- I am happy w/the services that OCRA is given me.
- Muchas Gracias (Thank you very much)
- Estoy muy agradecida con ellos muchas gracias por su ayuda. (I am very grateful to them thank you very much for your help.)
- Estoy muy muy contenta por los servicios prestados por el defensor. Son lo maximo. (I am very very happy for all the services provided by the advocate. You are the greatest.)
- Katy Lusson was very professional & helpful!!
- Asido de mucha ayuda para mis tres hijos incapacitados en todo asuntos para ellos los an ayudado. Gracias. (You have been of much assistance for my three children with disabilities in all matters you have helped them. Thank you.)
- I would be lost without Katie as well as the staff and services offered by PAI.

- My child still did not receive the help she needs.
- Que les doy Gracias por su ayuda y que son muy profesionales. (I thank you for your assistance you are very professional.)
- Ms. Perez did a good job helping me with my issues & concerns.
- El trato de la escuela hacia mi cambio mucho, al dares cuenta que cuento con el respaldo de un defensor. (The school's attitude towards me changed significantly when they found out that an advocate was backing me up.)
- Served a good purpose, but seemed to be a bit biased in favor of Regional Center.
- I was treated with courtesy.
- I had to make the referral for this case 3 times; it seems the first two referrals were never received, though that may have been an error with our inter-office mail. Once my referral was received, I was pleased with the OCRA response.
- New CRA appears to be knowledgeable and helpful.
- Depends on what help I need. I felt my opinion did not matter & that they wanted to over & check w/my superiors.
- We really appreciate her. Kathy Motarella cares deeply about her clients.
- Thank You!
- I appreciate the availability of your office & that you even exist. Thank You.
- I was treated well by the staff. "But inefficiently" .....
- I asked for help with the school system, said they would look into his file call back then – NO CALL.....
- Can not assist me further.
- I was listened to by my Clients' Rights Advocate "by secretary only". The only person who returned my call was the secretary. No help at all for the second time.
- Le agradezco en las llamadas a algunas instituciones que me correspondian a mi pero que no podia realizar por el idioma. (I appreciate the calls to some of the institutions that concerned me but I couldn't make because of the language.)
- Your Oakland Office contacted me (by mail & phone on Nov. 23, 05), after I called your main headquarters trying to no avail, to reach my San Diego office, and, spoke to Mr. Daniel Brozic. He was very helpful and sent me information that was timely and informative.....

- Piensan en el bien que son estas personas no solo para una familia pero para muchos como nosotros con necesidades especiales. (They think of the well being that these people are not only for families but for many like us with special needs.)
- I filed successfully with OAH & the district negotiated with me to avoid due process.
- My call was returned within two (2) days. “Do you mean “call to schedule appointment” or “call to ask a question?”
- 2 recent experiences w/the advocate (Christine) that made me feel EMPOWERED and HOPEFUL. Thanks!
- Nunca me ayudaron en nada gracias. (Never helped me with anything thanks.)
- Kathy Mottarella is great. I have enlisted her help on multiple occasions – she always gets back to me promptly and with well informed answers – she is obviously bright and willing to share her expertise.....
- I never went to the office. I talked to the assistant over the phone. She helped with some of my problems with advice.
- Assistant to Clients’ Rights Advocate is not knowledgeable or helpful due to her lack of understanding of the system.
- The attorney said there was nothing they could do Re: “Americans with Disabilities Act”, and we’d have hire a private attorney which we are not in a financial position to do. And this is hugely a discrimination against my disabled son.
- Leinani and Filomena are great to work with. They are knowledgeable & don’t waste time in addressing issues! I value their advice.
- I worked it out with \_\_\_\_\_, about the hours with \_\_\_\_\_. If you have any questions call \_\_\_\_\_ at \_\_\_\_\_. Thanks
- Excelentes personas. (Excellent people.)
- I would like to tell you that I am so grateful to Brian Capra, Mariah from the office of CRA, they have tried so hard to help me fight for my son and his rights to get the right services he needs due to his severe autism.....
- I don’t know what I would do without Katy Lusson’s help!
- Todos fueron muy gentiles y amables respondieron muy bien y pronto a mi llamada el abogado y todo su personal. (All of them, the attorney and personnell were very friendly and gentile and they promptly responded to my call.)

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

**MEMORANDUM**

Date: August 15, 2006

To: Jeanne Molineaux

From: Emma Hambright, Lisa Navarro, Eva Casas-Sarmiento

Re: **Annual Outreach Report July 1, 2005 – June 30, 2006**

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**OVERVIEW**

At the start of the fiscal year, OCRA staff committed to working on a two-year outreach plan with an emphasis on building stronger community relationships with traditionally underserved communities of color across the state. As in past years, each OCRA employee (administrative staff, attorneys, advocates, supervisors) was expected to complete a minimum of 3 outreach activities to his or her identified group, and each office was required to complete one self-advocacy training during the fiscal year. However, staff were encouraged to repeatedly go to a particular community to better identify its needs and to develop a relationship of trust whereby community members would recognize OCRA's commitment to providing consistent and quality advocacy services to members of that group.

Over the course of the plan year, OCRA met its commitment to the development of on-going relationships with traditionally underserved communities of color, providing trainings to communities on a variety of subjects including the following: special education overviews and IEP development, regional center IPP development and the fair hearing process, Medi-Cal, Social Security, supported employment, and IHSS. OCRA staff also conducted numerous client-centered outreaches, training clients on financial abuse, voting rights, and overviews of clients' rights.

In addition to substantive trainings, OCRA staff conducted "Intake Clinics," staffed information booths at important conferences, and joined the planning committees of important conferences throughout the state such as Respectability, Fiesta Educativa, Asian Pacific Islander Conference; Fiesta Familiar, and an Investigating and Prosecuting Sexual Abuse conference.

OCRA staff also conducted numerous outreaches within their communities to groups that would not be considered “traditionally underserved,” but who still require education and assistance.

As the chart below indicates, OCRA employees continue to uphold OCRA’s commitment to developing relationships of trust with traditionally underserved communities of color.

Ethnic	% Reg Center Clients (current)	% OCRA Clients 05/06	% OCRA Clients 04/05	% OCRA Clients 03/04	% OCRA Clients 02/03	% OCRA Clients 01/02	% OCRA Clients 00/01	% OCRA Clients 99/00
Afric-Amer.	10.60	10.0	10	10	10	9	9	8
Latino	31.26	29	29	28	27	24	24	24
Ameri-Indian or Alaskan Indian	.4	1	1	1	1	1	1	1
Asian	5.67	4	4	5	4	3	5	4
Pacific Islander	2.36	1	1	1	1	1	1	1
White	42.9	45	44	47	49	47	48	56
Multicult. (self-ident)	Not listed	3	5	3	4	4	4	3
Unknown/ Other	6.81	6	5	5	4	11	8	8

OCRA and PAI multi-cultural affairs advocates continue to work together to address community needs across the state, meeting to discuss ways to improve PAI/OCRA collaboration, and ways to improve the On-line outreach calendar. OCRA has renewed its commitment to working with PAI staff to reach out to consumers in both urban and rural hard-to-reach areas.

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

OCRA completed the first year of its two-year outreach plan as of June 30, 2005. OCRA outreach staff worked with each office to identify underserved communities of color for community relationship building. As the population of California continues to grow, so does the diversity of the population. To address this changing dynamic, OCRA maintains a list of the language abilities of staff. In addition, OCRA continues its practice of hiring staff to meet the language needs of the communities it serves.

## **SELECTED HIGHLIGHTS OF OUTREACH ACTIVITIES, FOURTH QUARTER:**

1. Westside Regional Center-6/9/06; Sellery Morley Special Education Center family support group.
2. Westside Regional Center-3/2/06; State Counsel on Developmental Disabilities focus group.
3. Kern Regional Center-5/19/06; New Advances for People with Disabilities self-advocacy training.
4. Kern Regional Center (monthly, on-going); Planning board meetings for Fiesta Educativa.
5. South Central Regional Center-10/8/06/ and 4/17/06; LAUSD Special Education Multi-Cultural Advisory Committee resource fair and IPP training.
6. South Central Regional Center-3/8/06; Los Angeles Kinship Council training on IDEA changes.
7. Inland Regional Center-1/21/06; Fiesta Familiar SSI and Supported Employment training.
8. Inland Regional Center-2/17/06; Unidos Por Nuestros Ninos, IPP training and intake clinic.
9. Tri-Counties Regional Center-6/20/06; UCP Santa Barbara, Presentation on OCRA services.
10. Tri-Counties Regional Center-2/24/06 and 4/28/06; Rainbow Family Resource Center, Consumer rights and 16 tips for getting regional center services trainings.
11. San Gabriel Pomona Regional Center-9/16/05, 11/18/05, 12/16/05, 2/03/06, 2/17/06, 3/17/06, 4/07/06, 4/12/06, 4/21/06, 5/5/06, 6/16/06, IEP and IFSP training workshops.
12. San Gabriel Pomona Regional Center-9/24/05; Fiesta Educativa training on regional center appeals and mediation.
13. North Los Angeles Regional Center-6/23/06, Cultivar y Crecer, overview of OCRA services

14. North Los Angeles Regional Center-6/3/06, 19<sup>th</sup> Annual Festival Educational presentation on alternatives to conservatorship.
15. San Diego Regional Center-10/29/05, Introduction to SSI for regional center families.
16. San Diego Regional Center-4/1/06, Fiesta Educativa training on IDEA.
17. Harbor Regional Center-8/22/05, Family Resource Center training on Transition for Age 3.
18. Harbor Regional Center-1/25/06, Self Advocacy Training at Fairview Developmental Center.
19. Lanterman Regional Center-3/1/06, Mi Familia Su Familia, training on respite and regional center services.
20. Lanterman Regional Center-10/12/05, Fair Hearing process training for Spanish-speaking parents.
21. Regional Center of Orange County-11/18/06, Asian Pacific Islander Conference.
22. Regional Center of Orange County-5/31/06 and 6/28/06, Vietnamese Health Day and steering committee meetings.
23. Eastern Los Angeles Regional Center-10/20/05, 11/04/05, 12/16/05, 1/13/06, 2/17/06, 5/12/06, and 5/26/06, Alternatives to Conservatorship trainings for families.
24. Eastern Los Angeles Regional Center-10/13/05, Voting and Self ADVOCACY training for ELARC consumers.
25. Alta California Regional Center-6/6/06, New Laws: Special Education Training for ACRC Children's Unit.
26. Alta California Regional Center-4/19/06, IPP Training to Galt Family Support Group.
27. Central Valley Regional Center-5/19/06, Immigration Training to Spanish Speaking Parent Group in Firbaugh.
28. Far Northern Regional Center-5/25/06, Introduction to OCRA Training to RISE-Resources for Indian Student Education at Honor Gathering.
29. North Bay Regional Center-4/8/06, IDEA Changes Training to Spanish speaking parents group, Padres Unidos.
30. North Bay Regional Center-5/26/06, Your IPP Guidelines (Spanish) to Parentes CANN.
31. Regional Center of East Bay-5/13/06, Getting Good Regional Center Services to Oakland Friends of Children with Special Needs.
32. Regional Center of East Bay-5/3/06, Your Regional Center and Special Education Rights: An Overview and Q & A to Dublin Parent Support Group.
33. Redwood Coast Regional Center-4/21/06, IHSS training to Hispanic Family Group in Clearlake.
34. Redwood Coast Regional Center-5/4/06, Self Advocacy Training (to introduction to OCRA) to HCAR in Eureka.



- 35.San Andreas Regional Center-3/3/06, SSI & Medi-Cal training to Spanish speaking parent group, Grupo Renacer.
- 36.San Andreas Regional Center-5/27/06, What is OCRA training to Spanish speaking parents group, Grupo Puedo.
- 37.Valley Mountain Regional Center-1/30/06, Bingo Self-Advocacy training to ARC Calaveras.
- 38.Valley Mountain Regional Center-5/12/06, Special Education training to Hispanic Family Support Group in Hough Community Center.

## OCRA ADVISORY COMMITTEE

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## ADVOCACY REPORT

### OFFICE OF CLIENTS' RIGHTS ADVOCACY

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**Summer 2006**

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#### **BENEFITS**

##### ***IHSS Protective Supervision Hours Granted.***

Following an annual reassessment, A.P.'s protective supervision hours were terminated, reducing his In Home Support Services (IHSS) hours from 249 to 58 hours per month. A.P. is conserved by his mother and lives in a supportive living situation. He has a bad memory and exercises poor judgment about health and safety. His house is heated with a woodstove and A.P. cannot safely start a fire. The Assistant CRA advocated for A.P. at an informal meeting, which resulted not only in his protective supervision hours being reinstated, but an award of an additional 5 hours per month. IHSS also paid retroactive benefits from the time his hours were reduced, as A.P.'s IHSS workers had continued to provide 249 hours of service after IHSS stopped paying. Lorie Atamian, Assistant CRA, Far Northern Regional Center.

##### ***SSI Overpayment Reduced From \$33,000 to \$13,000; Waiver Pending.***

R.S. is a minor who has received both Supplemental Security Income (SSI) benefits and Adoption Assistance Payments (AAP) for several years. R.S.'s mother contacted OCRA due to receipt of an SSI overpayment notice covering approximately 5 years and totaling over \$33,000. The overpayment appeared due to the Social Security Administration's (SSA) error of disregarding AAP benefits as income when determining SSI eligibility. Because no fault on the part of the consumer or payee existed, collection of overpayment is limited to two years prior to notice of the overpayment.

OCRA assisted in filing a reconsideration request which resulted in reduction of the overpayment to about \$13,000. Technical assistance in preparation of a waiver request to eliminate any overpayment recovery is proceeding. Doug Harris, CRA, Redwood Coast Regional Center.

**IHSS Ensures L.R. Remains in the Community.**

L.R.'s mother asked for help in appealing the county's grant of 40 hours of IHSS. Although L.R., a 36-year-old, had lived with her mother and father in the community all of her life, her father had recently become ill, which meant that her mother now had to care for both L.R. and her father. Because of the difficulty of her mother doing so, L.R. was in danger of being placed in a residential facility.

OCRA agreed to investigate and assess L.R.'s case, providing L.R. and her mother with IHSS information and explaining the appeal process. OCRA also gathered and reviewed L.R.'s records and spoke to the day program staff and counselors. L.R. appealed and OCRA provided the county appeals specialist with additional documentation. As a result, the county offered 180 hours of IHSS which L.R. accepted. Bernadette Bautista, CRA, Alba Gomez, Assistant CRA, San Diego Regional Center.

