OCRA ANNUAL REPORT 2008 – 2009

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(Under Separate Cover)

OCRA SELF-ADVOCACY TRAINING EVALUATION BINDER

I. INTRODUCTION

Disability Rights California¹ provides state-wide clients' rights advocacy services for regional center consumers pursuant to a multiyear contract, HD069010, with the Department of Developmental Services (DDS) through the Office of Clients' Rights Advocacy (OCRA). The contract was renewed effective July 1, 2006, for a 5year period. This is the Annual Report required under the contract, pursuant to Exhibit E, Paragraph 14.

OCRA takes great pride in its accomplishments. The statistics and work product for the past year, which are discussed throughout this report, give ample evidence of continuing effective advocacy. During the past year, OCRA resolved over 8,883 issues for consumers and participated in 418 trainings presented to approximately 18,749 people.²

OCRA currently operates 22 offices throughout the State of California, most of which are staffed by one CRA and one Assistant CRA. A list of the current staff and office locations is attached as Exhibit A.

Disability Rights California greatly appreciates the support and efforts of DDS and the regional centers in OCRA's performance of this contract. Without support from those agencies serving people with developmental disabilities, OCRA's efforts to ensure the rights of people with developmental disabilities throughout the State of California would not be so successful.

II. PERFORMANCE OBJECTIVES

Disability Rights California's contract with DDS requires performance outcomes, as established in Exhibit E, Page 6, Paragraph 3, of the contract. Each of the specific required outcomes is discussed in the

¹ Formerly known as Protection and Advocacy, Inc.

² Fiscal Year 2008-2009, OCRA resolved over 8,499 issues for consumers and presented at 332 trainings attended by approximately 18,634 people.

following Sections A through F. The contract does not set specific numbers for performance for the outcomes. OCRA is willing to establish specific numbers in consultation with DDS, if it so desires.

A. <u>Services are provided in a manner that maximizes staff</u> <u>and operational resources.</u>

OCRA continues its tradition of serving a large number of people with developmental disabilities. OCRA handled 8,883 issues for regional center consumers during the fiscal year. The breath of issues in these cases is staggering and reflects the need for staff to know the current law that affects people with developmental disabilities in an extremely large number of areas. The statistics, attached as Exhibit B, are discussed below and show the wide variety of issues and the large number of cases handled by OCRA staff.

1) Advocacy Reports.

Each advocate provides on a quarterly basis a summary of at least one case that has unique situations from which others can learn and that can be used as examples of the advocacy that OCRA accomplishes. The summaries for Spring, 2009, and Summer, 2009, are compiled and attached as Exhibit C. 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:

OCRA Corrects Wrongful Denial of IHSS for Toddler.

R.S. is a 42-month-old boy with autism. R.S.'s mother contacted In-Home Support Services (IHSS) for an initial application. The IHSS social worker came to the home and stayed about 10 minutes. The worker told R.S.'s mother that R.S. was too young and would not qualify for services until he was 7-years-old. R.S.'s mother received the Notice of Action (NOA) denying eligibility for IHSS and immediately contacted OCRA.

OCRA represented R.S. at a hearing where the IHSS representative agreed to a re-assessment and OCRA secured retroactive services to July, 2008. OCRA attended the reassessment with R.S.'s mother and the IHSS representative. R.S. was granted 195 hours of services

as a non-severely impaired person for protective supervision and his retroactive hours

SSI Benefits Are Reinstated and Overpayment Cleared.

M.D. receives SSI because he has autism. The SSA sent M.D. a notice stating he would no longer receive SSI and assessing a large overpayment. OCRA determined that the SSA was counting child support payments that were awarded to M.D. but which he never received because his father is incarcerated. SSA was also using incorrect figures for the ineligible child deduction. Lastly, M.D. was also being subjected to the One-Third Reduction Provision, which is incorrect since he is a minor not receiving the value of food or shelter.

OCRA represented M.D. and filed for reconsideration, providing proof that M.D. does not receive any child support, provided the correct figures for each ineligible child, and provided the legal support for finding that M.D. does not receive free food or rent. After representing M.D. at the informal conference, SSA granted the reconsideration and reinstated M.D.'s SSI. His overpayment has also been cleared.

OCRA Works with Housing Authority to Correct Unsafe Conditions.

A.C. lives independently in an apartment. She is a Section 8 tenant. Her heater was faulty and presented a safety hazard because it would turn on independently and increase in temperature until turned off. Additionally, the window above the heater formed condensation which leaked directly into the plug that provided electricity for the heater.

OCRA contacted the Housing Authority and informed the inspector of the safety problems. Within two days, the inspector visited the apartment and ordered the property owner to fix the heater, clean, and paint the window within 20 days. A new heater was installed, repairs were made to the window, and a cover was placed over the wall plug which remedied the safety hazard of the water leakage.

ALJ Rules from the Bench in SSI Eligibility Hearing.

W.B. is a 46-year-old man who recently became a regional center consumer. W.B. had been denied SSI prior to establishing his eligibility for regional center services. OCRA examined W.B.'s SSI records. His claim did not include any information about his cognitive deficits. The regional center psychologist agreed to do a thorough battery of assessments and to testify at the hearing.

At hearing, OCRA presented documentation regarding W.B.'s cognitive and functional deficits. The psychologist's testimony was persuasive. Additionally, OCRA showed that although the job record appeared to indicate that W.B. had worked in competitive employment, all of his jobs were either with family members or scaled back with considerable support.

Both the state's psychiatrist and vocational expert agreed that W.B. could not be employed as a result of his disability. Because drug and alcohol use were a presenting factor, the ALJ asked that W.B. agree to a date of onset after successfully completing rehab. W.B. agreed and the ALJ said that he would issue a fully-favorable decision.

Eviction Notice Withdrawn Following OCRA Intervention.

K.O.'s rights were being denied because she was not allowed reasonable access to the telephone. OCRA investigated the complaint. After OCRA completed the investigation, the care home where K.O. lived issued an eviction notice. OCRA intervened on K.O.'s behalf and alleged that this was retaliatory eviction and unlawful. The care home agreed to withdraw the eviction notice.

Consumer Benefits from Assistive Technology.

B.R. is non-verbal and in high school. His mother purchased a communication device for B.R.'s use at home and had requested that the assistive technology be added to her son's IEP. The school district refused to include his communication device as a related service in his IEP on the basis that the school would be found liable should anything happen to it.

OCRA wrote a letter to the district on the client's behalf, requesting that the communication device be written into the IEP and that staff and B.R. receive training on its proper use. The district drafted an addendum IEP including the assistive technology as a related service and agreed to provide training to both B.R. and school staff.

2) Analysis of Consumers Served.

OCRA handled a total of 8,883 cases from July 1, 2008, through June 30, 2009. This represents a significant provision of advocacy service. Included as Exhibit B is the complete compilation of data for the fiscal year. The data has been compiled by:

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

The majority of the OCRA statistics remain consistent with OCRA's statistics for previous years. For example, the largest number of consumers served by age, 2,436 during this time period, has consistently been the 4-to-17 years-old age group. The next largest is the 23-40 age group with 1,161 people served. The ratio of males to females served also remains consistent. For those cases where gender is recorded, OCRA has traditionally served more males than females, with 63 percent of the consumers served being male and 37 percent being female. This roughly corresponds to the percentage of regional center consumers who are male versus female. As of January, 2008, 61.30 percent of all regional center consumers were male and 38.70 percent female.

The percentage of consumers residing in the parental or other family home remains by far the largest number of consumers served with 6,467 consumers in the family home or 73 percent of the cases handled. The next largest group served is those living independently, with OCRA serving 1,052 people or 12 percent with this living arrangement. OCRA's statistics on the ethnicity of consumers served for the year show OCRA's continuing commitment to serve underserved communities. The percentage of consumers from various ethnicities served by OCRA was:

Ethnicity	Percent	Percent
	OCRA Clients	RC Clients
	7/1/08 - 6/30/09	1/ 2008
Afro-American	10	10
Latino	33	32
American-Indian or	1	0.4
Alaskan Indian		
Asian	4	6
Pacific Islander	2	3
White	44	42
Multicultural (Self-Identify)	4	Not listed
Refused to State/Other	3	7

OCRA's statistics show that OCRA's service to various ethnic groups is close to parity with the number of consumers of each ethnicity served by the regional centers.³ OCRA's statistics remain fairly consistent with last year's.

The vast majority of cases handled by OCRA assist consumers in accessing services or benefits from generic agencies. This year, OCRA handled 6,132 cases involving generic services.⁴ In addition to assistance with access to generic services, OCRA handled 2,751 regional center matters.

3) Outreach/Trainings.

OCRA recognizes that outreach and training are an essential part of providing effective advocacy for regional center consumers and also recognizes that trainings are one of the best ways to maximize staff and operational resources. Therefore, OCRA offers training on a wide variety of issues to a large variety of participants, including consumers, parents, regional center staff, vendors, and other

³ The latest statistics posted on DDS' website are dated January 7, 2008.

⁴ Last fiscal year, OCRA handled 5,188 cases involving generic services.

interested people. Topics covered include, but are not limited to, consumers' rights, abuse and neglect issues, special education, voting rights, SSI, and conservatorships, among other topics.

During the last year, OCRA presented at 418 trainings with a total attendance of approximately 18,749 people at the various trainings. This is an outstanding performance by OCRA staff.

OCRA understands the need to provide assistance to individuals from traditionally underserved communities. To further the goal of meeting this need, OCRA has each office target at least three outreaches per year to a specific group of persons who are underrepresented in the office's catchment area. To help with this, OCRA has appointed Anastasia Bacigalupo as the Statewide Outreach Coordinator. The coordinator advises staff in implementation of their target outreach plans. Based upon an evaluation of the original outreach plans' results, and using new census data and updated figures from DDS regarding the ethnicity of consumers served by each regional center, the OCRA offices update their target outreach plans on a bi-annual basis. A detailed report on target outreach and training is included as Exhibit D.

B. <u>Issues and complaints are resolved expeditiously and at</u> <u>the lowest level of appropriate intervention.</u>

From July 1, 2008, through June 30, 2009, OCRA resolved 8,883 issues for consumers. Of those served, all but 133 were resolved informally. This means that 99 percent of all the matters that OCRA handled were resolved informally. Data showing this is attached as Exhibit E.

C. <u>Collaborative and harmonious working relationships are</u> <u>fostered.</u>

OCRA staff makes every attempt to foster collaborative and harmonious working relationships with the consumers and parents who OCRA serve, regional center staff, stakeholders, and members of the general community. This philosophy is not only incorporated into Disability Rights California's contract with DDS, but is also a recognition that some of the most effective advocacy takes place because of interpersonal relationships and informal advocacy. The success of this philosophy is demonstrated by the number of calls we receive, by OCRA's many successes, and by its recognition as an excellent resource for people with developmental disabilities.

1) Memorandums of Understanding.

OCRA has established Memorandums of Understanding (MOUs) with each regional center that addresses that center's individual needs, concerns, and method of operation. MOUs are updated as needed. As part of the implementation of the current contract, the director of OCRA met by telephone or in person with each of the regional center executive directors or designees, except for one, to revise the existing MOUs. Copies of all MOUs have been forwarded to DDS. The status of each revised MOU is discussed in Exhibit F.

In general, the meetings regarding the MOUs have been productive and extremely congenial. It is clear that OCRA's working relationship with the various regional centers has become well established and that concerns between the two agencies can be addressed with minimum difficulty in almost every situation.

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

Catherine Blakemore, Executive Director, Disability Rights California, and Bob Baldo, Executive Director of the Association of Regional Center Directors, have met frequently during the past year in connection with the DDS budget cuts. There are no new outstanding issues at this time. Further meetings with ARCA will be convened, should concerns arise.

D. <u>Consumers and families are satisfied with the services</u> provided.

Disability Rights California recognizes that consumer satisfaction is a primary goal for the people whom it serves. OCRA is committed to reaching consumers and parents in a manner and with results that ensure consumer and family satisfaction with the services provided.

1) Consumer Satisfaction Survey.

OCRA measures consumer satisfaction by use of an instrument developed jointly by staff, the OCRA Consumer Advisory Committee, and DDS. From the results of the most recent survey, it is clear that consumers remain extremely satisfied with the services provided by OCRA.

Seven hundred and eleven surveys were mailed out. One hundred and eighty-five people returned the survey. This represents a 26 percent return rate of the surveys.

Of those responding to the questions, 94 percent of the responders felt they were treated well by the staff, 91 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 93 percent would ask for help from OCRA again. See Exhibit G, which discusses the results of OCRA's survey.

2) Letters of Appreciation.⁵

Thanks again for spending the day with us and sharing your wealth of knowledge on Special Ed! The feedback from both sessions was "excellent" and staff were very appreciative of the information they received and your style of presentation. We are very fortunate to have you as a resource.

We wanted to say thank you for all your help with ____'s IEP. I know the outcome would not have been the same without you. We really appreciate your help. I could never repay you for your help. Thank you. You have saved us from a lot of heartache and grief. Thank you, thank you!!

Contactamos PAI desde el año 2007 y desde entonces hemos recibido consejería profesional, información, y una asistencia constante de parte de usted y la oficina que representa. Su profesionalismo nos ha impactado, nos sentimos satisfechos por su apoyo en el caso de nuestro hijo.

⁵ OCRA is providing the letters of appreciation with the wording from the originals unless otherwise indicated.

Estamos seguros de que podemos contar con su ayuda en el futuro, más queremos expresarle nuestra profunda gratitud por los resultados obtenidos, que Dios continue bendiciendo su trabajo para que pueda representar a muchos Clientes en la obtención de servicios y una mejor calidad de vida. (We have been in contact with PAI from 2007 and since then we have received professional advice, information, and consistent assistance from you and your office that you represent. Your professionalism has made an impact on us, we feel satisfied with the support you have provided in our son's case.)

We are assured that we can count on your assistance in the future, we also would like to express our profound gratitude for the results we obtained, may God continue to bless your work so that you may be able to represent many clients in obtaining services and a better quality of life.

Thank you so much for doing such a wonderful presentation and working with me at our parent support group meeting. You have a wealth of information and I have also learned quite a bit. Thanks again for all your help.

Thank you very much to drove down and take times to give us the speech. It make the parents more clearly to know what they should prepare for the IEP. The parents want me to let you know they benefits a lot from your seminar. So, that means it worth for us to spend our time.

I wanted to express my deep gratitude for your professional assistance during my recent meeting with Clearly your presence, your knowledgeable input and your ability to tactfully manage a strained situation created an opportunity for me to pursue needed services for my son correctly. You've helped me to overcome the created barriers by assisting me to have a better understanding of proper procedures & the role of the regional center. Some people work because they must so their deeds are done grudgingly with very little precision. And then there are some who are well suited, qualified and prepared for their position. You are such a person. Again, thank you for your outstanding assistance <u>and</u> follow-up in this matter for my son, for me and for our family! Thank you all for your advocacy and professionalism to ensure our son's new placement. The Lanterman Act is alive and well in California!

Señora Anastasia gracias por todo su apoyo y conosimiento en el caso de nuestro hijo _____ sus conosimientos nos ayudo a dar un gran paso para que se hagan valer los derechos de _____. Familia_____. (Mrs. Anastasia thank you for all of your support and knowledge in our son ______ case your knowledge helped us in taking a great step towards making sure that _____ rights are counted.)

I thank you for the wonderful speech you gave to us.

Thank you for visiting our classroom and explaining about legal stuff like the S.S.I. and I.P.P. and other things to. I had a good time so thank you so much and the things you gave us too.

Thank you for your business card and the pen. Thank you for speeking to our class.

QUEREMOS AGRADECERTE TODO EL APOYO QUE NOS HAS BRINDADO DURANTE TODO ESTE TIEMPO A KAREN Y A NOSOTROS MUCHISIMAS GRACIAS DE PARTE DE _____. (WE APPRECIATE ALL THE SUPPORT THAT YOU HAVE PROVIDED KAREN AND OURSELVES DURING ALL OF THIS TIME. THANK YOU VERY MUCH ON BEHALF ____).

On behalf of our clients and families at Harbor and Westside, I wish to extend our sincere appreciation to you for your participation in the Southwest SELPA Transition Fair at the Toyota Sports Center. The information you provided to our clients and families is essential for them to plan and make decisions about services after leaving the public school system.

Your continued willingness and commitment to provide counselors, clients and families information about the sevices available through your agency is a critical support to assist our clients to become productive citizens.

Westside is fortunate to have individuals like you, I who are willing to participate in this kind of informational even, especiall on a Friday evening....

Horray!! I just got a call...and they are re-instating...'s eligibility for RC!! ...you are the best. You did an AWESOME job. You were so tenacious yesterday and obviously prepared....You have been helpful every step of the way, as well. It hs been along road, but we finally ariived! Thanks to both of you for all your assistance and support. I am so happy we had the opportunity to work with you and your agency....

...Of course, any advice or tips coming from a dedicated, legal professional like you are more than welcome. My family would like to let you know that your assistance and support are more than appreciated. We know how busy you are with your work but still find time to keep in touch with us and which also gives me a reassuring feeing that I'm not alone in my battle against this deivlitating disorder that has befallen me as such a young ago. The world is a better, brighter place for me and those suffering to a similar fate as mine because of people like you who care and the organization you represent. ...Again, thank you so much for being my guardian angel and for giving me hope for something better each day....

...OCRA's services...have had a profoundly positive effect, not only on _____'s life and well being, but also on the life of his family. We hope OCRA will continue to protect the rights of this vulnerable population and the people who love them.

Thank you for everything and we wish you a world full of light and blessings always and that you have a good time.

Hank you....with out you we would not have been able to have done it. God blessed us and put you on our path. Thank you for being so good. For helping us open doors that we thought were closed.

I appreciate everything that you do and have done for _____and I. There is nothing to big or small for you to accomplish. You truly go above your job you are very dedicated. You are truly an asset in life....

In behalf of our planning committee and the parents who attended the mini-conference, thank you very much for giving the two workshops....The evaluation forms show that the parents were very

pleased with the useful, clean, information and it was mentioned several times that the questions they asked were all answered. Please let _____know that many people mentioned to me that the interpretation was excellent.

Thank you very much for your presentation today. You are a walking encyclopedia. My workers and I learned a tremendous amount of useful information about your job and how we can better service our mutual clients.

____and I want to thank you for opening our eyes to the reality that we can fight to get _____ what he deserved and needs. We are so grateful to you for all the time and effort you have expended in getting us prepared for the IFSO meeting. I kind of feel like we forgot everything you told us to do—but we will keep at it. Your constant guidance and wisdom is invaluable; we couldn't do it without you. Please know that we really appreciate you and we look forward to putting forth an even greater effort to speak up for ____.

Thank you so much, _____. You are an advocate's advocate.

3) Cases will be handled in a timely manner.

It is important that advocacy services be provided in a timely manner. Consumers and families are frequently in emergency situations, in danger of losing their placement in the least restrictive environment, losing their source of income, unable to get their medical needs met and a myriad of other dangerous or difficult situations. For this reason, OCRA has, since its establishment, had a policy that all calls will be returned as soon as possible, but not later than closing of the next business day. OCRA measures its performance in this area by use of its consumer satisfaction survey, see Exhibit G, discussed more fully above. OCRA statistics shows that 85 percent of all callers to OCRA received a call back within two days during the fiscal year. This level of performance provides verification that cases are resolved in a timely manner. OCRA will continue to train on this requirement to ensure that it provides exceptional services for all callers. E. <u>The provision of clients' rights advocacy services is</u> <u>coordinated in consultation with the DDS contract</u> <u>manager, stakeholder organizations, and persons with</u> <u>developmental disabilities and their families representing</u> <u>California's multi-cultural diversity.</u>

OCRA works through the OCRA Advisory Committee to ensure that this performance outcome is achieved. Effective December 13, 2008, the Disability Rights California Board of Directors made a decision to move the OCRA Advisory Committee to be a board committee, instead of a stand-alone committee. The change was made for both effectiveness and fiscal reasons. Attached as Exhibit H is a list of the members of the OCRA Advisory Board Committee effective June 30, 2009.

Public members of the Advisory Committee are appointed by Disability Rights California's Board of Directors. In the selection process, the Board considers geographical diversity, both rural and urban and north and south, type of developmental disability represented, and ethnic background, in addition to the qualifications of the individual applicants.

The Board 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. Minutes for the meeting held on March 6, 2009, are attached as Exhibit H.

DDS staff is invited and encouraged to participate in the next meeting, which is set for September 11, 2009, in the Bay Area.

F. <u>Self-advocacy training is provided for consumers and</u> <u>families at least twice in each fiscal year.</u>

Welfare and Institutions Code, Section 4433 (d)(5), requires that the contractor providing advocacy services for consumers of regional center services provide at least two self-advocacy trainings for consumers and family members. Disability Rights California's contract with DDS mirrors this language. OCRA has been proactive in this matter and requires each of its offices to provide at least one

self-advocacy training for consumers a year, so OCRA far exceeds the mandated number of trainings. Many offices provide more than one training.

To date, OCRA has developed five separate packets of information for OCRA staff to use in the mandated trainings:

Clients' Rights Information (Several versions of basic materials are used.) Voting Rights Clients' Rights Bingo Hands off My \$\$\$ Being Your Own Boss

Next fiscal year, OCRA has agreed to work with DDS on a selfadvocacy training developed by DDS for consumers on consumer safety in emergencies. DDS sponsored a training of the trainers day for OCRA in Sacramento on December 9, 2008. A copy of the protocol developed for this training by OCRA is provided in the OCRA Self-Advocacy Trainings' Evaluation Binder given to DDS along with this report.

OCRA also is to provide self-advocacy trainings mandated from the court-approved settlement of Capital People First, a law suit brought by Disability Rights California to encourage the movement of consumers from developmental centers to the community. OCRA will utilize materials developed by DDS in the self-advocacy trainings which are to be given to residents of large facilities.

Samples of the OCRA self-advocacy packets (most are in both English and Spanish), were provided separately in a binder marked OCRA Training Materials with the 2007-2008 Annual Report. In discussions with DDS's Contract Manager, it was decided that OCRA should not submit duplicate training packets in this year's report. As always, OCRA welcomes comments from DDS on any training packets.

An advocate may use information from any packet in presenting his or her self-advocacy trainings to consumers. During the next fiscal year, each OCRA office will do at least one Emergency Preparedness self-advocacy training. Additionally, OCRA is required to report in its Annual Report an evaluation of the trainings. OCRA has randomly selected consumer training satisfaction evaluations and included copies of them in the OCRA Self-Advocacy Trainings' Evaluation binder under separate cover. Almost without exception, consumers are pleased with OCRA's self-advocacy trainings.

Self-Advocacy Trainings held last year are listed in Exhibit I.

III. TITLE 17 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 Welfare & Institution Code, Section 4731. However, the later law offers more consumer protections. There was three Title 17 Complaints filed during the last fiscal year, both involving the same situation but different consumers. Please see Exhibit J for a chart showing the Title 17 Complaints.

IV. DENIAL OF CLIENTS' RIGHTS

CCR, Title 17, Section 50530, sets forth a procedure whereby a care provider may deny one of the basic rights of a consumer if there is a danger to self or others or a danger of property destruction caused by the actions of a consumer. The CRA must approve the procedure and submit a quarterly report to DDS by the last day of each January, April, July, and October. OCRA is including the reports concurrently with the contractual date to provide OCRA's reports. If this is not acceptable to DDS, OCRA will submit duplicate reports as requested. Attached as Exhibit K is the current log of Denials of Rights from the OCRA Offices.

V. CONSUMER GRIEVANCES

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

Seven grievances were filed by consumers or their families during the past year. Most actions of OCRA were upheld in the grievances. Information concerning the grievances has previously been submitted to DDS. Attached as Exhibit L is a chart detailing the grievances filed against OCRA during this period.

VI. COLLECTION OF ATTORNEYS 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 or Associate 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 a school district. Costs include any expenses to the Petitioner or OCRA for suing, such as filing fees or costs of expert evaluations. Neither Disability Rights California 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 M is a chart showing the amount and source of any attorney's fees collected by OCRA during the past fiscal year.

VII. RECOMMENDATIONS FOR ENHANCEMENT OF SERVICES

The contract between DDS and Disability Rights California requires that on an annual basis Disability Rights California make recommendations to DDS as to potential methods of enhancement of the services that OCRA provides for regional center consumers. Disability Rights California does not believe, given the difficult economic circumstances of the state and the reduction in services to consumers, that such recommendations are appropriate at this time.

However, we do want to express our concerns about the increase in requests for assistance and OCRA's ability to meet the advocacy needs of consumers including the improper reductions in generic services as well as working with regional centers to ameliorate consumers' legal issues. OCRA has experienced a 13 percent increase in service requests from July, 2008, to July, 2009. OCRA recognizes and is extremely appreciative of the fact that DDS has supported this organization in its efforts to provide effective statewide advocacy to all consumers. Disability Rights California will continue to explore with DDS ways in which OCRA can provide appropriate advocacy services to those consumers in need.

VIII. CONCLUSION

OCRA's statistics show its staff's continuing commitment to the protection of the rights of people with developmental disabilities. OCRA handled over 8,488 cases the last year, provided 418 trainings to over 18,749 people, and met each of its performance objectives. OCRA remains dedicated to ensuring that the rights of all of California's citizens with developmental disabilities are enforced.

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 12, 2009 - Change is *italicized*.

ALTA CALIFORNIA REGIONAL CENTER

Jackie Coleman - CRA Jacqueline Gallegos - Assistant CRA Elizabeth Kennedy – Temp PT Assistant CRA Office of Clients' Rights Advocacy 100 Howe Avenue, Ste. 240N Sacramento, CA 95825 Phone: (916) 575-1615/Fax: (916) 575-1623 Email: Jackie.Coleman@disabilityrightsca.org Jacqueline.Gallegos@disabilityrightsca.org Elizabeth.Kennedy@disabilityrightsca.org. Supervised by Jeanne Molineaux

CENTRAL VALLEY REGIONAL CENTER

Arthur Lipscomb - CRA Kay Spencer- Assistant CRA (part-time) Nate Navarro – Temp PT Assistant CRA 567 W. Shaw Avenue Fresno, CA 93704 Phone: (559) 271-6736/Fax: (559) 476-2051 E-mail: <u>Arthur.Lipscomb@disabilityrightsca.org</u> Kay.Spencer@disabilityrightsca.org, <u>Nate.Navarro@disabilityrightsca.org</u> Supervised by Tom Di Verde/Temporary Supervisor Gail Gresham

*EASTERN LOS ANGELES REGIONAL CENTER

Matthew Pope - CRALucy Garcia - Assistant CRALily Susanto - Volunteer (Start 9/1/09)1000 S. Fremont Avenue/P.O. Box 7916Alhambra, CA 91802NOTE: When shipping items through UPS/FED EX please add ELARCReception info: Bldg. A2 Room #3128. We ask that all items that are notmail be directed to the ELARC reception area and not our offices."Phone: (626) 576-4437/(626) 576-4407/Fax: (626) 576-4276E-mail:Matthew.Pope@disabilityrightsca.org.

Lucy.Garcia@disabilityrightsca.org, Lily.Susanto@disabilityrightsca.org Supervised by Tom Di Verde/Temporary Supervisor Katherine Mottarella

FAR NORTHERN REGIONAL CENTER

Andy Holcombe - CRA Lorie Atamian – Assistant CRA (part-time) Diana Rabut - Volunteer 1280 East 9th Street, Unit E Chico, CA 95928 Phone: (530) 345-4113/Fax: (530) 345-4285 E-mail: Andy.Holcombe@disabilityrightsca.org Lorie.Atamian@disabilityrightsca.org

Diana.Rabut@disabilityrightsca.org

Supervised by Jackie Coleman

GOLDEN GATE REGIONAL CENTER

Katy Lusson - CRA Amanda St. James - Assistant CRA 35 Mitchell Blvd., Suite 9 San Rafael, CA 94903 Phone: (415) 499-9724 Fax: (415) 499-9728 Toll Free: (866) 833-6713 E-mail: Katy.Lusson@disabilityrightsca.org amanda.stjames@disabilityrightsca.org Supervised by Gail Gresham

HARBOR REGIONAL CENTER

Katie Casada-Hornberger - CRA Abigail Perez - Assistant CRA (part-time) Minaal Malik - Volunteer Office of Clients' Rights Advocacy 13017 Artesia Blvd., Suite D124 Cerritos, CA 90703 Phone: (562) 623-9911/Fax: (562) 623-9929 E-mail: Katie.Hornberger@disabilityrightsca.org Abigail.Perez@disabilityrightsca.org Minaal.Malik@disabilityrightsca.org Supervised by Jeanne Molineaux

INLAND REGIONAL CENTER

Veronica Cervantes - CRA Beatriz Reyes - Assistant CRA 1585 South D Street, Suite # 206 San Bernardino, CA. Phone: (909) 383-1133 FAX (909) 383-1113 E-mail: <u>Veronica.Cervantes@disabilityrightsca.org</u> Beatriz.Reyes@disabilityrightsca.org Supervised by Tom Di Verde/Temporary Supervisor Katherine Mottarella

KERN REGIONAL CENTER

Mario Espinoza - CRA Valerie Geary - Assistant CRA Ana Pelayo - Administrative Assistant (part-time) 3200 North Sillect Ave. Bakersfield, CA 93308 Phone: (661)327-8531, Extension 313 Fax: (661)322-6417 E-mail: <u>Mario.Espinoza@disabilityrightsca.org</u> Valerie.Geary@disabilityrightsca.org Ana.Pelayo@disabilityrightsca.org Supervised by Irma Wagster