**D.Q. Found Eligible for SSI and DAC Benefits.**

D.Q. is a 26-year-old consumer diagnosed with autism who was denied SSI and DAC benefits. D.Q. filed a request for an administrative hearing. OCRA agreed to represent D.Q. at the hearing. After taking testimony from D.Q. and D.Q.'s expert psychologist, the administrative law judge (ALJ) determined during the hearing that D.Q. was eligible for both SSI and DAC benefits. D.Q. will receive retroactive SSI from April, 2004, and DAC benefits from April, 2003. He will also be eligible for Medi-Cal and Medicare benefits. Katherine Mottarella, CRA, Jacqueline Phan, Assistant CRA, Tri-Counties Regional Center.

**IHSS Reinstates 283 Hours Per Month.**

J.B. is a regional center consumer that had been receiving 283 hours per month of IHSS services. J.B.'s IHSS hours had been reduced to 195 per month because he was not severely impaired. J.B.'s parent had appealed the reduction, and requested assistance from OCRA.

J.B.'s parent was verbally informed by the county that staff had attended a meeting in which it was instructed to adhere more strictly to the IHSS regulations, which meant that J.B.'s hours would be reduced because they were given in error. J.B.'s parent was instructed by the county worker to get

rid of all staff providing IHSS services because the parent would probably lose an appeal and would be required to reimburse the county for any aid paid pending the hearing. The county representative had informed the parent that the ALJ would be angry if J.B. provided witnesses at the hearing.

The CRA drafted a position statement based upon information provided by the parent. J.B.'s parent added exhibits and brought witnesses to the hearing. The ALJ reviewed the position statements, and upon entering the hearing had one question to ask the county. "Can you explain to me how you could possibly reduce the amount of service hours for a child with such severe impairments?" The county representative had nothing to say. J.B.'s IHSS hours were reinstated to 283 hours per month and J.B. was found entitled to aid pending the hearing. Jacqueline Miller, CRA, Eva Casa-Sarmiento, CRA, Regional Center of Orange County.

### **OCRA Assists Parent to Reinstate Health-Care Benefits.**

D.G.'s medical coverage with Blue Cross of California was terminated because insufficient evidence was provided to substantiate that D.G. would qualify as a dependent disabled adult under his mother's employer's umbrella insurance policy. By the time the parent contacted OCRA, her son required approximately \$700 per month worth of medications per month related to his various developmental disabilities. The mother was concerned that if her son's coverage with Blue Cross was not reinstated immediately she would be unable to afford his medications for the upcoming month. This potentially posed a serious threat to D.G.'s safety.

After speaking with representatives from Blue Cross, it became clear that D.G.'s physician had completed the necessary forms verifying D.G.'s disability. The insurance carrier demanded additional documentation, claiming that its own form was not sufficient proof to reinstate the client's coverage. OCRA worked with the parent and the client's primary care physician to gather extensive medical documentation to supplement the required form previously filed by D.G.'s parent. Approximately a week after providing these documents, D.G. received his new insurance card verifying that his benefits had been reinstated. Ibrahim Saab, CRA, Ada Quintero, Assistant CRA, North Los Angeles County Regional Center.

### *OCRA Challenges the CCS Appeals Process.*

J.F. is a 9-year-old who receives physical therapy (PT) through California Children's Services' (CCS) Medical Therapy Unit (MTU) due to J.F.'s neurological condition. J.F. is also a recipient of full scope Medi-Cal as a result of her participation in the DDS Waiver. J.F. has been receiving PT two times per week since October, 1998. In January, 2004, the MTU physician decided to reduce J.F.'s PT for 3 months, followed by termination of services. No notice of action was provided to J.F.'s mother. J.F.'s mother appealed. CCS sent a letter to the mother containing a list of experts from which to choose for a second opinion.

OCRA assisted J.F.'s mother in filing a motion for remand which raised three arguments: 1) that a notice of action was required; 2) that a reassessment was required using the EPSDT standard; and 3) a properly impaneled set of experts would contain pediatric neurologists, which CCS' had not done..

The CCS attorney asserted that the hearing office had no jurisdiction to hear the matter because, according to CCS, J.F.'s MTU physician was the physician responsible for the medical supervision of J.F. Therefore, the attorney concluded that no notice of action was necessary and the appeal process was limited to a second opinion by a CCS expert, which had to be an orthopedist or physiatrist as qualified pediatric neurologists were unavailable.

DHS maintains that when a MTU physician is the supervising, primary physician a notice of action is not required. In this situation, the MTU physician's decision was that of a CCS medical consultant, not that of a primary physician. The ALJ ruled CCS's reduction premature because no proper notice of action was sent. However, the Chief ALJ reversed the decision and set the matter for hearing, at which point, OCRA undertook direct representation for J.F.

When it appeared that the jurisdictional and substantive issues would be consolidated for hearing, OCRA filed motions asserting that consolidation would deprive J.F. of due process. The ALJ ordered the parties to brief whether his office had jurisdiction to hear the substantive issue and to declare what is the appropriate medical necessity standard to be applied in J.F.'s case.

OCRA's opening brief argued that federal Medicaid rights providing for advance notice and an opportunity to be heard applied. Through a Public Records Act Request, OCRA obtained a recent performance review conducted by DHS over Los Angeles County's CCS program detailing therapy provider shortages, overcrowded MTUs, and waiting lists of unserved children. OCRA submitted the performance review as evidence supporting the need for fair hearing rights to counterbalance any rationing of services that may be occurring within the system. OCRA argued that DHS is the single state agency for administration of the Medi-Cal program and that the ALJ's office has been solely designated by DHS for hearing CCS disputes, including those involving Medi-Cal children. OCRA argued that CCS cannot apply a more restrictive medical necessity standard than the EPSDT medical necessity standard applicable to children.

Hearing was heard on the matter in mid May. In the meantime, J.F. continues to receive physical therapy services through the MTU two times per week under aid paid pending. Brian Capra, CRA, Meriah Harwood, Assistant CRA, Westside Regional Center, Marilyn Holle, Protection and Advocacy, Inc.

**OCRA Successfully Challenges SSI Overpayment.**

C.G. is a 17-year-old SSI recipient who lives with his mother and younger sister. Before April, 2004, C.G.'s mother worked for a non-profit agency where she was required to file her taxes under self-employment status. C.G.'s mother earned \$5,600. during the first four months in 2004. In May, 2004, the mother left that agency and became an employee for another agency, where she was required to file taxes as a wage earner. C.G.'s mother has always reported changes in her income to the SSA, including this change in employment. Yet, in early 2005, C.G.'s mother was notified by SSA that C.G. had allegedly been overpaid \$2,442. C.G.'s mother contacted OCRA for assistance.

After speaking with a SSA field office supervisor, OCRA learned that the primary basis for the overpayment was due to the treatment of the self-employment income C.G.'s mother had earned during the first four months of 2004. According to the supervisor, the SSA's income calculation methodology for self-employment takes the net earnings earned over the course of a year, as reflected in tax records, and divides it by twelve months.

This averaging methodology is different than that for wage earners, which looks at the actual amount earned and received on a month-to-month basis. SSA averaged the mother's 2004 self-employment earnings of \$5,600 to be approximately \$467 for each month in 2004. This additional \$467 in earned income, when combined with the mother's wages starting in May 2004, caused C.G. to receive a higher SSI benefit amount than he allegedly should have received over the remaining course of the year, resulting in the overpayment.

OCRA filed a Request for Reconsideration attaching documentation that the mother was no longer engaged in self-employment once she started working for wages. OCRA argued that the averaging of self-employment earnings should be divided by the actual number of months the mother engaged in self-employment, as opposed to the entire year. SSA denied the reconsideration request and OCRA filed for hearing. Before the hearing date, the ALJ concluded, on a pre-hearing review of the record, that the SSA had not followed proper accounting procedures and vacated SSA's decision, dismissing the appeal.

OCRA contacted the SSA and asserted that the decision would require SSA to start over if it wished to impose an overpayment on C.G.'s SSI benefits. Subsequently, the SSA agreed to average mother's self-employment earnings by the four months of self-employment and indicated that would reduce C.G.'s overpayment liability considerably. OCRA pointed out that the SSA had failed to deduct from the mother's gross wages the flexible spending account for medical care that C.G.'s mother paid for through her employer for the entire period under review. SSA then agreed to drop the entire overpayment matter and issued a retroactive underpayment in the amount of \$450. Brian Capra, CRA, Meriah Harwood, Assistant CRA, Westside Regional Center.

### **OCRA Helps Maintain Zero Share-of-Cost Medi-Cal.**

J.R. is a youngster with Down Syndrome. Because his mother's monthly earned income has always been too large for J.R. to qualify for SSI, J.R. has accessed zero share of cost (SOC) Medi-Cal through his participation in the DDS Waiver. When J.R.'s father died, J.R. began receiving a Social Security Survivor's benefit that resulted in monthly income of \$1,098. When the county conducted its annual redetermination of J.R.'s Medi-Cal



eligibility, it determined that he had a \$478 monthly SOC based on this income.

OCRA wrote an opinion letter describing J.R.'s eligibility for zero SOC under the Aged and Disabled Federal Poverty Level (A & D FPL) program. One must have countable monthly income *after* allowable deductions of \$1,047 or less. OCRA asserted that allowable deductions for J.R. would include the \$20 any-income deduction and the cost of any health insurance payments incurred on his behalf. When the combined deductions are applied to J.R., his countable monthly income is \$964.84.

The other issue that required eligibility establishment under was whether J.R. qualified as being disabled. A disability determination had never been performed for J.R. by the SSA. OCRA argued that J.R.'s status as a DDS Waiver beneficiary put the county on notice that J.R. required a referral for a disability determination. Additionally, because J.R. has a diagnosis of Down Syndrome, he should have been determined presumptively disabled and made eligible pending a full disability determination.

The county refused to reopen J.R.'s case and maintained that health care premium deductions must be a result of the beneficiary's own out-of-pocket expenses, as opposed to having the premiums paid by a third party. The mother filed for hearing. OCRA contacted a representative of the State Medi-Cal Eligibility Unit, who offered to intervene in the dispute between J.R. and the county. The county finally agreed that J.R.'s health care premiums qualified as a deduction. The county further agreed to keep J.R.'s zero SOC Medi-Cal status pending his disability determination. Brian Capra, CRA, Katie Meyer, CRA, Meriah Harwood, Assistant CRA, Westside Regional Center.

## **CONSUMER FINANCE**

### **OCRA Assists Client to File for Tax Liability Relief.**

D.R. is an adult consumer who lives independently with independent living skills (ILS) support. In February, D.R. received a notice from the Internal Revenue Service (IRS) indicating that \$850 of his tax return money had been intercepted to help pay back over \$3,000 in tax liability D.R. allegedly

owed. The notice also stated that D.R. had twice been contacted regarding this tax underpayment, with no record of the IRS ever receiving D.R.'s response. D.R. did not respond because he could not understand to what the notices pertained. D.R. provided the notice to his ILS worker who contacted OCRA for assistance.

The tax liability appeared to have arisen when D.R. was briefly married. D.R. and his ILS worker suspected that the tax underpayment was due to income his deceased wife earned during the marriage and that she did not file her tax paperwork with the IRS. D.R.'s wife was not a regional center consumer and did not receive any assistance from the ILS agency. D.R. was not aware of the money his wife earned, and had filed his taxes separately during his marriage.

OCRA advised D.R. to file for Innocent Spouse and Equitable Tax Relief through IRS on the basis that D.R. was without fault with respect to the cause of the tax underpayment and that IRS's collection of the tax underpayment would result in economic hardship for D.R.

OCRA obtained the necessary forms for D.R. and his ILS worker to fill out and submit to the IRS. OCRA assisted the ILS worker and D.R.'s service coordinator in drafting affidavits describing D.R.'s developmental disability, the limitations it imposes on his activities of daily living, and that D.R.'s living expenses are equal to his income.

D.R., his ILS worker, and service coordinator are confident that D.R. will be relieved of the tax underpayment as a result of the submission of the affidavits. Brian Capra, CRA, Meriah Harwood, Assistant CRA, Westside Regional Center.

**G.G. is Absolved of Debt.**

G.G. recently began receiving notices from a debt collection agency requesting more than \$400. G.G.'s group home administrator, in an effort to help, tried to negotiate a payment plan that G.G. could afford. The debt collection agency refused to cooperate and requested a higher monthly payment than G.G. could afford. G.G. is an SSI recipient and does not work.

G.G.'s group home administrator contacted OCRA for assistance with getting a lower monthly payment. OCRA explained that G.G.'s income from SSI was not subject to garnishment and therefore the debt collection agency would never be able to collect unless G.G.'s income changed. OCRA wrote a letter to the debt collection agency explaining G.G.'s situation and asked it to waive the debt. The collection agency contacted OCRA and after discussion agreed to waive the debt. Katie Casada Hornberger, CRA, Harbor Regional Center.

**OCRA Convinces Merchant to Waive Fine and Drop All Criminal Charges.**

OCRA was initially contacted to assist M.B. in requesting that a supermarket waive the \$250 fee demanded to settle claims due to an alleged shoplifting incident that occurred at the market. OCRA told counsel for the supermarket that M.B. is a person with a developmental disability who receives supported living services and personal care support due to the cumulative effect of his developmental disability. M.B. currently lives in a group home where he receives full support and is dependent upon SSI for all of his monthly expenses. OCRA provided supporting documentation that described in detail the supports and services currently provided to M.B. to address the impact of his developmental disability. A letter from the regional center also explained how the client's cognitive disabilities impair his ability to understand the consequences of his actions. Upon receipt of OCRA's correspondence and supporting documentation, counsel for the supermarket agreed to withdraw its demand for \$250 and to cease pursuing any action against M.B. Ibrahim Saab, CRA, Ada Quintero, Assistant CRA, North Los Angeles County Regional Center.

**CRIMINAL LAW**

**Consumer Receives Probation under Juvenile Code.**

J.H. is a 19-year-old male who was recently contacted by the police department about an alleged sexual assault committed on a 5-year-old when J.H. was fifteen. J.H. confessed to the crime when he was being questioned by the police. He subsequently received a letter stating that the case was being forwarded to the district attorney's office.