FRANK D. LANTERMAN REGIONAL CENTER

Jackie Chiang - CRA Guadelupe Marquez - Assistant CRA (part-time) Office of Clients' Rights Advocacy 3580 Wilshire Boulevard, Suite 925 Los Angeles, CA 90010 Phone: (213)427-8761, Extensión 3673 Fax: (213)427-8772 E-mail:, Guadelupe.Marquez@disabilityrightsca.org Jackie.Chiang@disabilityrightsca.org Supervised by Gail Gresham

NORTH BAY REGIONAL CENTER

Yulahlia Hernandez - CRATrina Saldana - Assistant CRAMailing Address is:Physical Address is:P.O. Box 336025 Executive CourtNapa, CA 94558Napa, CA 94558Phone: (707)224-2798Fax: (707)255-1567E-mail: Yulahlia.Hernandez@disabilityrightsca.org

Trina.Saldana@disabilityrightsca.org

Supervised by Gail Gresham

NORTH LOS ANGELES COUNTY REGIONAL CENTER

Ibrahim Saab - CRA Ada Hamer - Assistant CRA Juan Lamadrid – Personal Care Attendant 15400 Sherman Way, Ste. 300 Van Nuys, CA 91406 Phone: (818) 756-6290 Fax: (818) 756-6175 E-mail: <u>Bebo.Saab@disabilityrightsca.org</u> Ada.Hamer@disabilityrightsca.org, Juan.Lamadrid@disabilityrightsca.org Supervised by Tom Di Verde/Temporary Supervisor Irma Wagster

REDWOOD COAST REGIONAL CENTER

Jim Stoepler - CRA 525 Second Street, Suite 300 Eureka, CA 95501 Phone: (707) 445-0893, Ext. 361 Fax: (707) 444-2563 Reg workweek: Thurs/Fri

1116 Airport Park Blvd. Ukiah, CA 95482 Phone:(707)462-3832, Ext. 235 Fax: (707) 462-3314 Reg workweek: Mon/Tues/Wed

E-mail: <u>Jim.Stoepler@disabilityrightsca.org</u> Supervised by Irma Wagster

REDWOOD COAST REGIONAL CENTER

Doug Harris - CRA

14624 Lakeshore Drive, Space B Clearlake, CA 95422 Phone: (707) 995-5066 Fax: (707) 995-7050 E-mail: <u>Doug.Harris@disabilityrightsca.org</u> Supervised by Jim Stoepler

REGIONAL CENTER OF THE EAST BAY

Anna Leach-Proffer - CRA Celeste Palmer - Associate CRA 1330 Broadway, Suite 500 Oakland, CA 94612 Phone: (510) 267-1280 Fax: (510) 267-1281 E-mail: <u>Anna.Leach-Proffer@disabilityrightsca.org</u> <u>Celeste.Palmer@disabilityrightsca.org</u> Supervised by Jeanne Molineaux

REGIONAL CENTER OF ORANGE COUNTY

Jacqueline Miller - CRA Cynthia Salomon - Assistant CRA Matthew O'Neill – Volunteer Law Clerk 13272 Garden Grove Blvd. Garden Grove, CA 92843 Phone: (714) 621-0563 Fax: (714) 621-0550 E-mail: Jacqueline.Miller@disabilityrightsca.org Cynthia.Salomon@disabilityrightsca.org, Matthew.ONeil@disabilityrightsca.org

Supervised by Irma Wagster

SAN ANDREAS REGIONAL CENTER

Rita Defilippis - CRA Eleanor-Rosa LoBue - Assistant CRA Office of Clients' Rights Advocacy c/o San Andreas Regional Center 300 Orchard City Drive, Suite 170 Campbell, CA 95008 Phone: (408) 374-2470 Fax: (408) 374-2956 E-mail: <u>Rita.Defilippis@disabilityrightsca.org</u>

Eleanor-Rosa.Lobue@disabilityrightsca.org

Supervised by Gail Gresham

SAN DIEGO REGIONAL CENTER

Wendy Dumlao - CRA Alba Gomez - Assistant CRA Meaghan Connolly – Volunteer (Mon/Fri 9:00a.m. – 1:00p.m.) Office of Clients' Rights Advocacy 1111 Sixth Avenue, Suite 200 San Diego, CA 92101 Phone: (619) 239-7877 Fax: (619) 239-7838 E-mail: <u>Wendy.Dumlao@disabilityrightsca.org</u> Alba.Gomez@disabilityrightsca.org, Meaghan.Connolly@disabilityrightsca.org Supervised by Tom Di Verde/Temporary Supervisor Jeanne Molineaux

SAN GABRIEL/POMONA REGIONAL CENTER

Aimee Delgado - CRA Marisol Cruz - Assistant CRA 3333 Brea Canyon Road, Suite #118 Diamond Bar, CA 91765-3783 Phone: (909)595-4755 Fax: (909)595-4855 E-mail: <u>Aimee.Delgado@disabilityrightsca.org</u> Marisol.Cruz@disabilityrightsca.org Supervised by Irma Wagster

SOUTH CENTRAL LA REGIONAL CENTER

Anastasia Bacigalupo - CRA Christine Armand - Associate CRA 4401 S. Crenshaw Boulevard, Suite 316 Los Angeles, CA 90043-1200. Phone: (323) 292-9907 Fax: (323) 293-4259 E-mail: <u>Anastasia.Bacigalupo@disabilityrightsca.org</u> Christine.Armand@disabilityrightsca.org Supervised by Irma Wagster

TRI-COUNTIES REGIONAL CENTER

Katherine Mottarella - CRA Kendra McWright – Temp CRA Gina Gheno - Assistant CRA Margie Oppel – Volunteer 520 East Montecito Street Santa Barbara, CA 93103 Ph: (805) 884-7297/(805) 884-7218/Toll-Free (800) 322-6994,Ext. 218 Fax: 805-884-7219 E-mail: Katherine.Mottarella@disabilityrightsca.org Gina.Gheno@disabilityrightsca.org,Kendra.McWright@disabilityrightsca. org, Margie.Oppel@disabilityrightsca.org

Supervised by Irma Wagster

VALLEY MOUNTAIN REGIONAL CENTER

Leinani Neves - CRA Filomena Alomar - Assistant CRA Office of Clients' Rights Advocacy Valley Mountain Regional Center 702 N. Aurora Street Stockton, CA 95202 Phone: (209) 955-3329/Leinani's dir line (209)955-3314 Fax: (209) 462-7020 E-mail: Leinani.Neves@disabilityrightsca.org Filomena.Alomar@disabilityrightsca.org Supervised by Gail Gresham

WESTSIDE REGIONAL CENTER

Katie Meyer - CRA

Luisa Delgadillo - Assistant CRA

Martha Padilla - Volunteer

Mailing Address: (DO NOT INCLUDE "WESTSIDE REGIONAL CENTER" ON MAILING ADDRESS, OR MAIL WILL NOT BE SENT TO OCRA) Office of Clients' Rights Advocacy 5901 Green Valley Circle, Suite 410 Culver City, CA 90230 Ph:(310)258-4205 (ACRA) (310)258-4206 (CRA) Fax: (310)338-9716 E-mail: Katie.Meyer@disabilityrightsca.org Luisa.Delgadillo@disabilityrightsca.org Supervised by Supervised by Katie Hornberger

Sacramento OCRA

Office of Clients' Rights Advocacy 100 Howe Avenue, Suite 240N Sacramento, CA 95825 Telephone: (916) 575-1615 Toll-Free: (800) 390-7032 Fax: (916) 575-1623/TTY: (877) 669-6023 DIRECT DIAL NUMBER: (916) 575-1615

Los Angeles OCRA

Office of Clients' Rights Advocacy 3580 Wilshire Boulevard, Suite 925 Los Angeles, CA 90010 Telephone: (213) 427-8761 Toll-Free: (866) 833-6712 Fax: (213) 427-8772 DIRECT DIAL NUMBER: (213) 427-8757

Director:

Jeanne Molineaux Sacramento

Email: <u>Jeanne.Molineaux@disabilityrightsca.org</u> OCRASAC Office, (916) 575-1615, Extension 8142

Supervising Clients' Rights Advocates:

Tom Di VerdeSan DiegoEmail:Tom.DiVerde@disabilityrightsca.org(619)239-7877, Extension 8516(on leave)

Gail Gresham Sacramento

Email: Gail.Gresham@disabilityrightsca.org (916) 575-1615, Extension 8146

Irma Wagster Los Angeles

Email: Irma.Wagster@disabilityrightsca.org Regional Center of Orange County CRA Office – (714) 750-0709

Support Staff <u>Sacramento</u>:

Alice Ximenez, Office Manager II (916) 575-1615, Extension 8143 Email: <u>Alice.Ximenez@disabilityrightsca.org</u>

Manuella Osborn, Administrative Assistant (916) 575-1615, Extension 8141 Email: <u>Manuella.Osborn@disabilityrightsca.org</u> Supervised by Alice Ximenez

Support Staff Los Angeles:

Maria Ortega, Office Manager I (213) 427-8761, Extension 3670 Email: Maria.Ortega@disabilityrightsca.org Supervised by Alice Ximenez Los Angeles

Sacramento

Sacramento

ALPHABETICAL OCRA STAFF LISTING <u>BY LAST NAME</u> AND OFFICE LOCATION (INCLUDING VOLUNTEERS AND TEMPORARY STAFF)

2. Armand, ChristineSCLARC3. Atamian, LorieFNRC4. Bacigalupo, AnastasiaSCLARC5. Cervantes, VeronicaIRC6. Chiang, JackieLRC7. Coleman, JackieACRC8. Connolly, MeaghanSDRC (Volunteer)9. Cruz, MarisolSGPRC10. Delgadillo, LuisaWRC11. Delgado, AimeeSGPRC12. Di Verde, TomOCRASANDIEGO (on leave)13. Difilippis, RitaSARC14. Dumlao, WendySDRC15. Espinoza, MarioKRC16. Gallegos, JacquelineACRC17. Garcia LucyELARC	1.	Alomar, Filomena	VMRC
4. Bacigalupo, AnastasiaSCLARC5. Cervantes, VeronicaIRC6. Chiang, JackieLRC7. Coleman, JackieACRC8. Connolly, MeaghanSDRC (Volunteer)9. Cruz, MarisolSGPRC10. Delgadillo, LuisaWRC11. Delgado, AimeeSGPRC12. Di Verde, TomOCRASANDIEGO (on leave)13. Difilippis, RitaSARC14. Dumlao, WendySDRC15. Espinoza, MarioKRC16. Gallegos, JacquelineACRC	2.	Armand, Christine	SCLARC
5.Cervantes, VeronicaIRC6.Chiang, JackieLRC7.Coleman, JackieACRC8.Connolly, MeaghanSDRC (Volunteer)9.Cruz, MarisolSGPRC10.Delgadillo, LuisaWRC11.Delgado, AimeeSGPRC12.Di Verde, TomOCRASANDIEGO (on leave)13.Difilippis, RitaSARC14.Dumlao, WendySDRC15.Espinoza, MarioKRC16.Gallegos, JacquelineACRC	3.	Atamian, Lorie	FNRC
6. Chiang, JackieLRC7. Coleman, JackieACRC8. Connolly, MeaghanSDRC (Volunteer)9. Cruz, MarisolSGPRC10. Delgadillo, LuisaWRC11. Delgado, AimeeSGPRC12. Di Verde, TomOCRASANDIEGO (on leave)13. Difilippis, RitaSARC14. Dumlao, WendySDRC15. Espinoza, MarioKRC16. Gallegos, JacquelineACRC	4.	Bacigalupo, Anastasia	SCLARC
7. Coleman, JackieACRC8. Connolly, MeaghanSDRC (Volunteer)9. Cruz, MarisolSGPRC10. Delgadillo, LuisaWRC11. Delgado, AimeeSGPRC12. Di Verde, TomOCRASANDIEGO (on leave)13. Difilippis, RitaSARC14. Dumlao, WendySDRC15. Espinoza, MarioKRC16. Gallegos, JacquelineACRC	5.	Cervantes, Veronica	IRC
8. Connolly, MeaghanSDRC (Volunteer)9. Cruz, MarisolSGPRC10. Delgadillo, LuisaWRC11. Delgado, AimeeSGPRC12. Di Verde, TomOCRASANDIEGO (on leave)13. Difilippis, RitaSARC14. Dumlao, WendySDRC15. Espinoza, MarioKRC16. Gallegos, JacquelineACRC	6.	Chiang, Jackie	LRC
9. Cruz, MarisolSGPRC10. Delgadillo, LuisaWRC11. Delgado, AimeeSGPRC12. Di Verde, TomOCRASANDIEGO (on leave)13. Difilippis, RitaSARC14. Dumlao, WendySDRC15. Espinoza, MarioKRC16. Gallegos, JacquelineACRC	7.	Coleman, Jackie	ACRC
10.Delgadillo, LuisaWRC11.Delgado, AimeeSGPRC12.Di Verde, TomOCRASANDIEGO (on leave)13.Difilippis, RitaSARC14.Dumlao, WendySDRC15.Espinoza, MarioKRC16.Gallegos, JacquelineACRC	8.	Connolly, Meaghan	SDRC (Volunteer)
11. Delgado, AimeeSGPRC12. Di Verde, TomOCRASANDIEGO (on leave)13. Difilippis, RitaSARC14. Dumlao, WendySDRC15. Espinoza, MarioKRC16. Gallegos, JacquelineACRC	9.	Cruz, Marisol	SGPRC
12. Di Verde, TomOCRASANDIEGO (on leave)13. Difilippis, RitaSARC14. Dumlao, WendySDRC15. Espinoza, MarioKRC16. Gallegos, JacquelineACRC	10.	Delgadillo, Luisa	WRC
13. Difilippis, RitaSARC14. Dumlao, WendySDRC15. Espinoza, MarioKRC16. Gallegos, JacquelineACRC	11.	Delgado, Aimee	SGPRC
14. Dumlao, WendySDRC15. Espinoza, MarioKRC16. Gallegos, JacquelineACRC	12.	Di Verde, Tom	OCRASANDIEGO (on leave)
15. Espinoza, MarioKRC16. Gallegos, JacquelineACRC	13.	Difilippis, Rita	SARC
16. Gallegos, Jacqueline ACRC	14.	Dumlao, Wendy	SDRC
	15.	Espinoza, Mario	KRC
17 Garcia Lucy ELARC	16.	Gallegos, Jacqueline	ACRC
	17.	Garcia, Lucy	ELARC
18. Geary, Valerie KRC	18.	Geary, Valerie	KRC
19. Gheno, Gina TCRC	19.	Gheno, Gina	TCRC
20. Gomez, Alba SDRC	20.	Gomez, Alba	SDRC
21. Gresham, Gail OCRASAC		Gresham, Gail	
22. Hamer, Ada NLACRC	22.	Hamer, Ada	NLACRC
23. Harris, Doug RCRC	23.	Harris, Doug	RCRC
24. Hernandez, Yulahlia NBRC	24.	Hernandez, Yulahlia	NBRC
25. Holcombe, Andy FNRC	25.	Holcombe, Andy	FNRC
26. Hornberger, Katie HRC	26.		HRC
27. Kennedy, Elizabeth ACRC	27.	Kennedy, Elizabeth	ACRC
28. Lamadrid, Juan NLACRC (PCA)	28.	Lamadrid, Juan	
29. Lipscomb, Arthur CVRC	29.	Lipscomb, Arthur	CVRC
30. LoBue, Eleanor-Rosa SARC	30.	LoBue, Eleanor-Rosa	SARC
31. Lusson, Katy GGRC	31.	Lusson, Katy	GGRC
32. Malik, Minaal HRC (Volunteer)		Malik, Minaal	
33. Marquez, Guadelupe OCRALA	33.		OCRALA
34. McWright, Kendra TCRC (Volunteer)	34.		
35. Meyer, Katie WRC			

36. Miller, Jacqueline	RCOC
37. Molineaux, Jeanne	OCRASAC
38. Mottarella, Katherine	TCRC
39. Navarro, Nate	CVRC (Agency Temp)
40. Neves, Leinani	VMRC
41. O'Neill, Matthew	RCOC (Volunteer)
42. Oppel, Margie	TCRC (Volunteer)
43. Ortega, Maria	OCRALA
44. Osborn, Manuella	OCRASAC
45. Palmer, Celeste	RCEB
46. Padilla, Martha	WRC (Volunteer)
47. Pelayo, Ana	KRC
48. Perez, Abigail	HRC
49. Pope, Matthew	ELARC
50. Leach-Proffer, Anna	RCEB
51. Rabut, Diana	FNRC (Volunteer)
52. Reyes, Beatriz	IRC
53. Saldana, Trina	NBRC
54. Salomón, Cynthia	RCOC
55. Spencer, Kay	CVRC
56. St. James, Amanda	GGRC
57. Stoepler, Jim	RCRC
58. Susanto, Lily	ELARC (Volunteer)
59. Wagster, Irma	OCRALA
60. Ximenez, Alice	OCRASAC

Updated as of August 12, 2009.

Office of Clients' Rights Advocacy Annual Report - July 1, 2008 through June 30, 2009 Report by Age Group

										-	<u>ge ai</u>											
Age Range	ARC	CVRC	ELARC	FNRC	GGRC	HRC	IRC	KRC	LRC	NBRC	NLARC	RCEB	RCOC	RCRC	SARC	SCLARC	SDRC	SGPRC	TCRC	VMRC	WRC	Total
Age 0-3	16	12	25	16	11	35	25	10	26	16	9	7	20	2	17	22	12	40	20	19	34	394
Age 4-17	97	134	190	77	80	126	152	117	105	91	59	104	74	50	172	202	91	140	133	113	129	2436
Age 18-22	56	33	65	23	41	46	41	40	24	36	50	27	24	31	47	19	27	29	60	52	54	825
Age 23-40	120	44	71	63	73	44	50	38	17	66	53	56	37	50	34	38	36	24	88	87	72	1161
Age 41-50	49	16	17	36	46	11	20	16	7	21	27	27	19	15	18	15	17	13	33	40	27	490
Age 51+	32	14	44	30	42	7	15	12	6	13	15	18	12	21	20	8	21	8	32	35	27	432
Age Unknown	14	4	3		2	2		19	1	5	1	11	22	3		7	3	1	1	8	3	110
Grand Total	384	257	415	245	295	271	303	252	186	248	214	250	208	172	308	311	207	255	367	354	346	5848

Office of Clients' Rights Advocacy Annual Report - July 1, 2008 through June 30, 2009 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					2			1				186			2							191
Amador		1		1																6		8
Butte	1			162																		163
Calaveras	1																			13		14
Colusa	2			5																		7
Contra Costa												134										134
Del Norte														4								4
El Dorado	15			8																		23
Fresno	5	194				1		4						1	4				4			213
Glenn				11																		11
Humboldt				1						2				54								57
Imperial																	11					11
Inyo								2														2
Kern		4	1			2		333			1		1	1				1	4			348
Kings		12						3														15
Lake														113								113
Lassen				8																		8
Los Angeles	3	1	612	1	1	453	9	1	358	1	263		5			454	1	453		1	548	3165
Madera		19																1	1			21
Marin					164																	164
Mariposa		6																	1			7
Mendocino				1						1			1	43								46
Merced		19																				19
Monterey															28							28
Napa	4									84												88
Orange						3	1						471			1		1				477
Placer	28			1																	1	30
Plumas				11																		11
Riverside						1	170						2									173
Sacramento	404			2						1					2							409

Office of Clients' Rights Advocacy Annual Report - July 1, 2008 through June 30, 2009 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 Benito															6							6
San Bernardino	4	1	3				202	1	2				5			2		4			1	225
San Diego						1							2				289					292
San Francisco	1				117							3										121
San Joaquin	1			1																219		221
San Luis Obispo																			48			48
San Mateo					173					1		1			1							176
Santa Barbara																			150		3	153
Santa Clara		1						1		1		2			337			1		1		344
Santa Cruz															44							44
Shasta				70																		70
Siskiyou				2																		2
Solano										187							1			3		191
Sonoma	1									201		2		4								208
Stanislaus	3	1									1									159		164
Sutter	4																					4
Tehama				56																		56
Trinity				3																		3
Tulare	3	64																				67
Tuolumne																				23		23
Unknown	1	6	3	10	2	1	5	18	2	3		5	7	10	3	1	2	1	7	5	12	104
Ventura								2			1								375		1	379
Yolo	7									2												9
Yuba	12				1																	13
Grand Total	500	329	619	354	460	462	387	366	362	484	266	333	494	230	427	458	304	462	590	430	566	8883

Office of Clients' Rights Advocacy Annual Report - July 1, 2008 through June 30, 2009 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	46	22	15	30	35	3	10	23	8	40	13	23	13	3	12	6	2	3	34	5	24	370
Autism	50	68	185	44	56	101	98	61	80	51	50	69	84	17	120	114	64	82	86	50	130	1660
Cerebral Palsy	26	25	20	21	38	29	48	11	15	24	17	47	14	18	36	19	19	25	44	30	37	563
Dual Diagnosis - 5th Category	6	3			1		2	3		8	2	4	2						1		1	33
Dual Diagnosis - Autism		1		1	2	3	8	4	3	7	4	7			1	3			2	2	3	51
Dual Diagnosis - Cerebral Palsy	1			2	3	4		1		5	5	1	2	3	2				3		1	33
Dual Diagnosis - Epilepsy		1				1	3	1	1	2	1	1		2	1			1	3	3		21
Dual Diagnosis - Mental Retardation	4	6	4	7	14	11	9	5	3	25	19	10	7	9	8	1	1		19	9	8	179
Early Start	7	9	4	9	7	26	18	4	15	11	6	8	9	1	9	13		31	16	9	26	238
Epilepsy	5	22	14	28	22	7	28	6	9	4	6	3	9	5	5	12	10	8	27	17	22	269
Mental Retardation	247	99	185	129	155	83	122	149	58	99	93	79	55	131	111	119	125	83	170	253	131	2676
Unknown	30	34	14	10	7	33	12	7	20	2	10	13	36	1	28	50	6	34	21	32	5	405
Grand Total	422	290	441	281	340	301	358	275	212	278	226	265	231	190	333	337	227	267	426	410	388	6498

Office of Clients' Rights Advocacy Annual Report - July 1, 2008 through June 30, 2009 Report by Ethnicity

								y Eur														
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	7	3		10	2		2	2	1	2			2	3					3	1	1	39
Asian	8	7	34	6	23	19	4	1	7	2	3	23	16		43	2	2	14	7	7	2	230
Black or African American	60	18	8	4	30	25	36	21	11	38	18	55	5	4	14	97	7	17	7	34	67	576
Hispanic / Latino	66	95	282	26	43	71	123	97	106	74	76	64	45	13	75	186	71	121	112	75	98	1919
Multicultural	7	15	23	3	28	26	25	6	13	2	9	2	6	1	11	9		27	15	11	10	249
Native Hawaiian or other Pacific Islander	7	1	2	1	18	3	3		3	6		6	1		12		2	10	3	8	1	87
Unknown	7	8	21	3	2	2	13	7	2	3	9	4	19	6	5	4	5	5	17	6	15	163
White	222	110	44	191	149	123	96	115	42	121	96	95	111	144	146	7	118	49	201	211	150	2541
Grand Total	384	257	414	244	295	269	302	249	185	248	211	249	205	171	306	305	205	243	365	353	344	5804

									1.00		y aci											
	ARC	CVRC	ELARC	FNRC	GGRC	HRC	IRC	KRC	LRC	NBRC	NLARC	RCEB	RCOC	RCRC	SARC	SCLARC	SDRC	SGPRC	TCRC	VMRC	WRC	Grand Total
Female	150	89	135	111	116	87	107	75	65	107	76	105	65	69	97	96	82	88	138	148	125	2131
Male	233	168	278	134	179	184	196	176	121	141	138	143	140	102	211	213	125	167	228	205	221	3703
Unknown	1		2					1				2	3	1		2			1	1		14
Grand Tota	384	257	415	245	295	271	303	252	186	248	214	250	208	172	308	311	207	255	367	354	346	5848

Office of Clients' Rights Advocacy Annual Report - July 1, 2008 through June 30, 2009 Report by Gender

Office of Clients' Rights Advocacy Annual Report - July 1, 2008 through June 30, 2009 Report by Living Arrangement