OCRA contacted the police department and the district attorney's office. Shortly after this, J.H. received a letter from the juvenile probation department stating that it wanted to speak with J.H. OCRA contacted the probation officer. He explained that the district attorney had decided to send the case back to probation because J.H. had a significant cognitive impairment. Probation was to work out an "informal" diversion.

The probation officer had not had much contact with regional center clients. His expectations of what J.H. would be capable of understanding and completing were unrealistic. OCRA provided technical assistance and arranged a meeting with J.H., his mother, the regional center, and probation. The goal was to discuss a diversion plan consisting of counseling and attendance at a regional center group for social and sexual education.

When J.H. completes this probation, the charges will be dropped. In addition, since it is part of the juvenile justice system, all records will be sealed. Katy Lusson, CRA, Golden Gate Regional Center.

## **HOUSING**

### **OCRA Helps Prevent Homelessness.**

S.B. was going to be homeless because she was evicted from her apartment. She was a smoker and needed to smoke indoors due to her inability to handle extreme weather. S.B. was honest about her smoking habit. As a result, board and care homes were unable to accommodate her.

S.B. called OCRA and requested an emergency meeting with the regional center. She wanted to develop a plan to prevent homelessness. OCRA and the regional center collaborated in order to find a suitable living situation which would allow smoking indoors.

The regional center found a vacancy in a studio apartment in Sonoma County which S.B. was able to move into on the same day as the emergency meeting. OCRA advocated for a one-way taxi script for S.B. so she could be transported to her new home. Yulahlia Hernandez, CRA, and Maricris Dela Cruz-Britton, Assistant CRA, North Bay Regional Center.

**Residential Facility Withdraws 30-Day Notice.**

J.E. was being evicted from his residential facility due to his behaviors and the facility's inability to address his health concerns. J.E. contacted OCRA requesting assistance with the eviction. J.E. had a habit of separating himself from other residents and staff on group outings, disrupting the outings for everyone. The Assistant CRA contacted the care provider and was informed that J.E. had two previous evictions that had been withdrawn in order to give J.E. the opportunity to improve his behavior. The care provider was also concerned with J.E.'s sugar intake and his diabetes and no longer wanted to be liable for J.E.'s health. The care provider suggested a more restrictive placement in which J.E. could be more closely monitored. J.E. rejected this suggestion.

The Assistant CRA convinced the care provider to give J.E. one last opportunity and facilitated a meeting and a new IPP, the results of which were that appropriate supports and services were provided to keep J.E. in his current placement. Veronica Cervantes, CRA, Beatriz Reyes, Assistant CRA, Inland Regional Center.

**Exception to No Pet Policy.**

D.A. is a 6-year-old boy who lives in an apartment with his parents and older sister. On the recommendation of a friend who works with children with autism, D.A.'s parents purchased a dog for D.A. to provide social interaction and sensory stimulation. After a few months of marked progress in D.A.'s demeanor, D.A.'s parents were served with a three-day notice to remove the dog or quit the apartment. They contacted OCRA for assistance.

OCRA negotiated with the landlord's attorney providing documentation of D.A.'s disability as well as the legal basis for emotional support animals as exceptions to "no pet" policies. As a result, D.A. and his family were able to remain in their apartment with the support animal. Emma Hambright, CRA, Lanterman Regional Center.

**PERSONAL AUTONOMY**

### **I.G. Blocks Her Conservatorship.**

OCRA was contacted by I.G. who lived with her mother and father for 44 years. I.G. attends an art day program and earns money selling her art work.. OCRA, with the assistance of the regional center service coordinator and I.G.'s ILS worker, worked to educate and convince I.G.'s family that I.G. has the right to socialization, personal autonomy and to make personal choices. I.G.'s family prevented I.G. from attending social events in the evenings and the weekends. I.G.'s family did not allow I.G. to socialize without a family member present. I.G.'s family interfered with ILS and day program services. I.G. was not allowed to receive phone calls from her boyfriend.

I.G.'s family filed a Petition for Conservatorship over I.G. OCRA wrote a position letter to the court requesting legal representation for I.G. In addition, OCRA requested an extension of time for the initial hearing until the appointment of legal counsel was made. The extension was granted. The extension of time allowed I.G. and her support team (Court Appointed Attorney, OCRA, Service Coordinator, ILS, and Area Board 3) to prepare for the conservatorship hearing. I.G. received an independent psychological evaluation from the regional center which supported I.G.'s competency and capacity to make decisions for herself. OCRA requested the regional center to increase I.G.'s ILS hours to better support and empower I.G. in her efforts to block the conservatorship. The regional center agreed to increase ILS by 14 hours.

OCRA provided technical assistance to I.G.'s court appointed attorney. OCRA attended the conservatorship hearing. After I.G. learned that her boyfriend's mother was in attendance at the hearing to support the conservatorship, I.G. requested the matter be set for trial instead of mediation, and I.G. made the decision not to return home to live with her parents. OCRA advocated for emergency board and care placement. The regional center agreed and provided I.G. with emergency placement within hours of the hearing. I.G. settled into her new home and enrolled in the local People First chapter to help prepare for trial. I.G.'s family withdrew the conservatorship in hopes I.G. would return home. I.G. decided not to return to live at her parents home. I.G. hopes to teach others how to speak up and advocate for their rights. Her dream is to tell her story and help others at the next Supported Life Conference. Jackie Coleman, Interim CRA, Jacqueline Gallegos, Assistant CRA, Alta California Regional Center.

**OCRA Assists Consumer to Terminate Conservatorship.**

E.Q.'s service coordinator contacted OCRA to help E.Q. challenge E.Q.'s conservatorship of the person and estate. E.Q.'s regional center IPP team and psychiatrist all agreed that a conservatorship was no longer needed. E.Q. felt the attorney appointed to represent her by the court was not acting in her best interest and was supporting the conservator's position. OCRA encouraged E.Q.'s day program and supported living agency to draft written statements indicating they did not believe that the client needed to be conserved any longer. These were submitted to the court. At the hearing, the attorney for the petitioner decided to withdraw the application for conservatorship in light of the strong opposition to the conservatorship petition. Ibrahim Saab, CRA, Ada Quintero, Assistant CRA, North Los Angeles County Regional Center.

**Client To Be Served by County Mental Health.**

A former resident of Porterville's Developmental Center, E.P., lived on the streets. In addition to his regional center diagnosis, E.P. was also diagnosed with a psychiatric disability, had been in jail several nights, and wanted to be admitted to a psychiatric facility. County mental health took the position that E.P. was the responsibility of the regional center and claimed that, although E.P. had been treated by its psychiatrists in the past, E.P. had no psychiatric disability.

OCRA advocated with mental health that E.P. wanted and needed mental health treatment. As a result, E.P.'s choice was respected and he is now receiving treatment in a mental health facility in Sutter County. Jim Stoepler, CRA, Redwood Coast Regional Center.

**REGIONAL CENTER**

**Eligibility Case Settles According to Former Standards.**

E.I. is a 9-year-old consumer whose regional center eligibility was terminated. She had been diagnosed with mental retardation and adaptive deficits since she was an infant. E.I.'s mother is also a consumer at the regional center.

The regional center hired an independent psychologist to evaluate E.I. for continued eligibility. The psychologist determined that E.I. did not have a qualifying condition and that her “new” diagnosis was “low average perception/reasoning with mixed receptive-expressive language and phonological disorder.” Eligibility was terminated.

OCRA was contacted for assistance. E.I.’s pediatrician and special education teachers were interviewed. Extensive documentary evidence was gathered including a psychologist’s report from Texas that noted mental retardation. OCRA retained a neuropsychologist who also diagnosed mental retardation. Following preparation and submission of stipulations, the regional center settled the case. E.I. remains eligible today. Enid Perez, CRA, Kay Spencer, Assistant CRA, Central Valley Regional Center.

**SSI Not a Generic Resource.**

A.T., who lives with his disabled father and receives SSI, goes to out-of-home respite 21 days every month. OCRA was contacted when the regional center decided that A.T. should pay for some of the respite with his SSI money. The CRA established that the SSI is needed to keep up the family home even though A.T. spends time away from it, and that the regional center could not require that A.T. use his SSI to pay for the respite. Jim Stoepler, CRA, Redwood Coast Regional Center.

**Regional Center to Continue Funding Services.**

K.M.’s IPP, in keeping with her doctor’s orders, specifies 24 hours per day of LVN level nursing care to monitor K.M.’s uncontrolled, possibly fatal, 40-50 drop seizures per day. The regional center sought to reduce K.M.’s LVN hours by the 283 hours of IHSS that K.M. receives from the county. The regional center had identified IHSS as a generic resource and a duplication of the regional center’s LVN services. OCRA represented K.M. at an administrative hearing and argued that IHSS is not interchangeable with LVN care and that allowing the regional center to substitute IHSS for K.M.’s nursing hours contradicts K.M.’s treating physician’s order of 24/7 LVN care. The regional center was ordered to continue funding in-home LVN care 24 hours per day. Veronica Cervantes, CRA, Beatriz A. Reyes, Assistant CRA, Inland Regional Center.



**Regional Center Re-Evaluates Its Use Of “Fade Out” Plans.**

Through meetings with executive and clinical staff, OCRA was able to convince the regional center to change its practice of developing fade out plans for services such as Discreet Trial Training (DTT). The regional center would draft a plan in which reductions in service took place automatically over a few months period, resulting in a termination of the service without periodic review. The regional center has agreed to review services and make individual determinations of need, extending the reduction period so that clinical staff can review progress and adjust services as needed. Emma Hambright, CRA, Lanterman Regional Center.

**OCRA Negotiates Eligibility Extension for 3-Year-Old.**

G.G.’s father called OCRA when the regional center terminated G.G.’s eligibility when he turned three. OCRA had an independent expert review G.G.’s file, the expert concluded that, while G.G. continued to qualify for eligibility, he might not in two or three years. The CRA, with the father’s consent, negotiated with the regional center, which agreed to give G.G. two more years of eligibility and then reassess him. Arthur Lipscomb, CRA, Gloria Torres, Assistant CRA, San Andreas Regional Center.

**Regional Center Grants Eligibility Despite Dual Diagnoses.**

M.T.’s aunt, his legal guardian, called OCRA when the regional center denied M.T. eligibility. M.T., who is 6-years-old, had an informal meeting scheduled within weeks but was represented by an advocate who was unfamiliar with regional center eligibility issues. The CRA, after reviewing M.T.’s records and speaking to teachers, counselors, and experts, provided M.T.’s aunt and advocate with technical assistance regarding regional center eligibility and appeal procedures. M.T.’s advocate prevailed at the informal hearing and M.T. was granted eligibility. Bernadette Bautista, CRA, Alba Gomez, Assistant CRA, San Diego Regional Center.

**Regional Center Provides Funding for Adaptive Equipment.**

K.G. is a regional center consumer and uses a wheelchair. K.G. is one of four siblings. K.G.’s mother needed a bigger van so she could transport all four children at one time. The regional center declined to fund a van lift and tie downs for the lift because they were already installed in the new van she

wished to buy. The regional center's position was that the cost of the adaptive equipment could not be accurately separated from the cost of the van, despite the dealer providing a breakdown of the individual costs. K.G.'s mother could not afford to buy the van if the regional center did not pay the cost of the adaptive equipment, which was approximately \$17,000. The Assistant CRA negotiated with the regional center prior to going to hearing. The regional center agreed to fund the entire amount of the adaptive equipment. Lorie Atamian, Assistant CRA, Far Northern Regional Center.

### **OCRA Settles Regional Center Eligibility Case Prior to Formal Hearing.**

M.S.'s parents had applied for regional center eligibility for M.S. on two prior occasions. When the parents tried to apply a third time with new information, the regional center refused to reconsider M.S. for eligibility. After reviewing the records, the CRA determined that an expert should be retained to assess the case. With the expert's final report favorable for eligibility, OCRA drafted a letter to the regional center requesting that it reconsider its prior opinion. At the informal meeting, the CRA further advocated that M.S. should be eligible. Just days before the formal hearing, the regional center made a determination that M.S. was eligible for regional center services under the 5<sup>th</sup> category. C. Noelle Ferdon, CRA, Far Northern Regional Center.

### **Consumer's Nursing Respite Hours Reinstated.**

G.L., a 4-year-old, is a medically fragile boy with multiple disabilities, including mental retardation, epilepsy, and chronic lung disease. G.L. had been in a sub-acute facility since birth and unable to reside with his parents and siblings. Last December, his parents were finally able to bring G.L. for his first Christmas as a result of obtaining Medi-Cal funded nursing services and 135 hours of nursing respite from the regional center.

In February of this year, the regional center service coordinator told the parents that the respite hours would be reviewed but that there would be no adjustment due to G.L.'s level of need. In May, the nursing agency providing the nursing respite from the regional center called and said that the regional center had not authorized additional hours. In June, the parents received a notice of action stating that the hours would be reduced from 135 to 32 due to the amount of Medi-Cal nursing services G. L. was receiving.

The parent appealed the reduction of services and contacted OCRA for technical assistance. OCRA prepared G.L.'s parent for her informal meeting by providing her an overview of the fair hearing process, access to the purchase of service guidelines for SCLARC nursing respite, pertinent sections of the Lanterman Act and copies of similar OAH cases. The regional center offered a settlement that included a reinstatement of the original 135 hours and a reassessment in six months. Anastasia Bacigalupo, CRA, Christine Armand, Assoc. CRA, South Central Los Angeles Regional Center.

**Evicted ICF-DDN Consumer is Provided Supported Living Services.**

T.J. is a regional center consumer who had been given a 30-day eviction notice from the ICF-DDN in which he had been living. As T.J.'s conservator, his parent contacted OCRA for assistance.

The ICF-DDN served T.J. a notice because facility administrators believed he required additional psychotropic medication to control his behaviors. His mother believed her son required participation in community activities, and a behavior intervention plan to address his behaviors. The regional center staff informed her that medication was the only way to control her son's behaviors.

The regional center had informed T.J.'s mother that no other group homes were available to meet her son's needs, and that she would be required to take her son home to live with her and provide care for him. T.J.'s mother had informed the regional center that she was unable to meet his needs in her home because he required one-on-one care 24 hours per day, 7 days a week. The regional center refused to provide T.J.'s mother with any other option. Shortly after his mother contacted OCRA, T.J. was hospitalized for flu like symptoms. Upon release a few days later, the ICF-DDN refused to accept him, and the regional center insisted that T.J.'s mother take him home. The regional center emergency crisis provider was unable to provide adequate nursing staff, and the regional center placed T.J. in a skilled nursing facility on Christmas Eve.