Adult Residential Facility 14 6 1 2 1 16 4 5 8 19 1 1 7 21 4 14 37 2 Developmen 9 1 5 1 4 2 9 2 2 1 5 1 5 1 4 1 1 5 1 4 1 1 5 1 4 1 1 5 1 4 1 1 5 1 4 4 1 1 5 1 4 4 1 1 5 1 5 1 4 4 1 1 5 1 4 4 3 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 2 5 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							ontby		7 4 1 64 1	90													
Adult Residential Facility 14 8 1 2 1 16 4 5 8 19 1 1 7 2 1 4 14 14 37 2 Board and Care 39 1 5 1 4 2 2 1 5 1 5 1 4 1 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 4 1 1 2 2 1 1 1 1 1 5 1 2 2 1		ARC	CVRC	ELARC	FNRC	GGRC	HRC	IRC	KRC	LRC	NBRC	NLARC	RCEB	RCOC	RCRC	SARC	SCLARC	SDRC	SGPRC	TCRC	VMRC	WRC	Total
Board and Care 1 5 3 4 8 2 9 2 1 1 1 5 1 4 Community Residential Home 3 4 2 2 1 7 4 2 2 1 5 1 5 2 Community Residential Home 3 4 2 2 1 5 1 5 1 5 1 4 1 5 1 5 1 6 1 2 1 <th1< th=""> <th1< td="" th<=""><td>Adult Residential Facility</td><td></td><td>_</td><td>1</td><td></td><td></td><td>1</td><td></td><td></td><td>_</td><td></td><td></td><td></td><td>1</td><td></td><td>0,</td><td>7</td><td></td><td></td><td></td><td></td><td>-</td><td>186</td></th1<></th1<>	Adult Residential Facility		_	1			1			_				1		0,	7					-	186
Childrans Group Home 2 1 1 7 4 2 2 1 5 2 Community Residential Home 3 4 2 2 7 6 1 2 9 1 5 1 5 2 30 1 Detention Center 6 1 1 2 3 4 4 3 1 1 2 3 4 4 3 1			1	5	20		4	-		2	-		-	1		4	- 1	1	1		1	4	92
Community Residential Home 3 4 2 2 7 6 1 2 9 1 3 2 30 1 Detention Center 6 1 2 3 4 3 1 1 2 3 4 3 1 1 2 3 1		00	2			1	т	1	7	-		2	~	2	2		1	5	1		2		33
Developmental Center 6 1		3		2	2	7			6			9	1		_	3	· ·	Ŭ	· ·	Ŭ			79
Developmental Center 6 1 2 3 4 4 3 1 1 2 5 3 4 Federal Facility 1 1 1 2 3 4 4 3 1 1 2 5 3 4 4 3 1 1 2 5 3 4 3 1 1 2 5 3 4 3 1 1 2 5 3 4 3 1 1 2 5 3 4 4 1 2 3 4 4 1 1 2 5 3 4 4 1 <th1< th=""> 1 <th1< th=""></th1<></th1<>		Ű		_		,			-			0				Ű					00	1	2
Federal Facility Image: Construction of the second sec		6					1		2		3	4	4	3	1	1	2	5		3		· · ·	35
Foster Care 1 <th< td=""><td></td><td>Ŭ</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>1</td><td></td><td></td><td>Ũ</td><td></td><td></td><td></td><td>Ű</td><td></td><td>Ū</td><td></td><td></td><td>1</td></th<>		Ŭ									1			Ũ				Ű		Ū			1
Foster Family Home 9 1 2 2 1 2 2 1 2 2 4 3 1 Haffway House 6 5 2 2 1 6 1 2 3 2 1 1 2 1 2 1 2 1 1 1 2 1 1 2 1 <th< td=""><td></td><td></td><td>1</td><td>1</td><td>1</td><td>2</td><td></td><td>2</td><td>1</td><td></td><td>3</td><td>1</td><td>1</td><td></td><td>1</td><td>1</td><td>1</td><td>1</td><td>4</td><td>3</td><td></td><td>2</td><td>26</td></th<>			1	1	1	2		2	1		3	1	1		1	1	1	1	4	3		2	26
Halfway House 1 <			9		1	_	2	_	1			•	1		2	2	4	2			3	1	38
Homeless 6 5 2 2 1 6 1 2 3 2 2 1<					1							1					1						3
ICF DD ICF DD I <thi< th=""> I <thi< td=""><td></td><td></td><td>6</td><td>5</td><td>2</td><td>2</td><td>1</td><td></td><td>6</td><td></td><td></td><td>1</td><td></td><td>2</td><td>3</td><td>2</td><td>2</td><td>1</td><td>1</td><td>2</td><td>1</td><td></td><td>37</td></thi<></thi<>			6	5	2	2	1		6			1		2	3	2	2	1	1	2	1		37
ICE DD-H I 1 7 I 5 2 I 1 2 ICF DD-N 2 2 2 1 2 1 3 1 3 1 3 1 3 1 3 1 3 1 1 3 1				Ū	_								1		Ū				·		1	1	6
ICF DD-N 2 2 1 3 1 ICF/MR/Nursing Home 1 2 1 <td< td=""><td></td><td></td><td></td><td></td><td>1</td><td>7</td><td></td><td></td><td></td><td></td><td></td><td>5</td><td>2</td><td></td><td></td><td></td><td></td><td></td><td></td><td>1</td><td>2</td><td></td><td>18</td></td<>					1	7						5	2							1	2		18
ICF/MR/Nursing Home 1 2 1		2				2						0	_	2		2				1			12
Independent Housing 75 35 19 130 80 8 27 63 18 75 49 28 50 68 26 35 30 15 65 66 90 1 Intermediate Care Facility/Nursing Home 2 2 1 3 2 4 3 1 6 3 2 5 1 3 1 <t< td=""><td></td><td>_</td><td></td><td>1</td><td></td><td></td><td></td><td></td><td></td><td></td><td>1</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>1</td><td></td><td>1</td><td>7</td></t<>		_		1							1									1		1	7
Intermediate Care Facility/Nursing Home 1 1 5 1 1 3 1 Jail 2 1 3 2 4 3 1 6 3 2 5 1 3 1 Large Group Home (more than 3 beds) 75 11 2 56 12 16 1 13 6 1 19 12 25 3 8 13 2 5 1 3 1		75	35	19	130		8	27	63	18	75	49	28	50	68	26	35	30	15	65	66	90	1052
Jail 2 2 1 3 2 4 3 1 6 3 2 5 1 3 Large Group Home (more than 3 beds) 75 11 2 56 12 16 1 13 6 11 19 12 25 5 3 8 13 2 5 Legal Detention Facility/Jail 4 1 <			00											00	1		00	00				1	11
Large Group Home (more than 3 beds) 75 11 2 56 12 16 1 13 6 11 19 12 25 5 3 8 13 2 1 Municipal Detention 4 1		2	2			1	3		2	-	4	3	1	6			3		2	5	1	3	38
Legal Detention 4 1	Large Group Home (more than 3 beds)			2		56				1	13					25		3				2	290
Municipal Detention Facility/Jail 1 1 1 3 1 1 3 1 <th1< th=""> <th1< th=""> 1 <t< td=""><td></td><td>4</td><td></td><td></td><td></td><td>1</td><td></td><td></td><td>1</td><td></td><td>1</td><td>1</td><td></td><td></td><td></td><td></td><td>-</td><td>-</td><td>-</td><td></td><td></td><td></td><td>8</td></t<></th1<></th1<>		4				1			1		1	1					-	-	-				8
Nursing Home 2 1 <t< td=""><td></td><td></td><td></td><td></td><td></td><td>1</td><td></td><td></td><td>1</td><td></td><td>3</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>1</td><td></td><td>6</td></t<>						1			1		3										1		6
Other 2 5 2 14 2 1 2 2 3 1 4 4 2 5 7 Parental or Other Family Home 248 234 572 183 249 407 324 235 332 324 163 220 373 118 339 390 227 421 408 268 432 6 Prison 2 1 1 4 2 1		2					1		1				2	1	1	1			1	1		4	15
Prison 2 1 <th1< th=""> 1<td></td><td></td><td></td><td>5</td><td>2</td><td></td><td>14</td><td>2</td><td>1</td><td></td><td>2</td><td>2</td><td>2</td><td>3</td><td>1</td><td></td><td></td><td>4</td><td>4</td><td>2</td><td>5</td><td></td><td>51</td></th1<>				5	2		14	2	1		2	2	2	3	1			4	4	2	5		51
Prison 2 1 <td>Parental or Other Family Home</td> <td>248</td> <td>234</td> <td>572</td> <td>183</td> <td>249</td> <td>407</td> <td>324</td> <td>235</td> <td>332</td> <td>324</td> <td>163</td> <td>220</td> <td>373</td> <td>118</td> <td>339</td> <td>390</td> <td>227</td> <td>421</td> <td>408</td> <td>268</td> <td>432</td> <td>6467</td>	Parental or Other Family Home	248	234	572	183	249	407	324	235	332	324	163	220	373	118	339	390	227	421	408	268	432	6467
Private Institutional Living Arrangement 1 2 1 0 1 1 Private Institutional School 3 1 1 2 1 0 1 1 Psychiatric Wards of Private General Hospitals 2 1 1 2 1 0 1 0	,		2				-	1			-		1				1	1					6
Private Institutional Living Arrangement 1 2 1 1 2 1 <td>Private Institutional Hospital/Treatment Facility</td> <td>2</td> <td>2</td> <td>1</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>1</td> <td></td> <td>4</td> <td></td> <td></td> <td>2</td> <td>1</td> <td></td> <td></td> <td>1</td> <td>1</td> <td>1</td> <td>15</td>	Private Institutional Hospital/Treatment Facility	2	2	1							1		4			2	1			1	1	1	15
Private Institutional School Image: Mark and the spital state in the spital stat						1			2				1								1		5
Psychiatric Wards of Public General Hospitals 1 1 4 1 1 2						3	1				1	2	1										8
Public Institutional Hospital/Treatment Facility 1 1 3 2 1 3 6	Psychiatric Wards of Private General Hospitals	2					1							1									4
Public Institutional Hospital/Treatment Facility 1 1 3 2 1 3 6	Psychiatric Wards of Public General Hospitals	1	1				4			1	1		2								1		11
Public Institutional Living Arrangement 1 <td></td> <td></td> <td>1</td> <td>1</td> <td></td> <td>3</td> <td></td> <td>2</td> <td>1</td> <td></td> <td></td> <td></td> <td>3</td> <td>6</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>1</td> <td>1</td> <td>18</td>			1	1		3		2	1				3	6							1	1	18
Semi-indepent Home or Apartment 5 6 1 1 2 1 2 1 <t< td=""><td></td><td>1</td><td></td><td></td><td></td><td>1</td><td></td><td></td><td></td><td></td><td></td><td></td><td>1</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>3</td></t<>		1				1							1										3
Small Group Home (3 beds or less) 2 1 5 2 11 5 1 4 3 5 1	Public Residential School					1					6												7
Small Group Home (3 beds or less) 2 1 5 2 11 5 1 4 3 5 1 1 16 Specialized Nursing Facility/Nursing Home 1<	Semi-indepent Home or Apartment		6	1	1	27			2	1	2		12	17	1	10	4	2		28		19	138
Specialized Nursing Facility/Nursing Home 1 1 1 1 1 1 1 1 2 2 2 2 2 1 <th1< th=""> 1 <th1< th=""></th1<></th1<>		2	1		5		2		11		5	1	4	3	5	1	1	1		16			58
Supervised Apartment 2 1 1 8 4 7 4 12 3 8 2 Unknown 13 2 2 1 1 1 2 4 4 1 2 3 1				1		1		1	1			1	1								2		8
Unknown 13 2 2 1 1 1 1 2 4 4 1 2 3 1		2	1		1	8					4	7	4		12	3				8		2	52
Crand Tabel 500 000 010 000 010 000 000 000 000 000	Unknown	13	2	2	1			1	1	2			4	4	1	2				3		1	37
	Grand Total	500	329	619	354	460	462	387	366	362	484	266	333	494	230	427	458	304	462	590	430	566	8883

					Report	by Prot	olem C	odes														
	ARC	CVRC	ELARC	FNRC	GGRC	HRC	IRC	KRC	LRC	NBRC	NLARC	RCEB	RCOC	RCRC	SARC	SCLARC	SDRC	SGPRC	TCRC	VMRC	WRC	Total
4731 Complaint	12	1			1	1	5	3		16	3		2		1	3	1		6	3	5	63
4731 - No Jurisdiction	1	1																			1	2
4731 - Regional Center	1	1				1	5	1		12	3		2			3			4	3	4	40
4731 - Service Provider	10				1			2		4					1		1		2			21
Abuse	19	4	6	3	47		7	9	1	8	4	13	4	10	2	3	7	2	19	7	12	187
Exploitation (Financial)		1	2	2	7		1	2		3	1	2	1	2			1		4	1	2	32
Exploitation (Physical / Emotional)					1					1		1		1			1		1	-	1	7
Financial Abuse	1																					1
Inappropriate / Excessive Physical Restraint		1		1	1		1	1														5
Inappropriate / Excessive Seclusion												1							1	1		3
Inappropriate / Involuntary Medication Therapy								1														1
Inappropriate Medical Treatment	1	1			1		1					1							1			6
Other Abuse	6	1	3				3	1			1			1			1	2	4	3	1	27
Physical Assault	5		1		11		1	1	1	2	-	3	2	2	2	1	1		3	-	4	40
Physical Neglect			-											1					-			1
Sexual Assault																				1		1
Sexual Assault - Old	3				9			1		1	1	3	1	2		2	2		4	1	2	32
Staff Attitude / Behavior	1				17			2		1	1						1				2	25
Staff Retaliation	2							-				2									-	4
Verbal Abuse	_											-		1					1			2
Assistive Technology			1	5	5	I	1				1	1	2	1	3	I	1		2	1	1	24
Assistive Technology - California Children's Services (CCS)		1		1	1		_				_	1		_	-	- 1	_		1		1	5
Assistive Technology - Medi-Cal					1								2	1	1		1					6
Assistive Technology - Other AT				3	2		1						2		2				1	1		10
Assistive Technology - Private Health Care Plan				1	2										2							1
Assistive Technology - Regional Center				'	1						1											2
Consent			1				2			9			1				5		12	2	3	35
Capacity / Incapacity of Client		1	-	- 1			1			6			1	- 1	-	- 1	5	-	3	1		17
Informed Consent			1				1			2			1				5		3 8	1	1	14
Substituted Decision Making (Ex. DPAHC)			1				1			2 1									8	1	2	
Conservatorship	12	8	12	5	9	10	10	22	6	14	30	9	16	14	9		7	21	48	22	12	4 304
•	12	ð	12	5	9	10	10	22	6	14	30	9	10	14	9	8	/	21	48	22	12	
Alternatives to Conservatorship																2						2
Change Conservatorship	-			1						1			1	1	1			1	3	1	1	11
Conservatee's Rights	5	1	1	2				1	1	4	14	1	3	3					2	7	1	46
Conservator's Duties	1	1					0	2	5	1	1		0	0		-	-	1	4	1		12
Establishing Conservatorship (General)	4	2	10		1	10	9	1	5	4		3		3		5	5	11	7	2	-	68
Establishing Conservatorship (Limited)	1	1	10		3	10	1	13		1	14			1		1	2	3	31	9	9	118
LPS Conservatorship					1			1		1		1						_		1		8
Termination of Conservatorship	1	3	1	2	4			4		2	1		3	6	4			5	1	1	1	39
Criminal Justice / Forensic Mental Health Issues	2		2		15	5	1	7			2	4	1			1			2	1		43
Competency							1	2											1			4
Criminal Justice Issues - Rights	1				15	4		3			2	3	1						1	1		31
Criminal Matter Representation – Not IOLTA eligible - OCRA								1														1
Diversion			2					1				1										4
Jail	1																					1
Other Criminal Justice						1										1						2

Office of Clients' Rights Advocacy Annual Report - July 1, 2008 through June 30, 2009 Report by Problem Codes

			Annua		ort - Ju	ly 1, 20	Rights A 08 throug blem Co	gh Jun)09												
	ARC	CVRC	ELARC	FNRC	GGRC	HRC	IRC	KRC	LRC	NBRC	NLARC	RCEB	RCOC	RCRC	SARC	SCLARC	SDRC	SGPRC	TCRC	VMRC	WRC	Total
Discrimination (Other than Employment)	2		8	9	2	3	5		3	2	5	2	2		5	1	2	2	8	7	13	81
Architectural Barriers				1											1						1	3
Civil Rights (Race, Religion, Sexual Orientation)						1	1														1	3
Higher Education (Public and Private)																			1	1		2
Insurance Discrimination																			2	1		3
Other Discrimination			5	3	1		2				1	2			3			2	1		2	22
Public Accomodations (Hotels, Restaurants, Etc.)	1		1	2							1		1				2		2	2		12
Public Services (Federal, State, Local)	1		1	1	1					2	1				1				1	3	1	13
Transportation (Public and Private)			1	2		2	2		3		2		1			1			1		8	23
Education	93	103	212	76	78	146	73	89	105	89	19	83	105	43	216	150	66	176	102	62	71	2157
Complaint Procedures	3	13	12	6	2	8	9	7	6	10	1	14	3	6	3	2	9	4	7	9	7	141
Day Care	1														2				3			6
Education - Adult Education Programs		2		2											1				4			9
Education - Assessment	2	10	8			6		1	10	6		1	9		6	4		8	4	5	5	85
Education - Behavioral Intervention, Services and Supports	2	7	7		4	3		1	4	1		1	8		12	21	3	5	6	6	2	93
Education - Compliance Complaint		1															2			1		4
Education - Discipline (Suspension / Expulsion / Other)	7	5	4	4	1	1	4	10		2	1	2	5		7	1		1	1	6	-	62
Education - Due Process Appeals	1	4	5	1	1	4		3	8	10		2	7	2	2	6	9	6	5	1	6	83
Education - Eligibility			4	1		2	2	1		5		1	2	1	3	6		2	1	2		33
Education - Extra Curricular Activites				1																		1
Education - Full Inclusion (Except Pre-School)	1		3	1	2	5									2			1	3			18
Education - Higher Education	1		2	1						1	1										1	7
Education - Home / Hospital Instruction			2					1		2						2		2	2			11
Education - IEP Development	28	23	46	39	21	21	19	20	32	30	4	15	27	21	69	34	18	71	17	7	11	573
Education - Least Restrictive Environment	2	4	11	4	4		4	2	1			1	2		11	4			2		2	54
Education - Mental Health Services (AB 3632)						1				1		1					1				-	4
Education - Non-Public School Placement		1	5	1	3	4	1	1	5	2	1	2	4		3		2	1	4	1	1	42
Education - Other Education	16	6	20		9	8	6	13	5	4	1	9	7	1	10		4	12	7	8	3	149
Education - Preschool Programs	4	3	2	2		3	8	1	2			3	1		3	7		6	5	1	1	52
Education - Preschool Programs and Full Inclusion						1										1		1	1	1		5
Education - Public School Placement	9	12	25	1	13	8	7	14	18	5	3	11	10	2	37	21	9	16	9	9	2	241
Education - Related Services (Ex. OT / PT / S&L / 1:1 / Medicatio	6	4	37	3	8	36	8	2	11	4	4	9	10	6	25	35	6	25	8	3	8	258
Education - Residential Placement		2	1				1				1	1	1								1	8
Education - Transition Planning (Any Age)		2	6	1	4	5	2		1	4		3	3	2	2	2		7	3		3	50
Education - Transporation	8	2	8	4	5	4		11	2			2	3	2	11	1	3	1	2	1	1	71
FTP Culturally Appropriate Services			1									1										2
OT / PT	2	1	3	4	1		1	1			1		2		7						1	24
Part C - Early Start / Early Intervention		1				26	1			2	1	4	1			3		7	8	1	16	71
Employment	6	4	4	1	4	3	3	4	2	6	1	1	9	1	7	3	2	2	9	8	9	89
Employment	4	1	1		1	1		1		1		1	1	1				2	1	1	2	17
Employment Discrimination: Firing						2	1	1		1	1		1			1				1	1	10
Employment Discrimination: General / Hiring	1	2	1		1				1	1		1	1						5	1	1	16
Employment Discrimination: Hiring		1			1		1			2					1				1			7
Employment Discrimination: Reasonable Accomodations									1						1	1	1		1	2		7
Regional Center - Supported Employment	1		2	1	1		1	1					6		5	1	1		1	1	2	24
State Disability Benefits			_				-												-		1	1
Vocational Rehabilitation Services																				1		1
Worker's Compensation								1		1				1						1	2	6
										· · · ·												

					Report I	by Probl	em Co	des														
	ARC	CVRC	ELARC	FNRC	GGRC	HRC	IRC	KRC	LRC	NBRC	NLARC	RCEB	RCOC	RCRC	SARC	SCLARC	SDRC	SGPRC	TCRC	VMRC	WRC	Total
Family	21	5	21	17	7	11	6	10	2	11	3	7	16	15	8	10	7	4	9	14	12	216
Child Support	2			1	1	1		1			1	1		1	1	1		1	1		2	15
Custody Issues											1											1
Dissolution / Annulment	1		3	1		2		3				1		1	1	1			1	-	1	16
Estate Planning			1			1			1	2		1	1				1			2	1	11
Guardianship of Minors	1	1	2		1	1				1				2						3		12
Other Family	10	4	5	4	3	4	2	3	1	3	1		6	6	3	2	2	1	6	2	3	71
Parental Rights	7		10	11	2	2	4	3		5		4	9	5	3	6	4	2	1	7	5	90
Finance	42	1	22	9	37	1	1	9	1	25	14	7	2	9	6	4	5	2	10	21	22	250
Debtor / Creditor Issues	8		7	5	30		1	1	1	13	6	3		3	3		3		6	7	7	104
Other Consumer Finance	32	1	10	4	3	1		4		4	6	2		6	2		2		3	6	5	91
Special Needs Trust	2		5		4			4		8	2	2	2		1	4		2	1	8	10	55
Health	21	7	32	8	20	22	14	17	13	12	9	29	13	11	19	11	14	7	22	21	36	358
CCS Eligibility				2		1	1		1			1	1								1	8
CCS Services	1			1		1		3			1	1			2	1					3	14
CCS Share of Cost					1																	1
Denial of Coverage					1	1	1			1			1	1						3		9
In Home Nursing	3		1		6		3	3		1				1	1		2			1	2	24
Medi-Cal Eligibility	1		8	2	2	6	4	1	6		6	6	2		2	3	5	1	9		8	72
Medi-Cal Services	3	2	7		1	8	4	5	2	3	1	6	4	3	3	6	4	1	1	2	12	78
Medi-Cal Share of Cost / Co-Payment		1	3			3			2			10			2		1	2	2	1	7	34
Medical Treatment	11	1	8	3	7	1	1	4	1	7	1	4	4	5	7	1	2	2	6	9	2	87
Medicare			1																			1
Other Health					1																	1
Private Insurance	2	3	4		1	1		1	1			1	1	1	2			1	4	5	1	29
Housing	35	13	20	60	17	4	4	13	2	7	10	10	13	19	25	13	5	1	24	12	17	324
Eviction					1										1							2
Housing Discrimination (Zoning / Covenants)		2	3	1					1	2		1	1		1	1	1		1	2	1	18
Landlord and Tenant Rights	28	6	8	50	7	1	4	7		2	7	5	7	11	5	8	1		5	7	12	181
Property Rights	1	2	1	6		1		4		1		1	1	2	1				3		1	25
Reasonable Accomodations	1	2	3		1			2	1	1			1		16		2	1	4		1	36
Section 8	5		3	2	3	2				1	2	2	3	5	1	1	1		8	1	1	41
Subsidized Housing			2	1	5						1	1		1		3			2	2	1	19
Zoning / Restrictive Covenants		1																	1			2
Immigration			6	1	1				1	3	2	2		1	1		6	3	3	2		32
Citizenship (Application / Interview)			3		1						1							1				6
Other Immigration			3	1					1	3	1	2		1	1		6	2	3	2		26

Office of Clients' Rights Advocacy Annual Report - July 1, 2008 through June 30, 2009 Report by Problem Codes

					Report	by Pro	blem Co	odes														
	ARC	CVRC	ELARC	FNRC	GGRC	HRC	IRC	KRC	LRC	NBRC	NLARC	RCEB	RCOC	RCRC	SARC	SCLARC	SDRC	SGPRC	TCRC	VMRC	WRC	Total
Income Maintenance	37	26	135	40	50	68	55	41	87	22	44	56	41	31	33	58	75	37	99	48	185	1268
AAP							1			1						2						3
Disability Benefits and Work			1																		6	7
IHSS Eligibility	7	2	16	4	1	10	13	5	31	4	5	6	4		1	8	14	11	15	1	21	179
IHSS Hours	9	2	18	6	1	19	5	9	12	3	7	9	18	1	3	24	9	6	8	5	11	185
IHSS Protective Supervision	5	2	8	5	2	1	11	3	4		2	4	2	2	8	3	5	1	4	2	25	99
IHSS Share of Cost	1		2	1		10	1		8	1		7	2						3		7	43
Income Maintenance	1	1	2		2	1	1		2				6	1	1		3	2	5	1	6	35
Other Income Programs		2	1	1	2	4	2		3		2	1	1	3	2	1	6		6	1	2	40
SSA - Child Benefits		1	6	1	1		2	1	7	1	3	4	1	2		1	2		8	5	10	56
SSI - Eligibilty	6	11	39	9	7	10	10	11	8	8	11	9	2	13	5	7	22	6	24	15	23	256
SSI - Other	6	3	18	10	14	12	3	6	6	2	8	7	4	8	5	7	4	9	18	7	45	202
SSI - Overpayment	2	2	24	3	20	1	6	6	6	3	5	9	1	1	7	5	10	2	6	11	29	159
SSI - Representative Payee											1				1				1			3
Welfare Reform																			1			1
Juvenile Dependency	3		2							1		1		1		1	2				2	13
Juvenile Dependency	3		2							1		1		1		1	2				2	13
Legal Referral	1					1										1		4	2			9
Civil (General)																		2				2
Criminal (General) - Rights																		1				1
Personal Injury	1															1		1	2			5
Small Claims						1																1
Legal Representation	5	8	1	17	6	5	4	4	4	27	8	10	17	9	7	7	5	14	14	3	13	188
Civil (General)	3	5	1	6	6	1				10	2	2	6	6	3		2	7	6		10	76
Criminal (General) - Rights		2		1		1	1	2		1	4	3	10	1	1	1	2		3			33
Personal Injury	1	1		3		2	3	2	4	15	2	5		2	3	6	1	6	3	3	3	65
Public Defender	1			7		1				1			1					1	2			14
Licensing	1									2	1					1			1			6
Community Care Facilities	1									2	1					1			1			6
Neglect	2		1		5	1						1					1		1			12
FTP Dietary Needs					1					1												1
FTP Medical Treatment					2																	2
FTP Mental Health Treatment						1																1
FTP Persoanl Care					1												1					2
FTP Personal Safety (Conditions in Institutions)					1																	1
Other Neglect	2		1									1							1			5
Placement	11	8	4	3	4	2	2	5		4	5	5	1	5	3	1	4		7	9	5	88
Childrens' Group Homes	1		1					1											2		1	6
Facility Conditions	1	2		3	1						1			2						3		13
Facility Evictions	2	2											1									5
FTP Community Residential Placement	1		1					1									1			4	1	9
Move from Institution to Community	3	1	1		1	2		2		3	3	4			2		2		3		1	28
			1	1	1		1		1		1			1					1	2		5
Support Services Needed for Placement					1		•															
Transfer of Prisoners to State Hospitals(PC §2684)					1		1															1
	2	1	1				•	1				1		2	1		1		2		2	1 13 8

Office of Clients' Rights Advocacy Annual Report - July 1, 2008 through June 30, 2009 Beport by Problem Codes