The CRA attended several meetings with the parent and the regional center to advocate appropriate placement in the community in the least restrictive environment. T.J. is now successfully living in his own apartment with appropriate supported living services, including participation in the

community. T.J.'s behaviors have considerably decreased, as well as his medications. Eva Casa-Sarmiento, CRA, Jacqueline Miller, CRA, Regional Center of Orange County.

**Eligibility Services Continued.**

D.W. and twin brother, T.W., live in an 89-bed facility. They both received a notice of action that their regional center eligibility was being terminated because they no longer had developmental disabilities. Both brothers work with the support of a job coach and supported employment funded by the regional center. With the assistance of the facility administrator, an appeal was filed and OCRA was called. OCRA assisted with gathering records for each brother. Records were reviewed and the CRA agreed to attend the informal meetings. At the informal meetings, the regional center representative agreed to withdraw its notices of action, Both brothers are excited to use independent and supported living services to help find an apartment and move out of the facility. Aimee Delgado, CRA, Nadia Villafana, Assistant CRA, San Gabriel/Pomona Regional Center.

**L.W. Stays out of Developmental Center.**

In June, 2005, L.W. received a new regional center service coordinator. In August, 2005, the new service coordinator allowed ILS to be terminated with no notice to L.W. When the new service coordinator refused to meet with L.W. or provide her with needed services, L.W. complained and requested a new service coordinator. This request was denied. L.W. was arrested on September 19, 2005, and charged with misdemeanor vandalism and a violation of probation, incurred as a result of an earlier conviction. L.W.'s service coordinator then filed a request to have L.W. admitted to a developmental center and that an LPS Conservator be appointed.

L.W. contacted OCRA for assistance. OCRA requested and obtained a new regional center service coordinator for L.W. OCRA requested that L.W. be assessed by the Delta Project for appropriate services in Marysville, where L.W. lived. OCRA attended an IPP with L.W. where the regional center agreed to provide supported living services so that L.W. could continue to reside in Marysville. OCRA attended the criminal court hearing with L.W. where she was given probation and was congratulated by the judge on her progress. Jackie Coleman, Interim CRA, Jacqueline Gallegos, Assistant CRA, Alta California Regional Center.

**R.M. Fights Regional Center Attempt to Lower His Adoption Assistance Rate.**

R.M. and his family receive Adoption Assistance Program (AAP) funding from the County of Los Angeles. The county relies on the regional center to assess R.M. and determine the facility level of care that R.M. would require if he were to be placed in a facility. This amount serves as the maximum that the county can pay the family.

R.M. had been assessed at the 4i level twice in the past. As R.M. is now a teenager, his needs have grown. His adoptive parents are providing a number of expensive services for him and his mother quit her job to stay home with him. When the county contacted the regional center regarding his current rate, the regional center responded by lowering his rate. The financial impact on his family would have been severe. The rate suggested by the regional center was a level 2 which is a difference of \$3,105.00 per month.

R.M.'s mother contacted OCRA. OCRA assisted the family in filing for hearing and preparing for the hearing. OCRA helped to prepare the evidence packets, witness lists, and questions for witnesses.

The family attended the hearing and did an excellent job of presenting the materials. The ALJ found that the regional center unfairly lowered the rate and that it had acted in bad faith in doing so. The ALJ ordered the regional center to pay the retroactive money if the county refused to do so. Katie Casada Hornberger, CRA, Harbor Regional Center.

**SPECIAL EDUCATION**

**T.T. Receives Home Health Care IEP Services.**

T.T. is a 9-year-old boy diagnosed with autism, mental retardation, bipolar disorder and multiple health conditions which prevent T.T. from attending school. T.T.'s pediatrician placed T.T. on home health instruction due to his multiple medical and clinical needs.

T.T. takes various medications due to his severe behaviors. Mother has concerns about the school district failing to administer T.T.'s medications efficiently while he is in school and thought the lack of medications caused several of his behavioral concerns. OCRA represented T.T. at his Individual Educational Planning (IEP) meeting.

The IEP team developed a positive and supportive home hospital IEP plan that included all of the services the parent requested including home teacher 5 days per week, an intensive speech therapy program, occupational therapy for sensory motor skills, adaptive physical education consults as needed, extended school year, and continued offer of school placement once T.T.'s pediatrician releases T.T. to return to school. Leinani A. Neves, CRA, Valley Mountain Regional Center.

**OCRA Assists Client in Getting 1:1 Aide/Sign Language Interpreter.**

C.T. is hearing impaired and needs complete assistance with personal care. C.T.'s IEP specified that she would have a 1:1 aide who was also a trained sign language interpreter, five days per week for six hours per day. When C.T. was assigned a new aide, her mother was told that the aide was a sign language interpreter. However, several months after the new aide began providing services, C.T.'s mother became aware that C.T. was unable to communicate with her aide, classmates and her teacher. C.T. came home one day in tears, wanting her mother to communicate something she had been unsuccessful in telling staff. C.T.'s mother tested the aide's sign language skills and found she had none. The school's position was that C.T. was getting along using picture icons and thus did not need a sign language interpreter. OCRA filed a compliance complaint on C.T.'s behalf, which resulted in the school providing a 1:1 aide who was also a qualified sign language interpreter. Lorie Atamian, Assistant CRA, Far Northern Regional Center.

**Client's IEP Implemented with Compensatory Services.**

I.R.'s mother asked OCRA to attend I.R.'s IEP where I.R.'s occupational therapy (OT) assessment would be discussed. The assessment was overdue. At the time, I.R., a 6-year-old, was receiving only adaptive physical education. The Assistant CRA attended 3 IEP meetings resulting in the OT plan being put into place immediately, including 13 hours of compensatory therapy. A language and speech and functional behavioral assessments were

also requested to allow the youngster to benefit from his educational program. Matt Pope, CRA, Lucy Garcia, Assistant CRA, Eastern Los Angeles Regional Center.

**School District Reimburses Parents \$1,391.**

A regional center service coordinator called OCRA about A.F., a 5-year-old whose parents were made to pay \$1,391. for the materials for A.F.'s Applied Behavior Analysis (ABA) program. The CRA sent the school district a letter pointing out that the district's policy was a violation of state and federal law, demanded that the district reimburse the parents and threatened to file a compliance complaint if the district did not. The district's attorney responded stating that the school district would reimburse the parents. Arthur Lipscomb, CRA, Gloria Torres, Assistant CRA, San Andreas Regional Center.

**Client Gets 3 Hours Per Day of Home Schooling and 1:1 Aide.**

M.P., a 17-year-old consumer who lives in a group home and attends high school, announced one day that he would no longer go to school. The CRA contacted the school district and requested an assessment under state law that requires different state agencies to cooperate in serving children with disabilities. With M.P.'s consent, OCRA made numerous telephone calls and sent letters to the county mental health department and to the school district. As a result of the informal advocacy, the school district agreed to provide home schooling for M.P. as well as a bilingual behavior aide to provide transitional services during home schooling hours. Arthur Lipscomb, CRA, Gloria Torres, Assistant CRA, San Andreas Regional Center.

**School District and Regional Center Combine to Serve Client.**

L.C.'s mother called OCRA when it appeared that L.C. would have a 4.5 week gap in services as a result of a change in placement that would place L.C. on a different schedule. There was also a problem with L.C. being transported to and from home for his ABA services. The CRA negotiated with the school district and the regional center to provide a continuous program for the summer. Each agreed to the following: 1) the district will transport L.C. for his ABA services; will provide 25 hours of general related services; will pay for 5 hours of ABA coaching per week for 2 weeks; 2) the

regional center will pay for an additional 30 hours of ABA services as well as 60 additional hours of respite. Arthur Lipscomb, CRA, Gloria Torres, Assistant CRA, San Andreas Regional Center.

**OCRA Compliance Complaint Regarding Medi-Cal Billing Process for IEP Services Substantiated.**

N.S. receives special education. N.S. was made eligible for Medi-Cal through his participation in the DDS Waiver in October, 2004. N.S. is also insured under his father's group health plan through the father's employment. In January, 2006, N.S.' parents received copies of their private insurance's Explanation of Benefits indicating that some of the related services N.S. has received through his IEPs were billed to the private insurance by the California Department of Health Services (DHS). The district had billed DHS, which, in turn, billed N.S.' private insurance. N.S.'s father confirmed with the private insurance representative that the insurance company's payment of school-based services claims resulted in the reduction of N.S.' lifetime maximum benefits.

OCRA filed a compliance complaint with the Department of Education (DOE) alleging that N.S. had been denied a free, appropriate public education (FAPE) as a result of the billings and that the district had failed to obtain the requisite informed consent by N.S.' parents prior to accessing private insurance for reimbursement of school-based services..

When DOE contacted OCRA to obtain further explanation of the complaint, DOE determined it needed an extension of time to obtain legal counsel and join DHS and DDS. After extensive investigation, DOE concluded that LAUSD was out of compliance with federal law and that N.S. had been denied FAPE.

DOE ordered the district to cease submitting any further claims on behalf of N.S. for Medi-Cal reimbursement; to provide documentation that it had not directly submitted claims to N.S.'s private insurance; to request retraction of any and all payments it received from DHS; to request DHS reimburse N.S.'s private insurance; to request to the private insurance that the latter reinstate N.S.'s lifetime maximum benefits; and to notify the governing board of the school district of the issues related to the complaint at a regularly scheduled public hearing. Brian Capra, CRA, Katie Meyer, CRA, Meriah Harwood, Assistant CRA, Westside Regional Center.



**A.M. Finally Gets His School Program.**

OCRA was contacted by A.M.'s mother who requested OCRA's assistance in getting an appropriate school program for her 17-year-old son with autism. A.M. was not attending school and had been without a school program for over 6 months. A.M.'s parents requested help from the school district and the regional center service coordinator. Both had promised the parents to assist them in getting A.M. back in school and into an appropriate special education program. The parents waited for assistance for over 6 months. The parents were notified by the school district to attend a Student Attendance Review Board (SARB) Hearing.

OCRA prepared to attend the SARB hearing. OCRA gathered and reviewed school and regional center records. It was determined that both the school district and the regional center service coordinator had failed to provide services and culturally appropriate services to A.M. OCRA was contacted by the school district legal counsel hours prior to the hearing. The school district offered to resolve the school placement matter at an IEP meeting rather than at the SARB hearing.

OCRA provided advocacy to assist A.M. and his family to obtain a new bilingual service coordinator and to develop an IPP. OCRA attended the IPP and advocated for culturally appropriate services, medical services, and recreational services.

OCRA requested the school district to provide a list of prospective school programs that it was prepared to offer A.M. at the IEP. Prior to the IEP, OCRA assisted A.M. and his parents to tour school sites and special education programs. A.M. and his family selected a county operated program designed specifically for teens with autism. The design of the school program addresses the specific needs of A.M. and his disability, including light sensitivity, behavior, and outdoor recreational activities.

OCRA and A.M.'s parents attended the IEP. The district agreed to provide the county program, door-to-door transportation, functional assessment and culturally appropriate services. Jackie Coleman, Interim CRA, Jacqueline Gallegos, Assistant CRA, Alta California Regional Center.

### **Consumer Prevails in Compliance Complaint.**

L.V., a 16-year-old consumer with cerebral palsy, underwent a major operation and had to receive home-hospital instructional services for a period of six months. When the year was finished, L.V.'s parent contacted the district to matriculate her. Over a period of 6 months, L.V.'s parent made repeated attempts to enroll L.V. Each attempt was met with excuses from the district that it did not have a transportation aide for L.V., and there was no helmet or harness for L.V. to wear while on the bus.

The parent contacted OCRA for assistance. OCRA contacted the district and within two weeks, L.V. enrolled in school after having been out for more than a year. A review of L.V.'s IEPs found that the district had failed to follow through with services promised under the IEP. OCRA filed a compliance complaint against the school district. The CDE agreed with OCRA's analysis.

An IEP meeting was called to address the corrective measures suggested by the complaint investigator. The IEP meeting also coincided with L.V.'s annual IEP. OCRA provided representation at the meeting. OCRA advocated successfully for the modification of the current IEP goals and drafted new goals and modified the transition plan. In addition, OCRA obtained a behavior assessment, an alternative communication assessment and services from the school physical therapist for the fall semester. Anastasia Bacigalupo, CRA, Christine Armand, Associate CRA, South Central Los Angeles Regional Center.

### **2<sup>nd</sup> Grader Finally Allowed to Remain at School Entire Day.**

When the school district allegedly found J.N. having problems while eating one day at school, the district decided that J.N. should be placed in a county program because he needed more supervision. The school district would not allow J.N. to remain in school until the end of the regular school day because of fear he would choke if he ate or drank anything at school. The parents disagreed and argued that J.N. should remain in his current placement.

The parents contacted OCRA and requested assistance. OCRA requested a feeding report, which supported J.N.'s parents' position that J.N. did not pose a choking risk and could be fed at school and remain the entire day at a

regular SDC placement. After training was provided to his one-to-one aide and staff at school, the district agreed that J.N. could remain at school for the full day. Aimee Delgado, CRA, Nadia Villafana, Assistant CRA, San Gabriel/ Pomona Regional Center.

**Student Placed into a Model Full Inclusion Program.**

K.H. is a 6-year-old boy from a monolingual Spanish-speaking family. The school district had identified K.H. as being language delayed, and had given K.H. group speech therapy twice each week as his only special education intervention. K.H.'s mother noticed that K.H. sat apart from the rest of the group in his bilingual general education kindergarten classroom, and that he did not participate. When she asked the district for additional help, the mother was told that the primary obstacle to K.H.'s progress was his limited English skills. Thereafter, K.H. began splitting his school day between a bilingual kindergarten and an English-only kindergarten, and later was promised some support from a resource specialist. The specialist eventually said she was "too busy" to work with K.H. K.H.'s mother contacted OCRA for assistance.

Although OCRA got the district to agree to a full assessment for K.H., at the IEP meeting the district admitted that only the psychologist had completed one. The district was now out of compliance with the assessment timelines. The mother would be willing to overlook the non-compliance if the district would agree to new assessments in all areas, conducted by either a non-public agency, or the Northern California Diagnostic Center. The district agreed.