			Annu		ort - Ju	ly 1, 20	Rights Ac 08 throug blem Co	gh June)09												
	ARC	CVRC	ELARC	FNRC	GGRC	HRC	IRC	KRC	LRC	NBRC	NLARC	RCEB	RCOC	RCRC	SARC	SCLARC	SDRC	SGPRC	TCRC	VMRC	WRC	Total
Privacy/Personal Autonomy / Choices	66	10	9	9	33	2	8	15	2	25	2		12	16	12	11	12		9	64	3	320
Least Restrictive Environment		1																				1
Mail																			2			2
Other Privacy / Personal Autonomy / Choices	61	5	8	5	28	1	3	13	2	9	1			12	11	10	11		4	16	2	202
Personal Property	3	1			1					7			3	1		1	1		1	2	1	22
Privacy														1								1
Recovery of Personal Property		1	1					1		1				1	1					2		8
Rights of / Denial of Privacy - Association	1	1					2						7	1					1			13
Rights of / Denial of Privacy - Search and Seizure					1								1							1		3
Rights of / Denial of Recreation				3	3			1		2			1									10
Sexuality										2									1			4
Telephone		1		1		1	3			3												9
WIC §5325.1 Rights	1									1										43		45
Records			1	2		1		1		2		4	20		2		2		3	2		41
Access			1			1		1			1		18		2		1		1	1		27
Breach of Confidentiality				1								3	1						2			7
Denial of Access										2		1	1				1			1		6
Erroneous Information				1																		1
Regional Center Services	109	130	120	89	118	176	186	112	133	196	101	87	217	42	66	170	73	187	178	118	143	2751
Community Living Arrangements																						
	1	3	8	3	7	2	9	2		3	-	1	5		1	6	3	1	11	2	1	74
Family Support Services	4	1	13	3	7 6	2 19	9		11	33	3	7	22	4	1 4	9	2	1 1	1	7	1 14	177
Family Support Services Lanterman Act - Regional Center		1	-	7	6	19	9 1	3		-	3 18		22 1	4				-		7 1		177 51
Family Support Services Lanterman Act - Regional Center Licensed Residential Services	4	1	13				9		11	33	3	7	22			9	2	-	1	7		177 51 24
Family Support Services Lanterman Act - Regional Center Licensed Residential Services Regional Center - 6500	4	1 1 2	13 2	7 2	6	19 10	9 1 2		2	33 5	3 18 1	7	22 1 2	3	4	9 2	2	-	1 9 1	7 1 1	14	177 51 24 1
Family Support Services Lanterman Act - Regional Center Licensed Residential Services Regional Center - 6500 Regional Center - Assessment of Needs	4	1 1 2 2	13 2 3	7	6	19 10 20	9 1			33	3 18 1	7	22 1			9 2 35	2	-	1	7 1		177 51 24 1 168
Family Support Services Lanterman Act - Regional Center Licensed Residential Services Regional Center - 6500 Regional Center - Assessment of Needs Regional Center - Behavioral Services	4 1 5	1 1 2 2 1	13 2 3 1	7 2 5	6 1 2	19 10	9 1 2 18	3	2	33 5 2	3 18 1 4	7 2 5	22 1 2 2	3	4	9 2 35 2	2	1	1 9 1 7	7 1 1 24	14	177 51 24 1 168 7
Family Support Services Lanterman Act - Regional Center Licensed Residential Services Regional Center - 6500 Regional Center - Assessment of Needs Regional Center - Behavioral Services Regional Center - Case Management	4	1 1 2 2 1 2	13 2 3	7 2 5 2	6 1 2 6	19 10 20	9 1 2 18 13		2	33 5 2 20	3 18 1 4 24	7 2 5 9	22 1 2	3	4	9 2 35	2	-	1 9 1 7	7 1 1 24 5	14	177 51 24 1 168 7 160
Family Support Services Lanterman Act - Regional Center Licensed Residential Services Regional Center - 6500 Regional Center - Assessment of Needs Regional Center - Behavioral Services Regional Center - Case Management Regional Center - Coordination with County Mental Health	4 1 5	1 1 2 2 1	13 2 3 1 5	7 2 5 2 1	6 1 2	19 10 20	9 1 2 18	3 1 11	2 21 6	2 2 20 2	3 18 1 4 24	7 2 5	22 1 2 2 2	3	10	9 2 35 2	2	1	1 9 1 7	7 1 1 24 5 1	14	177 51 24 1 168 7 160 10
Family Support Services Lanterman Act - Regional Center Licensed Residential Services Regional Center - 6500 Regional Center - Assessment of Needs Regional Center - Behavioral Services Regional Center - Case Management Regional Center - Coordination with County Mental Health Regional Center - Crisis Services	4 1 5 5	1 1 2 2 1 2 1 2 1	13 2 3 1 5 4	7 2 5 2 1 1	6 1 2 6 3	19 10 20 3	9 1 2 18 13 1	3 1 11 11	2 21 6 2	33 5 2 20 20 2 1	3 18 1 4 24	7 2 5 9	22 1 2 2 2 9	2	4	9 2 35 2 21	2	2	1 9 1 7 14	7 1 24 5 1 1	14	177 51 24 1 168 7 160 10 21
Family Support Services Lanterman Act - Regional Center Licensed Residential Services Regional Center - 6500 Regional Center - Assessment of Needs Regional Center - Behavioral Services Regional Center - Case Management Regional Center - Coordination with County Mental Health Regional Center - Crisis Services Regional Center - Day Program, Training and Activity	4 1 5 5	1 1 2 2 1 2	13 2 3 1 5 4 4	7 2 5 2 1	6 1 2 6	19 10 20 3 3 14	9 1 2 18 13 1 1 2	3 1 11	2 21 6	33 5 2 20 20 2 1 10	3 18 1 4 24 24	7 2 5 9 1 7	22 1 2 2 2	3	10	9 2 35 2 21 14	2 2 7 7	2	1 9 1 7	7 1 1 24 5 1	14	177 51 24 1 168 7 160 10 21 111
Family Support Services Lanterman Act - Regional Center Licensed Residential Services Regional Center - 6500 Regional Center - Assessment of Needs Regional Center - Behavioral Services Regional Center - Case Management Regional Center - Coordination with County Mental Health Regional Center - Crisis Services Regional Center - Day Program, Training and Activity Regional Center - DDS Policies / Procedures	4 1 5 5	1 1 2 2 1 2 1 2 1	13 2 3 1 5 4	7 2 5 2 1 1	6 1 2 6 3	19 10 20 3 3 	9 1 2 18 13 1	3 1 11 11	2 21 6 2	33 5 2 20 20 2 1	3 18 1 4 24 24	7 2 5 9	22 1 2 2 2 9	2	10	9 2 35 2 21	2	1 2 2 2 1	1 9 1 7 14	7 1 24 5 1 1	14 14 1 5 6	177 51 24 1 68 7 160 10 21 111 42
Family Support Services Lanterman Act - Regional Center Licensed Residential Services Regional Center - 6500 Regional Center - Assessment of Needs Regional Center - Behavioral Services Regional Center - Case Management Regional Center - Coordination with County Mental Health Regional Center - Crisis Services Regional Center - Day Program, Training and Activity Regional Center - Day Ploicies / Procedures Regional Center - Early Start (Part C / Under Age 3)	4 1 5 5 1 2	1 1 2 2 1 2 1 2 1 2 2 1 2 2 1	13 2 3 1 5 4 4 4 2	7 2 5 2 1 1 10	6 1 2 6 3 3 14	19 10 20 3 3 14 4 4	9 1 2 18 18 13 1 1 2 2 14	3 1 11 11 3	2 21 6 2 2	33 5 2 20 20 2 1 10 6 1	3 18 1 4 24 24 2 1 1	7 2 5 9 1 7 4	22 1 2 2 2 9 4	3 2 1 5	10	9 2 35 2 21 14 2	2 2 7 7 6	1 2 2 1 2	1 9 1 7 14 3	7 1 24 5 1 1 6	14 14 1 1 5 6 6	177 51 24 1 168 7 160 10 21 111 42 10
Family Support Services Lanterman Act - Regional Center Licensed Residential Services Regional Center - 6500 Regional Center - Assessment of Needs Regional Center - Behavioral Services Regional Center - Case Management Regional Center - Coordination with County Mental Health Regional Center - Crisis Services Regional Center - Day Program, Training and Activity Regional Center - DDS Policies / Procedures Regional Center - Eligibility for Regional Center - Services	4 1 5 5 5 1 2 10	1 1 2 2 1 2 1 1 2 2 1 1 2 2 1 1 2 2 62	13 2 3 1 5 4 4 4 2 31	7 2 5 2 1 1 1 10 25	6 1 2 6 3 3 14 39	19 10 20 3 3 14 4 4 39	9 1 2 18 13 1 1 2 14 2 14	3 1 11 11 3 32	2 21 6 2 2 2 19	333 5 2 20 20 2 1 10 6 1 50	3 18 1 4 24 24 2 1 1	7 2 5 9 1 7 4 28	22 1 2 2 2 9 4 4 59	3 2 1 5 9	10 10 2 2 21	9 2 35 2 21 14 2 49	2 2 7 7 6 18	1 2 2 1 2 50	1 9 1 7 14 3 29	7 1 24 5 1 1	14 14 1 5 5 6 6 2 32	177 51 24 1 168 7 160 10 21 111 42 10 712
Family Support Services Lanterman Act - Regional Center Licensed Residential Services Regional Center - 6500 Regional Center - Assessment of Needs Regional Center - Behavioral Services Regional Center - Case Management Regional Center - Coordination with County Mental Health Regional Center - Crisis Services Regional Center - Day Program, Training and Activity Regional Center - DDS Policies / Procedures Regional Center - Early Start (Part C / Under Age 3) Regional Center - Fair Hearing Procedures (Information only; no	4 1 5 5 5 1 1 2 10 1	1 1 2 2 1 2 1 2 1 2 2 1 2 2 1	13 2 3 1 5 4 4 4 2	7 2 5 2 1 1 10	6 1 2 6 3 3 14	19 10 20 3 3 14 4 4	9 1 2 18 18 13 1 1 2 2 14	3 1 11 11 3	2 21 6 2 2 2 19 26	33 5 2 20 20 2 1 10 6 1	3 18 1 4 24 24 2 1 1	7 2 5 9 1 7 4	22 1 2 2 2 9 4	3 2 1 5	10	9 2 35 2 21 14 2 49 5	2 2 7 7 6	1 2 2 1 2	1 9 1 7 14 3 3 29 16	7 1 24 5 1 1 6	14 1 1 5 6 6 2 32 12	177 51 24 1 168 7 160 10 21 111 42 10 712 199
Family Support Services Lanterman Act - Regional Center Licensed Residential Services Regional Center - 6500 Regional Center - Assessment of Needs Regional Center - Behavioral Services Regional Center - Coordination with County Mental Health Regional Center - Coordination with County Mental Health Regional Center - Coordination with County Mental Health Regional Center - Day Program, Training and Activity Regional Center - DDS Policies / Procedures Regional Center - Early Start (Part C / Under Age 3) Regional Center - Fair Hearing Procedures (Information only; no r Regional Center - Independent Living Services	4 1 5 5 1 1 2 10 10 1 2	1 1 2 1 2 1 1 2 2 1 1 2 2 62 9 9	13 2 3 1 5 4 4 4 2 2 31 8	7 2 5 1 1 1 10 25 3	6 1 2 6 3 3 14 39 1	19 10 20 3 3 14 4 4 39 6	9 1 2 18 13 1 1 2 2 14 14 70 13	3 1 11 1 3 32 2	2 21 6 2 2 2 19 26 1	33 5 2 20 20 20 2 1 10 6 1 50 20	3 18 1 4 24 2 1 1 11 11	7 2 5 9 1 7 4 28 2 8 2	22 1 2 2 2 2 9 9 4 4 59 27	3 2 1 5 9 2	10 10 2 2 21 1	9 2 35 2 21 14 2 49 5 2	2 2 7 7 6 18 4	1 2 2 1 2 50 41	1 9 1 7 14 3 3 29 16 1	7 1 24 5 1 1 6 29	14 1 1 5 6 6 2 32 12 1	177 51 24 1 168 7 160 10 21 111 111 42 10 712 199 7
Family Support Services Lanterman Act - Regional Center Licensed Residential Services Regional Center - 6500 Regional Center - Assessment of Needs Regional Center - Behavioral Services Regional Center - Case Management Regional Center - Coordination with County Mental Health Regional Center - Coordination with County Mental Health Regional Center - Day Program, Training and Activity Regional Center - DDS Policies / Procedures Regional Center - Early Start (Part C / Under Age 3) Regional Center - Fair Hearing Procedures (Information only; no 1 Regional Center - Fair Hearing Procedures Regional Center - IPP (Development / Meeting / Compliance)	4 1 5 5 1 1 2 10 10 1 2 8	1 1 2 1 2 1 2 1 1 2 2 62 9 9	13 2 3 1 5 5 4 4 4 2 31 31 8 8 8	7 2 5 2 1 1 1 1 0 25 3 3 14	6 1 2 6 3 3 14 39	19 10 20 3 3 4 4 4 4 4 4 39 6	9 1 2 18 13 1 1 2 2 14 2 14 14 70 13 10	3 1 11 11 3 32 2 8	2 21 6 2 2 2 19 26 1 12	33 5 2 20 20 20 20 1 10 6 1 50 20 20 20	3 18 1 24 24 2 1 1 11 5	7 2 5 9 1 7 4 28 2 8	22 1 2 2 9 4 4 59 27 13	3 2 1 5 9	10 10 2 2 21 1 8	9 2 35 2 21 14 2 49 5 2 7	2 2 7 7 6 18 4 8	1 2 2 1 2 50 41 28	1 9 1 14 14 29 16 6 1 33	7 1 24 5 1 1 6	14 14 1 5 5 6 6 2 32 12 12 1 11	177 51 24 1 168 7 160 10 21 111 111 42 10 712 199 7 233
Family Support Services Lanterman Act - Regional Center Licensed Residential Services Regional Center - 6500 Regional Center - Assessment of Needs Regional Center - Behavioral Services Regional Center - Case Management Regional Center - Coordination with County Mental Health Regional Center - Coordination with County Mental Health Regional Center - Crisis Services Regional Center - Day Program, Training and Activity Regional Center - DDS Policies / Procedures Regional Center - Early Start (Part C / Under Age 3) Regional Center - Fair Hearing Procedures (Information only; no r Regional Center - Independent Living Services Regional Center - IPP (Development / Meeting / Compliance) Regional Center - IPP Implementation	4 1 5 5 5 1 1 2 10 10 1 2 8 8 2	1 1 2 1 2 1 2 1 2 2 1 2 2 6 2 9 9 9 5 5	13 2 3 1 5 5 4 4 4 2 31 8 8 8 1	7 2 5 2 1 1 10 25 3 3 14 7	6 1 2 6 3 3 14 14 14 1 1	19 10 20 3 3 4 4 4 39 6 6 4 3	9 1 2 18 13 1 1 2 2 14 2 14 70 13 13 13 13 14 10 4	3 1 11 1 3 32 2 2 8 8 2	2 21 6 2 2 2 2 2 19 26 1 12 3	33 5 2 20 20 2 1 10 6 6 1 50 20 20 20 2 4 3	3 18 1 4 24 2 1 1 1 1 1 5 2	7 2 5 9 1 7 4 28 2 8 8 4	22 1 2 2 9 4 4 59 27 13 3	3 2 1 5 9 2 4	10 10 2 2 21 1 1 8 8	9 2 35 2 21 14 49 5 2 7 7 3	2 2 7 7 6 6 18 4 8 3	1 2 2 1 2 50 41 2 8 1	1 9 1 14 14 3 3 29 16	7 1 24 5 1 1 6 29 29 4	14 14 1 5 5 6 6 2 32 12 1 11 11	$\begin{array}{r} 177\\ 51\\ 24\\ 1\\ 168\\ 7\\ 7\\ 160\\ 10\\ 21\\ 111\\ 42\\ 10\\ 712\\ 199\\ 7\\ 233\\ 64\\ \end{array}$
Family Support Services Lanterman Act - Regional Center Licensed Residential Services Regional Center - 6500 Regional Center - Assessment of Needs Regional Center - See Management Regional Center - Crisis Services Regional Center - Crisis Services Regional Center - Crisis Services Regional Center - Day Program, Training and Activity Regional Center - Dby Policies / Procedures Regional Center - Eligibility for Regional Center services Regional Center - Fair Hearing Procedures (Information only; no I Regional Center - Independent Living Services Regional Center - IPP (Development / Meeting / Compliance) Regional Center - IPP Implementation Regional Center - Other Regional Center Services	4 1 5 5 1 1 2 10 10 1 2 8	1 1 2 1 2 1 2 1 1 2 2 62 9 9	13 2 3 1 5 4 4 4 2 2 31 8 8 8 1 24	7 2 5 2 1 1 1 1 0 25 3 3 14	6 1 2 6 3 3 14 39 1	19 10 20 3 	9 1 2 18 13 13 1 1 2 2 14 14 70 13 	3 1 11 11 3 32 2 8	2 21 6 2 2 2 19 26 1 12	33 5 2 20 2 2 1 10 6 6 1 1 50 20 20 20 20 20 20 20 20 20 20 20 20 20	3 18 1 4 24 2 1 1 1 1 1 5 2	7 2 5 9 1 7 4 28 2 8	22 1 2 2 9 9 4 4 59 27 7 13 3 55	3 2 1 5 9 2	10 10 2 2 21 1 8	9 2 35 2 21 14 49 5 2 7 7 3 3	2 2 7 7 6 6 18 4 8 3 9	1 2 2 1 2 50 41 28	1 9 1 1 7 7 1 4 3 3 29 16 1 3 3 3 16 28	7 1 24 5 1 1 6 29 29 4 4	14 14 1 5 5 6 6 2 32 12 1 1 11 11 1 40	$\begin{array}{r} 177\\ 51\\ 24\\ 1\\ 168\\ 7\\ 7\\ 160\\ 10\\ 21\\ 111\\ 42\\ 10\\ 712\\ 199\\ 7\\ 233\\ 64\\ 529\\ \end{array}$
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Family Support Services Lanterman Act - Regional Center Licensed Residential Services Regional Center - 6500 Regional Center - Assessment of Needs Regional Center - Behavioral Services Regional Center - Case Management Regional Center - Coordination with County Mental Health Regional Center - Coordination with County Mental Health Regional Center - Day Program, Training and Activity Regional Center - Day Program, Training and Activity Regional Center - Early Start (Part C / Under Age 3) Regional Center - Fair Hearing Procedures (Information only; no r Regional Center - IPP (Development / Meeting / Compliance) Regional Center - IPP (Development / Meeting / Compliance) Regional Center - Prevention Services Regional Center - Prevention Services	4 1 5 5 5 1 1 2 10 10 1 2 8 8 2	1 1 2 1 2 1 2 1 2 2 1 2 2 6 2 9 9 9 5 5	13 2 3 1 5 4 4 4 2 2 31 8 8 8 1 24	7 2 5 2 1 1 10 25 3 3 14 7	6 1 2 6 3 3 14 14 14 1 1	19 10 20 3 	9 1 2 18 13 1 2 14 2 14 70 13 13 10 4 4 2	3 1 11 1 3 32 2 2 8 8 2	2 21 6 2 2 2 2 2 19 26 1 12 3	33 5 2 20 2 2 1 10 6 6 1 1 50 20 20 20 20 20 20 20 20 20 20 20 20 20	3 18 1 4 24 2 1 1 1 1 1 5 2	7 2 5 9 1 7 4 28 2 8 8 4	22 1 2 2 9 9 4 4 59 27 7 13 3 55	3 2 1 5 9 2 4	10 10 2 2 21 1 1 8 8	9 2 35 2 21 14 49 5 2 7 7 3 3	2 2 7 7 6 6 18 4 8 3 9	1 2 2 1 2 50 41 2 8 1	1 9 1 1 7 7 1 4 3 3 29 16 1 3 3 3 16 28	7 1 24 5 1 1 6 29 29 4 4	14 14 1 5 6 6 2 32 12 1 11 11 11 40	$\begin{array}{r} 177\\ 51\\ 24\\ 1\\ 1\\ 168\\ 7\\ 160\\ 21\\ 111\\ 42\\ 10\\ 712\\ 199\\ 7\\ 233\\ 64\\ 529\\ 30\\ 14\\ \end{array}$
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Office of Clients' Rights Advocacy Annual Report - July 1, 2008 through June 30, 2009 Report by Problem Codes

					Report	by inc		0003														
	ARC	CVRC	ELARC	FNRC	GGRC	HRC	IRC	KRC	LRC	NBRC	NLARC	RCEB	RCOC	RCRC	SARC	SCLARC	SDRC	SGPRC	TCRC	VMRC	WRC	Total
Right to Culturally Appropriate Services					1			1				1			1					3		7
Right to Culturally Appropriate Services					1			1				1			1					3		7
Right to Refuse Treatment		1				·		·		1						·				·	2	4
Involuntary Medication		1								1												2
Other Involuntary Treatment																					2	2
Vocational Rehabilitation Services								4		2	1			2	1	1	2					13
Vocational Rehabilitation Services								4		2	1			2	1	1	2					13
Grand Total	500	329	619	354	460	462	387	366	362	484	266	333	494	230	427	458	304	462	590	430	566	8883

Office of Clients' Rights Advocacy Annual Report - July 1, 2008 through June 30, 2009 Report by Service Level

			spon																		
	ARC	CVRC	ELARC	FNRC	GGRC	HRC	IRC	KRC	LRC	NBRC	NLARC	RCEB	RCOC	RCRC	SARC	SCLARC	SDRC	SGPRC	TCRC	VMRC	WRC
0 - Pending										3			1								
1 - Information/Referral	152	64	79	72	267	155	55	102	48	60	32	41	91	42	67	71	29	89	59	278	155
2 - Rights Information/Consultation (RC/Generic)	85	94	53	81	19	230	250	45	61	234	90	63	186	117	28	273	82	353	232	44	265
3 - Rights Information/Consultation (Other)	142	24	242	109	15	1	14	74	229	85	76	117	88	59	124	48	132	1	281	78	26
4 - Abuse/Neglect Investigation	15	6	4	2	2		1	3								1	2		1		
5 - Special Education Compliance Complaint	4	3	3	3			1	5				8	1	1	7	1	8			5	8
6 - IEP	5	34	23	23	9	2	2	10	1	7		3	14		72	10	10	3		1	7
7 - IPP/IDT	1	10		1	1	8	3	5		11	1		7	1	13			7			4
8 - W&I 4731	1	1					3	1		6	1		1			1	1		1		
9 - Technical Assistance	47	9	67	10	42	37	8	82	19	22	6	27	66	6	14	5	9	6	7	19	15
10 - Evaluation and Assessment	24	41	116	39	11	9	16	11	3	52	15	12	24	2	55	16	12	3	7	4	17
11 - Informal Regional Center / Provider Problem Resolution	10	19	3	5	26	3	18	20		2	27	26	5	1	14	19	3				19
12 - Informal Generic Service Agency Problem Resolution	3	21	9	3	63	6	7	5		2	9	31	2		30	11	7				35
13 - Case Settlement Prior to Informal Meeting, Mediation or Hearing			1	4		3	1								1		4				1
14 - Direct Representation in RC "Voluntary Informal Meeting"	1		4	1	1		1	1			2		5								4
15 - Direct Representation in Mediation / RC Fair Hearing	1	1	3		1	2	2		1		1		3		1		1				
16 - Direct Representation in an Appeal for Generic Services	7		12	1	3	6	5	2			6	5		1	1	2	3		2	1	9

Total
4
2008
2885
1965
37
58
236
73
17
523
489
220
244
15
20
17
66

ADVOCACY REPORT

OFFICE OF CLIENTS' RIGHTS ADVOCACY

Spring 2009

BENEFITS

J.I. Gets AAP Supplement Retroactive to July, 2007.