The district psychologist's recommendation was to place K.H. in an English-only classroom, and to have the family consider enrolling him in some "fun" community activities. A picture of K.H.'s school day began to emerge during the IEP and it was obvious K.H.'s needs were not being met. The district responded by offering placement in a Special Day Class, which K.H.'s mother refused, as too restrictive. When the mother asked for full inclusion for K.H., the district administrators were opposed, sighting as one of their reasons the fact that full inclusion in their district did not include curriculum modification. The district granted the request to observe a few programs. The mother found a model full inclusion program among them, into which K.H. was enrolled. Celeste Palmer, Associate CRA, Regional Center of the East Bay.

**Student Returns to School after Seven Months.**

When E.H. came to OCRA, he had been out of school for seven months. E.H.'s monolingual Spanish speaking mother felt that the school district was not providing the appropriate services for E.H. and did not think the placement was appropriate. E.H.'s mother was concerned for his safety. Because E.H. lacked balance, his mother requested a one-to-one aide. The school district denied the request. E.H. did not return to school.

E.H.'s mother called the CRA who agreed to represent at an IEP meeting. At the meeting, the CRA argued that E.H.'s current placement was not appropriate. The CRA requested a list of other appropriate special education programs. The school district finally agreed to offer alternative placements. After visiting several schools in his area, an appropriate placement was identified at a high school and the school district agreed to provide a one-to-one aide for E.H. Aimee Delgado, CRA, Nadia Villafana, Assistant CRA, San Gabriel/Pomona Regional Center.

## ADVOCACY REPORT

### OFFICE OF CLIENTS' RIGHTS ADVOCACY

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Spring 2006

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#### BENEFITS

##### *Client Awarded SSDI.*

S.H. had worked as a courtesy clerk for Ralph's for eleven years when she called OCRA seeking assistance in appealing the Social Security Administration's (SSA) recent denial of Social Security Disability Income (SSDI) benefits. SSA claimed that S.H. was not disabled because she had engaged in substantial gainful activity (SGA). OCRA represented S.H. at the appeal, where the judge noted that, although S.H. met one of the disability criteria under federal law, her earnings did put her over the SGA limit. The Clients' Rights Advocate (CRA) requested that the record be kept open for two weeks so the CRA could provide additional evidence.

The CRA visited S.H.'s place of work and interviewed her supervisor and a cashier who has known S.H. for eleven years, both of whom provided declarations stating that S.H. could not do all of her work without help, and that her job was really a sheltered work environment. After giving the declarations to the judge, he made a fully favorable decision, giving S.H. SSDI benefits back to July of 2002. Matt Pope, CRA, Lucy Garcia, Assistant CRA, Eastern Los Angeles Regional Center.

##### *Consumer's SSI and Medi-Cal Is Reinstated.*

B.H. received a notice in December, 2004, stating that he had an SSI overpayment of \$21,905. Because there was no appeal or waiver, B.H.'s Medi-Cal benefits were terminated. The regional center service coordinator contacted OCRA for assistance. OCRA contacted Medi-Cal and assisted the service coordinator in reapplying for Medi-Cal benefits for B.H.

OCRA contacted B.H.'s representative payee to find out why the overpayment was never appealed. The representative payee had been informed by the SSA that B.H. had a joint account with his mother in Utah

in the amount of \$6,136. The representative payee tried to contact B.H.'s mother, but was unable to do so.

OCRA and B.H. had a meeting with the SSA. The claims representative agreed to reinstate B.H.'s SSI benefits if he could prove he did not have access to the bank account in Utah. OCRA contacted the bank in Utah. The bank informed OCRA that the account was a custodial account and that B.H. never had access to the money. The claims representative confirmed this with the bank and agreed to reinstate B.H.'s SSI monies. Maria Bryant-Pollard, CRA, Jacqueline Gallegos, Assistant CRA, Alta California Regional Center.

### **Consumer Awarded SSI.**

K. L., an 18-year-old, was denied eligibility for both Supplemental Social Security (SSI) and SSDI. K.L.'s mother called OCRA and asked for help in appealing the denial. The Assistant CRA reviewed the SSA and regional center files, noting information about K.L.'s disability that could be used to ask the SSA to reconsider the denial. The Assistant CRA then met with K.L. and her mother to explain the differences between SSI and SSDI. The Assistant CRA also helped K.L. and her mother fill out and file the forms, including the new information, asking SSA to reconsider its decision. As a result, K.L. was awarded SSI benefits. Bernadette Bautista, CRA, Alba Gomez, Assistant CRA, San Diego Regional Center.

### **OCRA Assists Client In Obtaining SSI.**

D.F., an 18-year-old, was denied SSI. His mother called OCRA asking for help in appealing the denial. The CRA guided the mother through the appeal process and provided D.F.'s doctor with advice about a letter of support to the SSA. The CRA also advised D.F.'s mother on which documents to submit to the SSA. OCRA was informed by D.F.'s service coordinator that D.F. was awarded \$870 per month in SSI, including retroactive benefits to his initial date of application. Arthur Lipscomb, CRA, Gloria Torres, Assistant CRA, San Andreas Regional Center.

### **Consumer Maintains Social Security Benefits.**

D.M. is a recipient of Disabled Adult Child Social Security (DAC) benefits. D.M. received a letter from the SSA requesting information about his

employment within ten days and stating that failure to provide any additional evidence would result in a finding that D.M. had been engaged in substantial gainful activity since January, 1995. SSA explained that D.M.'s earnings were high enough to presume that D.M. was no longer disabled because he was capable of substantial work. This finding would result in termination of D.M.'s DAC benefits.

Although the SSA's request for additional information was timely referred to the service coordinator, the time period for responding lapsed. D.M. was notified that his DAC benefits would be discontinued. D.M.'s service coordinator contacted OCRA and asked whether D.M. should appeal the decision or let it lapse and receive SSI only. OCRA explained to the service coordinator that the result in a loss of D.M.'s DAC benefits meant D.M. would also lose Medicare and have overpayment liability.

OCRA explained to the service coordinator that the SSA made an adverse decision on D.M.'s case because the SSA did not get any info about D.M.'s work history. OCRA reviewed D.M.'s regional center file and identified supporting documentation, such as supported employment reports and evidence of an unsuccessful work attempt. OCRA recommended that the regional center file a request for reconsideration along with the supporting documentation. Based on OCRA recommendations, the SSA reconsidered and reversed D.M.'s DAC termination. Brian Capra, CRA, Westside Regional Center.

### **Consumer Keeps Her Specialty Mental Health Services.**

A.M. is a 16-year old female diagnosed with autism and anxiety disorder. In 2002, A.M. began receiving specialty mental health services at her group home. Last summer at A.M.'s mental health annual assessment, the county determined that A.M. no longer had a psychiatric diagnosis. Santa Barbara County Mental Health then terminated A.M.'s specialty mental health services and day rehabilitation services. A.M. appealed. OCRA agreed to represent A.M. at the administrative hearing.

A.M. obtained an independent psychiatric evaluation. Based on this evaluation and the treating psychologist's diagnosis, OCRA argued that A.M. had a psychiatric disorder in addition to her autism. The administrative law judge (ALJ) determined that the county's experts did not work with A.M. other than at the annual assessments. Further, the ALJ

determined that A.M.'s experts had been working with her for a longer period of time. The ALJ noted in his decision that, "The opinions of treating physicians are entitled to greater weight than 'one-shot consultants....'" The ALJ concluded that A.M. has a psychiatric disorder so A.M.'s specialty mental health services were to continue. Katherine Mottarella, CRA, Jacqueline Phan, Assistant CRA, Tri-Counties Regional Center.

**Social Security Administration Waives Overpayment Of \$95,000.**

T.R.'s mother called OCRA saying that the SSA would soon begin withholding from the wages of T.R. because he had been overpaid \$95,000 in SSI benefits for the past 14 years. This happened in spite of T.R. reporting monthly to the SSA that he was working at a grocery store.

OCRA, after investigating and researching federal law, discovered that the SSA was wrong in asking T.R. to repay the money. OCRA then helped T.R. ask that the overpayment be waived and also helped him file an appeal for hearing. Soon after, T.R. received a notice that he did not have to repay any of the \$95,000. Bernadette Bautista, CRA, Alba Gomez, Assistant CRA, San Diego Regional Center.

**Medi-Cal Pays for New Wheelchair.**

E.G. had been attempting to get a new wheelchair for almost five years. E.G. noticed that her wheelchair was not working for her as soon as she got it and the wheelchair company had attempted on many occasions to fix it. The wheelchair was not safe. It was fitted improperly and caused her tremendous discomfort. The company finally admitted that there were no more repairs or adaptations that could be made on the wheelchair. Despite this, Medi-Cal refused to approve a new wheelchair for E.G. Due to her discomfort and the fact that the wheelchair was unsafe, E.G. had gone from an independent traveler to requiring an aide whenever she left her home.

OCRA gathered reports from E.G.'s doctor which specified the exact requirements of a wheelchair that would be safe and maintain E.G.'s health, obtained a new wheelchair evaluation, spoke with the physical therapist and technician who evaluated her, and spoke with her aides and supervisor at work. OCRA went to hearing and presented this evidence to the judge. E.G.'s supported living worker and E.G. gave testimony. Medi-Cal argued



that even if E.G. prevailed at this hearing, they would authorize a less expensive model with fewer modifications.

The ALJ found for E.G. She stated that Medi-Cal had provided no evidence supporting its claim that E.G. did not require the wheelchair specified by the doctor and physical therapist and that E.G. had used due diligence in attempting to have her old wheelchair repaired and modified. Medi-Cal was ordered to approve a TAR for the exact wheelchair and modifications requested by her provider. Katy Lusson, CRA, Golden Gate Regional Center.

**IHSS Hours Restored One Day Prior to Hearing.**

P.G. needs help with all his self-care. He cannot speak. While living with his brother in Fresno County, P.G. received 238.3 hours of IHSS hours, which included protective supervision. P.G. was removed from his brother's care and placed with his sister in Merced County. His IHSS hours were cut to 42.2 hours a month. OCRA was contacted.

OCRA worked diligently on behalf of P.G. and prepared for hearing. Due to the CRA's efforts, P.G.'s hours and protective supervision were restored to 234.3 without going to hearing. Kay Spencer, CRA, Enid Perez, CRA, Central Valley Regional Center.

**SSI Eligibility Granted.**

E.T. is a young woman who has both cognitive and psychiatric impairments. She applied for SSI but would become anxious and fearful when she was supposed to appear for an interview. She would not go to the SSA office. She had been denied benefits several times when OCRA was contacted.

With the cooperation of E.T.'s regional center social worker, OCRA collected all of the documentation available and sent it with a hearing request to SSA. OCRA additionally requested a "record review" so that E.T. would not have to appear at an in-person hearing. OCRA believed that the record was strong enough to support E.T.'s claim that she was unable to work due to her disability.

Several months went by and nothing was heard from the SSA. OCRA called the office and was told that the ALJ was in the process of reviewing the

case. Shortly after that, E.T. received a fully favorable decision. E.T. will receive benefits and is entitled to approximately two years of retroactive benefits. Katy Lusson, CRA, Golden Gate Regional Center.

**OCRA Assists Family in Maintaining IHSS Hours.**

J.E. is an adult living in his family home. His family was receiving 272 hours a month of IHSS hours. The hours were provided mainly by his mother who quit her full-time job in order to care for J.E.

J.E.'s family received a notice that IHSS hours were to be reduced by 40 hours a month. J.E. had started a day program. IHSS asserted that J.E. was not receiving care during those hours and was not entitled to continue receiving the entire 272 hours. IHSS wanted to cut the hours without speaking to the family.

OCRA investigated the issue and found that the day program was taking place in home and whenever J.E. went out to the community, a parent had to accompany him because of health and safety risks. OCRA advised the family to explain to IHSS that the day program was not the usual type and that the family was still required to give care to J.E.

OCRA spoke to IHSS which agreed to maintain the current level of hours. Yulahlia Hernandez CRA, Maricris Dela Cruz-Britton, Assistant CRA, North Bay Regional Center.

**Medi-Cal Grants Eligibility.**

P.G. had been waiting for a Notice of Action from Medi-Cal for over a year when P.G.'s mother called OCRA for assistance, complaining that Medi-Cal was ignoring her request for a decision on her son's application. OCRA agreed to investigate and, after establishing that P.G. met the Medi-Cal eligibility requirements, contacted Medi-Cal. After two months of negotiation and providing Medi-Cal with additional information, P.G. was granted eligibility, including retroactive benefits. Bernadette Bautista, CRA, Alba Gomez, Assistant CRA, San Diego Regional Center.

**OCRA Assists Minor in Obtaining Needed Benefits.**

S.S. is a 15-year-old who receives IHSS through Los Angeles County. Years ago, when S.S. was receiving SSI, her mother was the parent provider for IHSS. When S.S.'s mother began to earn more money, S.S. was terminated from SSI but retained Medi-Cal and IHSS through institutional deeming under the DDS Waiver. Once enrolled onto the DDS Waiver, S.S.'s mother was not allowed to be S.S.'s IHSS provider. The rule changed on August 1, 2004, when the State obtained a federal waiver. This waiver, called the IHSS Independence Plus Waiver, allows DDS Waiver children to have parent providers. Another change that came about is that protective supervision was now available.

S.S.'s mother asked the county if she could go back to being the parent provider for S.S. S.S.'s grandmother had been the IHSS provider. However, because of S.S.'s grandmother's health limitations and S.S.'s increased care needs, S.S.'s mother needed to become the provider. The county told S.S.'s mother that S.S. would have to disenroll from the DDS Waiver in order for the mother to become the provider but that if S.S. disenrolled, she would not be eligible for IHSS due to S.S.'s mother's income. The regional center referred S.S.'s mother to OCRA for assistance in establishing parent provider status under the IHSS Independence Plus Waiver.

OCRA drafted a detailed opinion letter explaining the recent changes to the IHSS program for S.S.'s mother to present to the county. While reviewing S.S.'s file, OCRA identified S.S. as also being eligible for protective supervision. OCRA attached relevant documentation to the opinion letter, including a regional center report requested by OCRA documenting S.S.'s current protective supervision needs. OCRA also instructed S.S.'s mother to complete a self-assessment detailing S.S.'s IHSS needs.

The county employee conducting the in-home need assessment was not cooperative. S.S.'s mother received the Notice of Action stating that S.S.'s hours would only be increased from 190 to 197 per month. There was no indication that the request to be parent provider was granted nor was there authorization for protective supervision.

Ultimately, intervention through the Los Angeles County IHSS Director's office was required. The initial county employee was replaced with a new

worker and a new in-home need assessment was performed. This time, S.S. was awarded 281.7 hours per month, including protective supervision, with S.S.'s mother as the provider. The county's explanation for not awarding the 283 maximum was inadequate, but S.S.'s mother was satisfied with the outcome. Additionally, due to the three months it took to achieve this authorization, S.S. obtained retroactive compensation of \$2,500. Brian Capra, CRA, Westside Regional Center.

**OCRA Defends against Mandatory Medi-Cal Managed Care Enrollment.**

S.T. is a young girl with autism who lives with her parents. S.T. has been on the DDS Waiver for many years and has always had zero share-of-cost Medi-Cal. Until recently, S.T. was also an SSI recipient and received her Medi-Cal through SSI. An increase in S.T.'s parents' earnings caused S.T.'s SSI to terminate.

After Los Angeles County placed S.T. under a different Medi-Cal program, S.T.'s mother received an enrollment packet from Health Care Options (HCO), the agency contracted with the Department of Managed Care (DMC) to enroll Medi-Cal beneficiaries in managed care health plans. S.T.'s mother contacted HCO and was informed that S.T. was mandatorily enrolled in managed care and that S.T.'s mother had to select a health plan or else one would be assigned to S.T. Enrollment in managed care would result in S.T. having to change her doctors, which would be a problem given the significant amount of time it took for the doctors to obtain S.T.'s trust. S.T.'s mother contacted OCRA for assistance.

OCRA advised S.T.'s mother to request a fair hearing. OCRA further advised S.T.'s mother to contact the DMC's Ombudsman's Office. The Ombudsman allowed for a temporary disenrollment pending the outcome of the fair hearing but supported HCO's decision to enroll S.T. in a managed care health plan. When OCRA contacted the Ombudsman for clarification, OCRA was informed that S.T. had been assigned an Aid Code of "82," which required enrollment unless she could obtain an exemption. The Aid Code "82" is assigned to Medi-Cal recipients who are medically indigent and not identified in the system as having a disability. S.T. was not indigent because her countable income after deeming from her parents was high enough to cause her SSI benefits to stop. The Ombudsman stated that any change in eligibility had to be done through the county.

OCRA contacted the county's Medi-Cal eligibility worker assigned to S.T.'s case. In addition to avoiding mandatory enrollment in managed care, it was also important to ensure S.T. was identified in the system as a person with a disability or else she would have to undergo another disability evaluation after twelve months of being off of SSI. Unfortunately, the eligibility worker was not cooperative and advised S.T.'s mother to continue her appeal.

OCRA attended the fair hearing with S.T.'s mother against DMC. The parties entered into a stipulation providing for an exemption from mandatory managed care for one year. Meanwhile, OCRA contacted the State Department of Health Services. OCRA explained that S.T. has been a DDS Waiver client for many years and the DD Waiver Aid Code assignment would have been more appropriate. Alternatively, OCRA explained that S.T. could have been placed under the Aged and Disabled Federal Poverty Level (A & D FPL) Program. The state agreed and ordered the county to place S.T. in the A & D FPL Program. Brian Capra, CRA, Meriah Harwood, Assistant CRA, Westside Regional Center.

**Client Found Not to Have Engaged in Substantial Gainful Activity.**

W.J. is a 46-year-old man with two small children who lives independently with his wife in their own home. W.J. qualifies for regional center services based on his cerebral palsy and epilepsy which result in significant developmental delays.

OCRA was initially contacted by W.J.'s case worker who reported that W.J. had recently received a notice from the SSA indicating that his SSDI benefits would be terminated because of the SSA's determination that W.J. was no longer disabled as of December, 2002, as he had been engaged in substantial gainful activity. An overpayment of \$20,767 had accrued to W.J. beginning in March, 2003. W.J.'s children's benefits were also affected by their father's termination of eligibility with the SSA claiming that an overpayment had also occurred for each of W.J.'s children in excess of \$10,000.

OCRA determined that SSA had failed to consider the special conditions of W.J.'s employment. W.J. was receiving a job coach funded through the Department of Rehabilitation. The SSA immediately deducted the hourly wage of the job coach paid by the Department of Rehabilitation from W.J.'s

gross earnings. The SSA concluded that the revised calculations of W.J.'s earned income revealed that he was paid more than the actual value of the services he performed which did not constitute substantial gainful activity. The SSA agreed that no overpayment had occurred and the benefits of W.J. and his children were reinstated including retroactive benefits. Ibrahim Saab, CRA, Ada Quintero, Assistant CRA, North Los Angeles County Regional Center.

**IHSS Grants Protective Supervision and 195 Hours of Care.**

V.C. is a young child with autism and severe behaviors who was receiving only 22 hours of IHSS from Los Angeles County. V.C.'s mother called OCRA for assistance. OCRA met V.C. in her home and helped V.C.'s mother complete the self-assessment packet. OCRA then prepared a declaration for V.C.'s mother to sign regarding V.C.'s need for protective supervision and attended the IHSS reassessment at V.C.'s home. The CRA provided the IHSS worker with the self-assessment, declaration and other documents supporting V.C.'s need. Thereafter, IHSS granted V.C. 195 hours of IHSS including protective supervision. Anastasia Bacigalupo, CRA, Christine Armand, Associate CRA, South Central Los Angeles Regional Center.

**M.R. Gains Greater Mobility and Financial Support.**

OCRA previously assisted M.R. to secure a new wheelchair and a higher rate of foster care payment. OCRA was still working on securing retroactive payment at the higher foster care rate. OCRA has now negotiated with the Los Angeles Department of Children and Family Services (DCSF) and obtained \$5,977. in retroactive foster care for M.R.'s family. This represents the higher F-4 rate that the family should have received since M.R.'s initial placement in the home over 2 years ago. Katie Casada Hornberger, CRA, Tabare Depab, Volunteer Attorney, Harbor Regional Center.

**E.M. Receives the Appropriate Amount of IHSS.**

E.M. is a 5-year-old regional center consumer. E.M. is exceptionally active and requires constant attention and care. E.M.'s mother applied for IHSS after attending a training by OCRA. The mother was discouraged by IHSS for applying, so she contacted OCRA for assistance. OCRA reviewed with

the mother what to say in Spanish to the IHSS worker. The mother was able to obtain IHSS services but only in the amount of 32.1 hours per month.

OCRA filed for hearing. Prior to hearing, the appeals worker contacted OCRA and asked if the county could re-assess E.M. OCRA agreed and submitted additional documentation including IEP's, IPP's and a nursing assessment. The re-assessment resulted in an increase to 51.2 hours per month of IHSS. OCRA requested a hearing.

At the hearing, the mother testified as to E.M.'s needs. The ALJ awarded 71.4 hours per month, more than double what had initially been assessed by the county. Katie Casada Hornberger, CRA, Harbor Regional Center, Maria Ortega, Office Manager, OCRA.

## **CONSUMER FINANCE**

### **Collection Agency Forgives Debt.**

B.K. has always lived with his family and requires support in many aspects of his life. On several occasions, individuals in B.K.'s neighborhood demanded that B.K. sign for credit cards or make large purchases for them. B.K. had no income with which to pay these bills. A large debt was incurred and sent to a collection agency. The family contacted OCRA for assistance.

OCRA wrote the collection agency several letters outlining the facts of the case and the applicable statutory and case law regarding the collection of debt from individuals with developmental disabilities. The family heard nothing for nine months and then began receiving letters and phone calls again. OCRA called the collection agency and spoke with a representative. The agency agreed that if OCRA could provide evidence that B.K. was diagnosed with mental retardation and had been coerced into signing for the credit cards, the agency would forgive the debt.

With the consent of B.K., OCRA obtained a letter from B.K.'s doctor and the regional center to document B.K.'s diagnosis. The CRA also obtained a letter from B.K.'s mother explaining the circumstances. OCRA sent this information to the agency representative and followed up with a phone call. The representative forgave the debt and confirmed this with a letter. Katy Lusson, CRA, Golden Gate Regional Center.

**R.S. to Meet with the Head of the Texas Rangers.**

R.S. has lived most of his 80 years in his family home, which is now a part of the modest Special Needs Trust (SNT) his relatives administer. With money from the trust, R.S. has been able to travel in California and Oregon, keep the family home in good shape, and have money for small expenditures separate from his food and housing needs. But the trustees had balked at R.S.'s most recent request, which was money for travel to the Texas Rangers Museum in Waco and then to Houston to visit the head of the Texas Rangers. R.S. took a great interest in the Texas Rangers, had corresponded with the director and wanted to meet him before he retired. The trustees vetoed the request so R.S. contacted OCRA.

OCRA visited with R.S. and helped him and his staff work through alternatives for his trip. The group arrived at decisions about travel – flying to Texas and renting a wheelchair accessible van, rather than driving all the way from California. It made a list of estimated travel costs. OCRA recommended that the revised budget be presented to the trustees. R.S. arranged for a meeting with the trustees and presented his plan. The trustees' concerns about a cross-county drive were eased, and they agreed to fund R.S.'s trip to Texas. Marsha Siegel, CRA, Regional Center of the East Bay.

**Family Able to Purchase Headstone.**

V.C., once an IRC client, had moved to another catchment area before passing away. Although his family could afford to bury V.C., the family could not afford to buy a headstone. The previous regional center, using V.C.'s SSI funds, had bought V.C. a burial plot in San Bernardino under a contract with a cemetery. The family wanted to sell the burial plot to pay for V.C.'s headstone, but would need the two regional centers and the cemetery to agree to release any interest in the burial plot and transfer it to the family. The CRA was able to get everyone involved to agree. The plot was transferred to the family, who sold it and bought V.C.'s headstone. Bernadette Bautista, CRA, Alba Gomez, Assistant CRA, San Diego Regional Center.



## **CRIMINAL JUSTICE**

### **Client Avoids Prison.**

R.V., already in jail for a year for violating parole, was facing 32 months in state prison because the parole violation was a third strike. OCRA and R.V.'s public defender, who had previously worked together to get R.V. regional center eligibility, met with the local deputy district attorney (D.A.) to discuss a possible removal of the third strike and release from jail. The D.A., who was reluctant to recommend R.V.'s release, wanted to know whether there would be any support in the community if R.V. was released.

The CRA explained to the D.A. the services that R.V. would be able to get as a regional center client, including supported living and supported employment. At a hearing the following week, the D.A. reported that R.V. would be able to get appropriate services and recommended waiving the third strike and prison time. The judge placed R.V. on one year parole and four years probation. R.V. was released from jail the next day. Matt Pope, CRA, Lucy Garcia, Assistant CRA, Eastern Los Angeles Regional Center.

## **DEPENDENCY**

### **Department of Human Services Withdraws Petition to Terminate Grandmother's Guardianship.**

S.W.'s grandmother was facing obstacles in securing services for S.W. S.W. was difficult to manage and required assistance in communicating with others. S.W.'s grandmother's inability to secure services caused the Department of Human Services (DHS) to file a petition to terminate her guardianship of S.W. After OCRA intervened, DHS was persuaded to withdraw its petition to terminate guardianship. The regional center also agreed to seek additional services for S.W. Eulalio Castellanos, CRA, Kern Regional Center, Valerie Geary, Assistant CRA, Kern Regional Center.

### **OCRA Secures Parent Representation at Adoption Hearing.**

B.H. was in danger of losing her parental rights over her son. The petitioner for the adoption proceedings informed B.H. that her son was already adopted and told B.H. not to appear for the adoption proceedings. OCRA appeared

with B.H. at the adoption proceedings and discovered that the petitioner had misinformed B.H. about the status of the proceedings. OCRA was able to continue the adoption proceedings. OCRA also persuaded the court to appoint legal counsel for B.H. to represent her in the adoption proceedings. Legal counsel was also appointed for B.H.'s son. Eulalio Castellanos, CRA, Valerie Geary, Assistant CRA, Kern Regional Center.

## INSURANCE

### *Medically-Fragile Consumer Receives Adequate Home Health Care.*

J.T. is a 24-year-old medically fragile consumer who lives with her mother. J.T. is dependent on a ventilator and requires constant suctioning of her tracheostomy. Before J.T. turned 21, she received 24 hours of home health care coverage by her private insurance through her father's employment, with the Medi-Cal EPSDT Program supplementing the care costs. When J.T. turned 21, EPSDT funds were no longer available and the state transferred J.T. to the Medi-Cal Adult Subacute Waiver to help pay for her home health care. While the Subacute Waiver provides Medi-Cal payment of home health care for adults, it is subject to a cost cap that must be equal or less than the cost of care that would be provided to the beneficiary if she were in an institution.

When the father's private insurance reached its lifetime maximum benefit under the plan, J.T.'s home health care benefits through the insurance policy terminated. This caused a gap in home health care coverage for J.T. because the Subacute Waiver would only fund up to 16 hours of skilled nursing per day. Although J.T.'s mother also has private insurance through her employer, her group plan only covers 100 visits per calendar year, the bare minimum required under California law. Additionally, the insurance pays only \$110 per visit, barely enough to fund three hours of skilled nursing at the private pay rate. The insurance's funding limitations resulted in J.T.'s mother having to provide care to J.T. for 16 hours daily on the weekends and 10 hours on Friday, up from four hours previously. J.T.'s mother contacted OCRA for assistance.

OCRA attended several conference calls with J.T.'s mother, the regional center, and agents from J.T.'s mother's private insurance. OCRA assisted J.T.'s mother in requesting a benefits exchange with the private insurance

that would provide for more home health care coverage in lieu of skilled nursing facility coverage under her plan. OCRA reasoned that, given J.T.'s intensive level of care needs, skilled nursing facility coverage would be more expensive than home health care if it were utilized. The private insurance company rejected the benefits exchange proposal. OCRA then asked the private insurance to help clarify what facility options are appropriate and available to J.T. that the plan offers. OCRA reminded the private insurance agents that medical transportation capable of safely transferring J.T. and the equipment she is dependent upon would be required. There would need to be a standing admission order in place in the event that J.T. required immediate placement due to caretaker illness or sleep deprivation. The facility would need to permit J.T. to bring her own bedding to reduce transfer trauma.

The private insurance company identified three local facilities that it purports can meet J.T.'s needs. J.T.'s mother and the regional center will be visiting these facilities to see if any are appropriate for J.T. In the event they are not appropriate, OCRA has agreed to file a grievance with the private insurance company requesting reconsideration of the benefits exchange proposal. Meanwhile, OCRA secured 120 hours of nursing respite per month from the regional center so that J.T.'s mother can go back to providing a manageable four hours of care daily for J.T. Brian Capra, CRA, Westside Regional Center.

## **HOUSING**

### ***OCRA Assists Client to Keep Service Dog at Home.***

B.M.J. contacted OCRA regarding her landlord's refusal to provide her with a reasonable accommodation by modifying the "no pets" policy and allowing her to keep her support dog, Princess. B.M.J. had lived at her current residence with Princess since approximately 1993 without any objection from the apartment management or other residents. However, B.M.J. reported to OCRA that the landlord had recently started to make verbal requests to get rid of the dog because of alleged "barking." B.M.J. reported that she has not received any complaints from her neighbors about the dog's barking. Subsequently, the landlord reportedly entered the apartment to remove the dog and "offered" to drive B.M.J. to the animal shelter to drop off Princess. Fearing eviction and retaliation from her

landlord, B.M.J. accompanied the landlord to the animal shelter. OCRA worked with B.M.J.'s regional center service coordinator and the animal shelter to get the shelter fees waived and the dog returned to B.M.J.

OCRA then drafted a letter to B.M.J.'s landlord advising him that removal of Princess from B.M.J.'s residence was contrary to state and federal anti-discrimination, tort, and landlord-tenant laws that protect individuals with disabilities who live with a service or companion animal from being denied housing because of policies that prohibit pets. Several days later, OCRA received a call from B.M.J.'s landlord, who agreed to allow the dog to remain in the apartment. In addition, OCRA requested that any future concerns regarding the animal should be presented in writing to accommodate B.M.J.'s cognitive disabilities. The landlord agreed to these requests. Ibrahim Saab, CRA, Ada Quintero, Assistant CRA, North Los Angeles County Regional Center.

### **Eviction Halted for Family of Ten.**

S.A. is a regional center consumer and mother of nine children. The father of several of her children moved in with the family. The rent was not paid for several months and S.A. received an eviction notice. The regional center case manager and S.A.'s ILS worker contacted OCRA. S.A. was living in subsidized housing. The housing authority was refusing to negotiate with S.A.

OCRA contacted the housing authority and explained that the regional center was willing to become the representative payee of S.A.'s benefits and would pay the rent directly to the housing authority. The ILS worker contacted a local church which agreed to contribute some of the back rent. OCRA negotiated with the regional center and it agreed to contribute the remaining dollars from an emergency fund.

As soon as the back rent was paid, the housing authority received a letter from the regional center stating that it was the representative payee and would be responsible for the rent payment. The eviction notice was rescinded. Katy Lusson, CRA, Golden Gate Regional Center.

### **OCRA Advocates for Consumer to Remain in Her Own Home.**

Two days prior to New Years, D.D., a 63-year-old woman living in her own apartment with supported living services, was taken to a hospital by D.D.'s care provider with flu like symptoms. When the hospital discharged her the following day, the care provider terminated services because it did not have staff to provide D.D. services in her own home. On New Years Eve, D.D. was told she could never return to the apartment she had lived in for over 10 years.

A family member contacted OCRA after the family had been told by the regional center that the family should pack D.D.'s possessions as D.D. was to be taken by ambulance to a skilled nursing facility in a different county. OCRA was informed by the regional center that D.D.'s health had deteriorated so much in the previous six months that she required an ICF-DDN, but none was available. Upon further investigation, OCRA learned that Adult Protective Services (APS) had substantiated allegations of abuse on three occasions in the previous six months due to failure of the care provider to assist with personal hygiene, provide medical care, provide food, and protect from sexual assault. However, the care provider believed that D.D. could stay in her apartment with the proper supported living staff. The CRA also learned that the care provider, acting as representative payee, was not providing staff sufficient funds to purchase food for D.D. on a regular basis.

OCRA represented D.D. at a meeting with the regional center and successfully advocated that D.D.'s health had not deteriorated as reported in the regional center's nursing assessment and latest IPP. OCRA also presented a vendor willing and able to accept D.D. as a client. As a result of the meeting, D.D. has returned to her own apartment with enough properly trained staff to provide supported living services for D.D. Jacqueline Miller, CRA, Sara Soria, Temporary Assistant CRA, Regional Center of Orange County.

## **PERSONAL AUTONOMY**

### **Facilitated Meeting Makes Things Happen for Consumer.**

T.G. and J.G. are roommates who are both diagnosed with cerebral palsy and require 24-hour supported living and nursing care. They have lived

independently for several years with a myriad of supports. Due to nursing problems and scheduling and IHSS support concerns, the consumers felt as if their choice of placement was in jeopardy and requested OCRA advocacy at their next IPP meeting.

OCRA advocated at the IPP meeting held in the consumers' home. Seventeen people attended the meeting with the goal of ensuring that T.G. and J.G. remain in their home. Nursing care, lifting and transfers, medical equipment, occupational therapy services and the quality of supported living services were reviewed. T.G. and J.G.'s choice of living arrangement was preserved with necessary clarification of roles of each service provider. Leinani Neves, CRA, Valley Mountain Regional Center.

### **Help in Terminating Unnecessary Conservatorship.**

R.C., conserved by order of a Minnesota court, recently became homeless and asked her conservator for financial help. When the conservator refused, R.C.'s Service Coordinator, who believes R.C. does not need to be conserved, called OCRA for assistance. The CRA drafted a declaration for the service coordinator to provide to the Minnesota court as well as a standard form the Minnesota courts use to terminate conservatorships. Jim Stoepler, CRA, Redwood Coast Regional Center.

## **REGIONAL CENTER**

### **A.K. Gets Her Wheelchair Fixed.**

OCRA was contacted by A.K. because her wheelchair vendor refused to perform the modifications the vendor was paid to make. Without the modifications, A.K.'s wheelchair was inoperable and unsafe. The wheelchair vendor performed some modifications for A.K. but they were not to A.K.'s satisfaction. A.K. filed a complaint with the Better Business Bureau and with her health insurance company. Both agencies sided with the wheelchair vendor.

OCRA contacted the wheelchair vendor. The wheelchair vendor stated that the modifications that A.K. wanted were not covered by her insurance.

OCRA negotiated with the wheelchair vendor to modify A.K.'s wheelchair to her satisfaction and the regional center agreed to fund the modifications. Maria Bryant-Pollard, CRA, Jacqueline Gallegos, Assistant CRA, Alta California Regional Center.

**Funds Continue for Transportation to Medical Appointments.**

D.V. has multiple medical needs and frequently visits a team of specialists at Children's Hospital Los Angeles. The regional center had been providing funding for transportation services to the hospital. The regional center terminated transportation to medical appointments on the basis that D.V.'s mother owned a vehicle and could transport D.V. in the vehicle. However, the mother did not own a vehicle. D.V.'s mother called OCRA for assistance.

OCRA provided technical assistance. D.V.'s mother filed for hearing and attended the informal meeting. At the meeting, D.V.'s mother explained that she did not own a vehicle. The regional center designee later verbally told D.V.'s mother she would fax a letter to her noting a resolution was reached because she did not own a vehicle. A week went by and D.V.'s mother did not receive a letter from the designee and the mediation date was approaching. D.V.'s mother finally received a fax, but it was just a blank notice of resolution form asking her to sign and return. OCRA recommended that she write a letter confirming that the funding would continue. D.V.'s mother did not receive a response and so she attended the scheduled mediation. At mediation, D.V.'s mother explained that she did not own a vehicle. She also explained that she had requested aid paid pending a hearing. The regional center had failed to provide continued funding so the mother had incurred out of pocket transportation costs. At mediation, the regional center agreed to reimburse D.V.'s mother for the expenses she had incurred and agreed to provide future funding for transportation to doctor appointments at Children's Hospital Los Angeles. Aimee Delgado, CRA, Nadia Villafana, Assistant CRA, San Gabriel Pomona Regional Center.

**Following 3 Denials, S.H. Found Eligible Under 5<sup>th</sup> Category.**

S.H. is an adolescent who is dually diagnosed with mental retardation and bipolar disorder, as well as attention deficit hyperactivity. S.H. was born prematurely with brain damage and early developmental delays. She

attended special education programs throughout her life and had documented learning disabilities. S.H. had received mental health treatment and medication therapy since she was 7-years-old.

S.H.'s mother applied for regional center services three times and was denied each time on the basis that S.H.'s condition was solely psychiatric. OCRA appealed the denial of regional center services on the basis that S.H. was mentally retarded or had a condition similar to mental retardation or required treatment similar to an individual with mental retardation.

OCRA prepared three expert witnesses for hearing: S.H.'s treating psychiatrist, her current special education teacher from her severely handicapped class, and a neuropsychologist. The day before the fair hearing was to begin, the regional center agreed to settle the case and find S.H. eligible under the 5<sup>th</sup> category as a person with a condition similar to mental retardation and requiring treatment similar to those with mental retardation. Leinani Neves, CRA, Filomena Alomar, Assistant CRA, Valley Mountain Regional Center.

### **Regional Center to Continue Funding Services.**

After funding social recreation and respite services for several years for S.W., the regional center moved to terminate the services. The regional center claimed that it could not pay for the services because S.W.'s foster care payments should be used. S.W.'s guardian disagreed with the regional center's decision to terminate the funding, filed for an administrative hearing, and called OCRA for assistance. The CRA researched federal law and decided that OCRA would represent S.W. at the hearing. The judge agreed with OCRA's position and ordered the regional center to continue paying for the services. Veronica Cervantes, CRA, Beatriz A. Reyes, Assistant CRA, Inland Regional Center.

### **Two-Year-Old Receives Retroactive Early Start Services.**

C.N.'s mother reported that, although the family had moved to the new regional center catchment area from Orange County three months earlier, the regional center had not yet begun to provide C.N. with her Individual Family Services Plan (IFSP) services. OCRA helped C.N.'s mother file an Early Start Compliance Complaint, which requested that the IFSP services be provided, including retroactive benefits. Two weeks after filing the



complaint, C.N.'s mother called OCRA and said that the regional center would begin delivering the services, including retroactive services. Bernadette Bautista, CRA, Alba Gomez, Assistant CRA, San Diego Regional Center.

**M.H. Receives Assistive Walking Device.**

M.H. needs an Ankle Foot Orthotics (AFO) to allow her to walk. M.H.'s insurance company paid for half the cost of the AFO, and the regional center denied M.H.'s mother request that the regional center fund the balance. M.H.'s mother contacted OCRA seeking assistance with due process procedures. The CRA agreed to provide the mother with technical assistance regarding the appeal process. The CRA helped the mother assemble the documents that would make up the evidence packet and develop arguments to be used at the administrative hearing. The night before the mother was to meet with the regional center to try to informally resolve the matter, the regional center said that after reviewing the submitted records, the regional center would reimburse the family. Veronica Cervantes, CRA, Beatriz A. Reyes, Assistant CRA, Inland Regional Center.

**Regional Center Eligibility Case Settles Prior to Hearing.**

T.E. was denied eligibility for regional center services despite tests scores indicating mild mental retardation. OCRA retained an expert to evaluate T.E., interviewed an array of witnesses, observed T.E. at school and ultimately agreed to represent at a fair hearing. After exchanging evidence with the regional center's attorney, the regional center decided to settle and found T.E. eligible for services. C. Noelle Ferdon, CRA, Far Northern Regional Center.

**A.S. Found Eligible for Regional Center Services.**

ORCA was contacted by the Children's Law Center to represent a dependant of the court in a regional center eligibility case. OCRA agreed to evaluate and determine the merits of the case. On the strength of an expert evaluation, OCRA was able to negotiate with the regional center which found the client eligible for services. Emma Hambright, CRA, Lanterman Regional Center.

**D.M. Becomes Eligible for Regional Center Services.**

D.M. is a 27-year-old residing in a residential care facility. D.M. had always had problems learning while growing up and had been in special education classes. After moving to California a few years ago and having more and more problems, D.M. applied for regional center services. D.M. was denied on the grounds that the problems she was having were solely psychiatric. D.M.'s mother contacted OCRA for assistance with the appeal.

OCRA reviewed the documents and met with D.M.'s mother to help her prepare for the informal meeting with regional center. OCRA developed a chart demonstrating through past documents how D.M. met the criteria for eligibility and how her psychiatric disability was not her only disability.

D.M. and her mother attended the informal meeting and regional center agreed to re-assess her. Following the re-assessment, the regional center made D.M. eligible under the 5<sup>th</sup> category. Katie Casada Hornberger, CRA, Harbor Regional Center.

**RIGHTS IN FACILITIES**

**Residential Facility Provides Required Notice.**

R.M. received from her adult residential facility what was supposed to be a 30-day notice terminating her residency. R.M.'s mother called OCRA and, although agreeing that the facility was not appropriate for R.M., complained that the facility had not, in fact, given her thirty days notice. The mother worried that without an appropriate amount of time to move, R.M. might become agitated.

OCRA investigated and discovered that the facility had given R.M. a backdated notice that actually only gave her 21 days notice. The CRA requested an emergency IPP meeting. At the meeting, the facility agreed to provide an appropriate notice and the regional center agreed to create a transition plan to ease R.M.'s move to the new facility. Bernadette Bautista, CRA, Alba Gomez, Assistant CRA, San Diego Regional Center.

### **Consumer's Rights Enforced.**

E.B. called OCRA complaining that the residential facility staff would not let her see her friends, attend church, go to the library, participate in San Diego's Special Olympics, go to a gym, or ride the bus independently. OCRA participated in an IPP meeting, advocating on E.B.'s behalf. As a result, the IPP team agreed that E.B. would visit with her friends at the facility on Sundays, would be transported by staff to and from church every Sunday, and would start going to the library once a week. The Service Coordinator agreed to arrange E.B.'s enrollment in the Special Olympics and to talk to E.B.'s doctor for a recommendation on an appropriate gym activity. E.B. was also happy to hear that her sisters agreed to transport her to and from the facility so she can visit them every Saturday. Bernadette Bautista, CRA, Alba Gomez, Assistant CRA, San Diego Regional Center.

## **SPECIAL EDUCATION**

### **M.H. Receives Services from the School District.**

The school district agreed to assess M.H., an 8-year-old, to determine if she needed Applied Behavior Analysis (ABA). Her father called OCRA complaining that, when he reviewed the assessment results, there was no mention of ABA. The district ignored OCRA's attempts to resolve the dispute informally, resulting in the CRA filing a compliance complaint with the California Department of Education (CDE). The CDE directed the district to conduct another assessment for ABA services, which resulted in M.H. receiving the services.

M.H.'s father had also requested a 1:1 aide for M.H. and a sensory vest, both of which the district refused to provide. Upon OCRA intervening and advocating for these requests, they were provided. Arthur Lipscomb, CRA, Gloria Torres, Assistant CRA, San Andreas Regional Center.

### **OCRA Advocates for 1:1 Aide.**

According to his father, M.P. needed a 1:1 aide to prevent M.P. from injury from his seizures. Because the school district initially denied the request, the Assistant CRA initiated an IEP at which the district agreed to provide the aide temporarily until a teacher was hired and trained in safety protocol.

After the temporary aide was provided for a period, the family asked that the aide be made permanent, as M.P. had been injury-free with the aide. At the next IEP, the Assistant CRA advocated for the family and the district agreed to provide the aide on a permanent basis. Arthur Lipscomb, CRA, Gloria Torres, Assistant CRA, San Andreas Regional Center.

**Termination of Interdistrict Agreement Reversed.**

J.M. is a junior high student. J.M. started the school year under an inter-district transfer agreement. Because J.M. has always had behavior problems, the parents agreed to a provision in the agreement that it could be terminated if behavior problems arose. After several incidents of acting out, the school notified the parents in writing that the inter-district transfer was revoked based on the behavior problems. The letter gave no appeal rights. The parents much preferred the school of attendance to the home district, and sought assistance from OCRA.

OCRA determined that termination of the inter-district transfer based on a known factor in the consumer's disability was discriminatory. J.M.'s parents were advised to respond with a request for information regarding appeal rights at the district level prior to exercising appeal rights through the county office of education.

The school district responded by re-convening the IEP team. OCRA attended the IEP, which addressed additional support needs, maintaining educational progress, and gradual re-entry to the classroom setting. The parents agreed to the revised IEP. Doug Harris, CRA, Redwood Coast Regional Center.

**J.L. Remains at His Neighborhood School.**

Without the parent's permission, the school district changed J.L.'s placement to a school an hour from the family's home. The district argued that J.L.'s school of residence was not an appropriate placement. J.L. is in the 5<sup>th</sup> grade and has attended this school since kindergarten. J.L. has two brothers who both attend the school, along with many of his cousins. J.L. has autism and is non-verbal and benefits from the security of seeing his family members around school.

The school had not done an assessment to determine if the new placement was appropriate. A hearing was filed and a stay-put order was requested for J.L. to remain in his original school. The district agreed at the first mediation to retain a behaviorist to evaluate J.L. The behaviorist determined that J.L. could remain safely at his neighborhood school with the support of a 1:1 aide. At the second mediation, the district agreed to hire a 1:1 aide as recommended by the behaviorist. The school also agreed that the aide would be trained by the behaviorist and become certified as a specialist in autism. The district agreed to keep this plan in place for a minimum of two years, to be reviewed periodically. C. Noelle Ferdon, CRA, Far Northern Regional Center.

**Consumer Obtains Post-secondary Program from School District.**

D.W. attends high school in the San Jose area. D.W.'s father asked for help in resolving several issues he was having with his son's school district, the most important being D.W.'s attending a post-secondary program. The CRA attended numerous IEP meetings and attempted to resolve issues at the meetings with no success. OCRA filed for a due process hearing and also filed a compliance complaint for failure to hold an IEP meeting within 30 days. After a favorable decision from the compliance complaint, D.W. is in a post-secondary program. Arthur Lipscomb, CRA, Gloria Torres, Assistant CRA, San Andreas Regional Center.

**L.V. Obtains 1:1 Aide.**

L.V. is a 16-year-old student who has cerebral palsy and needs a 1:1 aide in the classroom and on the school bus due to her self-injurious behaviors. L.V.'s mother had tried to enroll L.V. in high school in February. L.V. was not in school more than one year later because the district had not provided L.V. with an aide. L.V.'s mother contacted OCRA after L.V. was in school. OCRA filed a compliance complaint against the district for failure to implement L.V.'s IEP. The CDE found the district had failed to implement L.V.'s IEP and ordered the district to provide compensatory services. Anastasia Bacigalupo, CRA, Christine Armand, Associate CRA, South Central Los Angeles Regional Center.

**E.M. Receives Individualized Education Plans in Spanish.**

OCRA was representing E.M. on an IHSS matter (see **E.M. Receives the Appropriate Amount of In Home Support Services.**) when it was discovered that E.M.'s family was not receiving translated copies of the IEPs. The district was providing an interpreter at the meetings but was giving the family documents in English. The family never realized that it was entitled to documents in Spanish.

OCRA filed a compliance complaint against the district seeking translation of the past IEP documents. The district immediately contacted OCRA and offered to translate the documents and all future ones if OCRA would withdraw the complaint. OCRA agreed to withdraw the complaint if the documents were received within the week and the district agreed to draft a policy related to translation of IEP's.

The district sent the entire translated prior IEP documents home in E.M.'s backpack within the week and instituted a policy of translating all requested IEPs. Katie Casada Hornberger, CRA, Harbor Regional Center.

**3-Year-Old Maintains ABA Services while Parents and School District Agree on a Preschool Program.**

E.X., who had been diagnosed with autism at age two, was making good progress with his Early Start program of speech and occupational therapy and 25 hours of ABA services each week. His parents and Asian Community Mental Health Services case manager grew concerned, however, as E.X.'s third birthday approached and the school district showed reluctance to offer comparable services in preschool. Two weeks before E.X. turned three, the parents contacted OCRA for help.

Because time was short and E.X.'s school district refused to continue the IFSP services without a due process appeal, OCRA dictated a hearing request to the parents over the phone and also a motion that E.X.'s IFSP program continue until the dispute was resolved.

After receiving OCRA's memo with the federal regulation and hearing office order, the school district changed its position and agreed to continue E.X.'s ABA and other Early Start services until the district and

his parents agreed to an appropriate preschool program. Marsha Siegel, CRA, Regional Center of the East Bay.

**Compliance Complaint Filed.**

Although N.D-T., a 7-year-old, has an IEP that recommends physical therapy and speech therapy, the therapy has not been provided at all during the school year. The school district claims it cannot find qualified therapists to provide the services. OCRA filed a compliance complaint with the CDE asking for the IEP to be implemented and for N.D-T. to receive compensatory services. Jim Stoepler, CRA, Redwood Coast Regional Center.

**V.C. Placed in a Private School's Specialized Autism Class.**

Eight-year-old V.C.'s parents had long thought that V.C. would make more progress if he got applied behavior analysis (ABA) services, perhaps in a non-public school. After attending an outreach training on IEP advocacy, his parents sought out OCRA's help. They wanted V.C. in an autism class the parents had visited at a non-public school.

A preliminary review of V.C.'s school records indicated that the public school was providing the services the district's assessments recommended. V.C. was not receiving ABA, but that had been recommended only in a short regional center report. Closer analysis confirmed his parents' concerns. V.C.'s IEP goals and objectives had remained almost identical from 2002 to 2005. His "baselines" showed slippage. Where he had responded to instructions with gestural prompting in 2004, the 2005 IEP showed a total need for hand-over-hand instruction. He had likewise declined in written expression – going from forming lines independently to scribbling and constantly mouthing crayons. Rather than focus on classroom activities, V.C. engaged in self-stimulation. V.C.'s third-grade teacher reported that safety was a grave concern, since if not carefully watched, V.C. might run off in an instant.

When OCRA shared the results of the records review and classroom observation with the district's special education director, it was clear that V.C. was not benefiting from his public school program. OCRA then conferred with the non-public school's director and made sure the

parents visited again so as to feel certain of their choice. After a short meeting at which the new IEP was signed, V.C. began attending an autism class at the non-public school. Celeste Palmer, Associate CRA, Regional Center of the East Bay.

### **OCRA Advocates for Advanced Speech Device.**

E.A.'s mother is a monolingual Spanish speaker who had been trying to get the school to provide E.A. with a speech device. E.A. has speech that is difficult for people to understand. Although E.A. is capable of learning sign language, E.A. prefers to speak. Rather than commit to providing a speech device, the school wrote in the IEP that it would, "continue to research alternative communication systems." After more than a year, E.A.'s mother contacted OCRA. At an IEP meeting attended by the Assistant CRA, the school made an offer to provide a very simplistic speech device to E.A. OCRA requested the school do an assistive technology assessment that would include a more advanced speech device. The assessment resulted in the school providing E.A. with the more sophisticated assistive technology device. Lorie Atamian, Assistant CRA, Far Northern Regional Center.

## **OUTREACH AND TRAINING**

### **OCRA Remains Committed to Providing Targeted Outreach, Self-Advocacy Training, and Substantive Sessions for Providers.**

During the months of January, February, and March, 2006, OCRA continued to provide much needed information to underrepresented groups. OCRA staff and supervisors for consumers at NBRC met with Spanish speaking parents and staff at a parent-infant program funded by NBRC in Napa. Information about the early start process and the IFSP were shared with parents and many important questions were asked and answered.

OCRA also continued, during these months, to provide self-advocacy training. One such training was provided by the CRA for consumers at VMRC and was held at the ARC Calaveras Day Program in San Andreas, CA. One consumer noted, "I really liked what the CRA said about standing up for my rights."



Many other outreach and training events occur each month and every quarter at OCRA. Some additional events for this quarter included a substantive training on criminal justice issues to GGRC staff, a clients' rights training to residential service providers in Stockton, a training for the Spanish speaking EPU support group in Fresno, a general introduction to OCRA for the Corcoran Prison pre-release program in Corcoran, CA, and a training on autism and disability awareness to GLAD in Madera, CA.

These are just a few of the training and outreach events provided by OCRA on a continuous basis.

**OCRA Educates Regional Center Vendors on Clients' Rights.**

Emma Hambright, CRA for Lanterman Regional Center consumers and Katie Hornberger, CRA for Harbor Regional Center, responded to the training needs of the Lanterman community by providing a clients' rights training for approximately 100 vendors including day and residential program providers.

**OFFICE OF CLIENTS' RIGHTS ADVOCACY  
ANNUAL REPORT  
(July 1, 2005 – June 30, 2006)**

**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>
CVRC06-01	I	V	5/14/06	6/9/06	Pending
CVRC06-02	I,O,D	V,T	2/7/06	3/7/06	Not restored due to emergency
CVRC06-02	I,O,D	V,T	2/7/06	4/7//06	4/7/06
ELARC06-01	O	T	11/08/05	12/8/05	Ongoing review
ELARC06-01	O	T	11/08/05	1/8/06	Ongoing review
ELARC06-01	O	T	11/08/05	2/10/06	2/10/06
KRC06-01	I	T	2/28/06	3/8/06	Withdrawn
NBRC06-01	I	P	7/28/05	8/17/05	8/11/05 Right restored prior to receipt of Denial of Rights
RCRC92-015	I	P	4/16/92	9/1/03	Ongoing review
RCRC92-015	I	P	4/16/92	7/30/05	Ongoing review
RCRC92-015	I	P	4/16/92	8/30/05	Ongoing review
RCRC92-015	I	P	4/16/92	9/27/05	Ongoing review
RCRC92-015	I	P	4/16/92	10/31/05	Ongoing review
RCRC92-015	I	P	4/16/92	11/21/05	Ongoing review
RCRC92-015	I	P	4/16/92	12/21/05	Ongoing review
RCRC92-015	I	P	4/16/92	1/20/06	Ongoing review
RCRC92-015	I	P	4/16/92	2/20/06	Ongoing review
RCRC92-015	I	P	4/16/92	3/20/06	Ongoing review
RCRC92-015	I	P	4/16/92	4/20/06	Long term denial
SDRC06-01	I	V	8/23/05	9/21/05	9/21/05
TCRC-0608	O	T	3/22/06	--	Client moved away from facility
TCRC-0609		V	3/22/06	5/23/06	5/23/06
TCRC-0610	O	T	4/1/06	4/17/06	4/17/06
VMRC06-01	O	C	8/17/05	8/19/05	8/19/05
VMRC06-02	O	V	10/16/05	10/16/05	10/17/05
VMRC06-03	I	T	6/5/06	6/5/06	6/5/06
WRC06-01	I	M	2/2/06	3/2/06	Ongoing review
WRC06-01	I	M	2/2/06	4/2/06	Ongoing review

## **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.

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**OCRA Attorney's Fees  
Fiscal Year  
July 1, 2005 – June 30, 2006**

Date:	From:	Subject:	Case #:	Amount:
April 2006	Tehama County State of California	Special Education	679560	\$4,695.00
May 2006	Morgan Hill Unified School District	Special Education	667018	\$5,291.00
June 2006	San Jose Unified School District	Special Education	681213	\$2,957.00
	Total For FY 2005 - 06			<u>\$12,943.00</u>

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OFFICE OF CLIENTS' RIGHTS ADVOCACY  
ANNUAL REPORT  
JULY 1, 2005 – JUNE 30, 2006

CONSUMER GRIEVANCES WITH CONTRACTOR

DATE OF RESOLUTION LETTER	COMPLAINT (INITIALS)	NATURE OF COMPLAINT	STATUS	OUTCOME
8/15/05	R.B.	Failure to represent in R.C. matter	Closed	Upheld OCRA's actions
10/20/05	K.W.	1 <sup>st</sup> Level- Failure to represent in R.C. eligibility hearing	Closed	Upheld OCRA's actions
1/13/06		2 <sup>nd</sup> Level- Failure to represent in R.C. eligibility hearing	Closed	Upheld OCRA's actions
12/14/05	A.T.	1 <sup>st</sup> Level- Contact adult consumer without parent's permission	Closed	Upheld OCRA's actions
2/23/06		2 <sup>nd</sup> Level- Contact adult consumer without parent's permission	Closed	Upheld OCRA's actions
5/11/06		3 <sup>rd</sup> Level-DDS Contact adult consumer without parent's permission	Closed	Upheld OCRA's actions

DATE OF RESOLUTION LETTER	COMPLAINT (INITIALS)	NATURE OF COMPLAINT	STATUS	OUTCOME
5/26/06	M.Q.	1 <sup>st</sup> Level- Failure to represent in R.C. matter	Closed	Upheld OCRA's actions
7/6/06		2 <sup>nd</sup> Level- Failure to represent in R.C. matter	Closed	Upheld OCRA's actions
6/15/06	E.C.	Conflict of Interest	Closed	Upheld OCRA's actions

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