J.I. was adopted from foster care. His family receives Adoption Assistance Program (APP) funding. Due to his developmental disabilities, J.I.'s parents purchase many services and supports for him. His family found out about the AAP Supplement when the State Department of Social Services All-County Letter (ACL) was issued. The family immediately applied for the supplement.

Unfortunately, neither the regional center staff nor the post-adoptions workers in the Department of Children and Family Services (DCFS) had been fully trained in the process for completing the forms and there had been no response to J.I.'s request. J.I.'s father then contacted OCRA.

OCRA reviewed the instructions in the ACL with both the regional center and DCFS. The ACL said that DCFS should contact the regional center service coordinator, obtain information over the phone, complete the form, and then fax the form to the service coordinator to sign, insuring that the information is correct. DCFS then makes a determination regarding the amount of supplement for which the child qualifies (\$250.00, \$500.00, \$750.00, or \$1,000.00 per month) and sends the family a notice of action (NOA).

DCFS and regional center completed the forms after being contacted by OCRA, and DCFS awarded the full supplement of \$1,000.00 per month. J.I. was also eligible for retroactive payments back to August, 2007. Katie Hornberger, CRA, Harbor Regional Center.

Termination of Protective Supervision Reversed at Fair Hearing.

J.S. is 29-years old and has Fragile X syndrome. For the past five years, J.S. had been receiving 24-hour a day Supported Living Services (SLS) and was living in his own home. Prior to that J.S. had been living in an assisted living group home.

In addition to SLS, J.S. was receiving IHSS and protective supervision of 283 hours per month. Following J.S.'s annual review, the County determined that J.S. was no longer entitled to protective supervision, and issued a NOA decreasing his hours from 283 to 105.8. The County contended that J.S. was doing well and that there had been no problems, so he no longer needed protective supervision.

J.S. has a very active life style. He participates in many community activities, social, and recreational programs. The County apparently did not realize that J.S. always had 1:1 supervision, both in and out of the home. In spite of what the County characterized as "great emotional growth," J.S.'s successful life style was only possible with the SLS and the protective supervision he was receiving.

OCRA represented J.S. at hearing. The Administrative Law Judge (ALJ) found that the County's determination was only supported by the observations of the social worker during one short home visit. Her observations were contradicted by the medical professional's opinion regarding the need for protective supervision, and the observations of J.S.'s behavior over time by his SLS staff. The ALJ ruled that J.S. was entitled to keep protective supervision and 283 hours a month of IHSS. Andy Holcombe, CRA, Lorie Atamiam, Assistant CRA, Far Northern Regional Center.

Social Security Termination Successfully Appealed.

C.W. is 38-years-old and has worked part-time as a courtesy clerk for the local Safeway store for almost 20 years. He routinely sent his pay stubs to the Social Security Administration (SSA) at the end of each month. In late 2005, the SSA sent C.W. a notice stating his entitlement to disability insurance ended in 1997, due to his employment. C.W. was assessed an overpayment in excess of \$53,000.00. C.W.'s supported living worker contacted OCRA for assistance.

OCRA evaluated the circumstances of C.W.'s work and determined that he received supports necessary to keep him working, worked at a significantly slower pace, and performed substantially fewer tasks compared to other courtesy clerks. Unfortunately, the store manager, while agreeing with all the above, refused to testify or even provide a declaration to this effect.

One co-worker did agree to testify based on direct observation over two years as to a reduced range of responsibilities and slower work pace. A job coach provided a declaration. The supported living worker and regional center service coordinator testified at the hearing. OCRA also provided a brief in support of C.W.'s claim.

The hearing was held December 6, 2007, but was abruptly continued by the ALJ upon realizing more witnesses had yet to testify. In spite of requests for explanation of the delay, the hearing was not reconvened until December 7, 2008.

On March 25, 2009, the ALJ issued a "partially favorable" decision consisting of a remand back to the SSA to re-evaluate the question of gainful work but only counting half the total wages as earnings because of the special circumstances involved. The SSA issued a NOA in April, 2008, stating C.W.'s earnings had been reconsidered and it was found that his disability continued and payments would be restored. Doug Harris, CRA, Redwood Coast Regional Center.

State Hearing Filing Generates NOA Giving Consumer 195 Hours Of IHSS Services.

J.H. was receiving 29 hours per month of IHSS non-medical, personal care hours. The County conducted the annual in-home recertification for J.H. in November, 2008, at which J.H.'s parent requested protective supervision. The county mailed the parent forms to complete in late November. J.H.'s parent made the necessary appointment to complete the medical form and in early January, returned the completed forms along with additional information documenting J.H.'s unsafe behaviors. Despite repeated phone requests to the County, J.H.'s parent did not receive a NOA responding to her request for protective supervision. OCRA agreed to represent J.H. and filed a state hearing for failure to provide a NOA.

The County responded and J.H. was authorized an additional 166 hours per month for protective supervision. J.H. will now receive a total of 195 hours per month of IHSS. Christine Armand, Associate CRA, South Central Los Angeles Regional Center.

L.A. Is Now Eligible for SSI With \$16,000 In Retroactive Benefits.

L.A., is an infant with multiple disabilities, should have been eligible for Supplemental Social Security (SSI) under the listing for cerebral palsy. However, when his mother applied, she did not have all the necessary documentation. The SSA denied L.A.'s request for SSI.

OCRA agreed to represent L.A. at the hearing. OCRA gathered documents from California Children Services (CCS), the regional center and L.A.'s medical providers.

At the hearing, OCRA presented both oral and documentary evidence proving that L.A. fit the listing for cerebral palsy. The hearing decision was issued indicating that L.A. is eligible for SSI. Since L.A.'s initial application was done in October, 2007, L.A. will receive \$16,000.00 in retroactive benefits. Anastasia Bacigalupo, CRA, South Central Los Angeles Regional Center.

County Agrees to Rescind R.F.'s Medi-Cal Denial.

R.F. was denied Medi-Cal benefits after he failed to submit the requested documentation during the Medi-Cal application process. OCRA agreed to represent him after the County informed the ALJ that R.F. had agreed to a continuance when R.F. did not believe that he had. At the hearing, OCRA argued that the County should rescind its decision and re-open R.F.'s Medi-Cal application. The ALJ asked the County if it had complied with its own procedures, which require the County to notify a claimant by phone of the need to submit additional documentation. The County agreed it had not done this.

At the hearing, the County agreed to rescind the termination. The ALJ issued a written decision confirming the County's stipulation to rescind its denial and re-determine R.F.'s eligibility back to the original application date. With the assistance of OCRA, R.F. submitted all of the requested documentation. OCRA received written notice that R.F. is now eligible for the 250% working disabled Medi-Cal program back to his original application date. Kathy Mottarella, CRA, Gina Gheno, Assistant CRA, Tri-Counties Regional Center.

OCRA Successful with IHSS Appeal.

M.L.'s father contacted OCRA regarding issues he was having with M.L.'s IHSS. The father requested assistance with appealing the County's decision to award M.L. 52.3 hours per month of IHSS. M.L.'s parent also requested assistance obtaining protective supervision for his daughter as well.

OCRA contacted the County on M.L.'s behalf and negotiated a conditional withdrawal wherein the County agreed to reassess M.L. for protective supervision. After the reassessment, a new NOA was issued granting a total of 252.3 hours per month including protective supervision retroactive to October, 2008. M.L.'s parent recently reported that he received a check in the amount of \$12,331.83 in retroactive benefits. Ibrahim Saab, CRA, Ada Hamer, Assistant CRA, North Los Angeles County Regional Center.

A.S. Regains No-Share of Cost Medi-Cal.

A.S. is a 63-year old woman with cerebral palsy who receives Social Security benefits on her father's earnings record as a disabled adult child (DAC). OCRA was contacted by A.S.'s service coordinator because of concerns about A.S.'s extremely high Medi-Cal share of cost SOC). A.S. is currently living in a skilled nursing facility but would like to live more independently. Because A.S. is paying over \$600 a month in SOC, she did not have money to get her own apartment.

For several years, OCRA has worked hard to ensure that recipients of DAC benefits get the zero-SOC Medi-Cal to which they are

entitled. Under these rules, consumers who lose financial eligibility for SSI because of an increase in DAC are treated for Medi-Cal purposes as if they still receive SSI.

In this case, OCRA appealed the NOA assigning a SOC and was able to get the County to review A.S.'s file and correctly assign her Medi-cal with zero SOC without going to hearing. A.S. will now be able to move into a more independent living situation. Anna Leach-Proffer, CRA, Celeste Palmer, Associate CRA, Regional Center of the East Bay.

A.Z. Gets Correct Number of IHSS Hours

A.Z. has significant health impairments and is being raised by his 81year-old grandparents. An IHSS social worker assessed him and granted 100 hours of personal care services even though A.Z. needs total care in all areas. OCRA guided the family through the appeal, conditional withdrawal, and reassessment process. However, A.Z. was only given a small increase in hours.

OCRA gathered documentary medical evidence and family testimony that A.Z. required significantly more help. After two lengthy hearings, A.Z. prevailed and was awarded 223.8 hours per month in the areas of personal care, related, and paramedical services. Katie Meyer, CRA, Westside Regional Center

M.P. Secures Retroactive IHSS Funding.

M.P.'s mother requested an increase in IHSS hours for M.P. because he was convalescing at home after surgery. The request was verbally denied by the County. A written NOA was not issued. M.P.'s mother asked OCRA for assistance. OCRA filed for hearing. On the day of the hearing, the County agreed to do a reassessment. OCRA requested that the reassessment include consideration of retroactive protective supervision and an increase in the hours during the time that M.P. was convalescing at home. The reassessment increased the IHSS hours to 50.4 with no retroactive benefits.

At OCRA's request, the hearing was placed back on calendar. At the hearing, OCRA requested that the ALJ structure the proceedings to

consider dividing the fact-finding into three distinct time periods: the time prior to the convalescent period, the convalescent period and the post-convalescence period. The ALJ agreed and issued three separate decisions providing protective supervision before the convalescent period and afterward at the non-severe rate of 195 hours and provided for an increase in personal care during the convalescent period. Matthew M. Pope, CRA, Eastern Los Angeles Regional Center.

Home Visit by Advocate Ends Need for Hearing.

E.C. is a 5-year-old boy with autism. E.C.'s mother attended an OCRA outreach regarding SSI and IHSS and learned that it was possible to obtain Medi-Cal through the Home and Community Based Waiver (HCBW). E.C applied for the Waiver and was found eligible for full scope Medi-Cal. Mother understood that she could therefore apply for IHSS and did so. The County worker, and supervisor, denied the IHSS, stating that it was the mother's responsibility to care for a young child. The mother contacted OCRA for help with filing an appeal.

OCRA assisted the parent by helping her fill out an IHSS log and organize her information. OCRA was present for the County reassessment at E.C.'s home. During the County re-assessment, OCRA assisted the mother by ensuring that she voiced all her issues at the appropriate times as well as to offer guidance to the social worker when she seemed to be in doubt when appraising whether the issues were related to IHSS. The County issued a NOA providing for 195 IHSS hours which included protective supervision. Lucy Garcia, Assistant CRA, Eastern Los Angeles Regional Center.

\$99,146.75 SSI Overpayment Waived.

D.S. is diagnosed with mild developmental delays. He works as a bowling alley assistant with support from a job coach and co-workers. D.S. reported his income to the local SSA office every other week for many years. After 10 years, SSA notified D.S. that he had been overpaid almost \$100,000.

OCRA represented D.S. at the appeal and successfully argued that the overpayment was not the fault of D.S. and that collection of such an overpayment would be against equity and good conscience. Leinani Neves, CRA, Valley Mountain Regional Center.

I.M.'s SSI Re-instated after a Year in the Reconsideration Process.

In March, 2008, I.M. received an SSA NOA terminating SSI eligibility back to January, 2006, based on an assumption that I.M. had excessive income. SSI payments stopped in April, 2008.

OCRA conducted legal research, reviewed relevant records and agreed to provide legal representation in the reconsideration process. The Assistant CRA attended the informal meeting and submitted evidence of income to the SSA. Subsequently, I.M.'s appeal was dismissed by an ALJ due to the SSA's failure to issue a determination on the request for reconsideration. This ended I.M.'s appeal rights. After a year of OCRA's continuous letters to the SSA regarding its violations of I.M.'s appeal rights, her SSI was re-instated. Also, she received retroactive payments back to the termination date. Wendy Dumlao, CRA, Alba Gomez, Assistant CRA, San Diego Regional Center.

Termination of Protective Supervision Rescinded.

S.F.'s protective supervision services from IHSS were terminated. The NOA indicated that S.F.'s hours were reduced because S.F. had a parent provider. When the parent obtained the County's Position Statement, the parent learned that the County was terminating S.F.'s protective supervision because the social worker did not observe selfinjurious behaviors on her 40-minute home visit. OCRA assisted the parent with writing a position statement that addressed the improper notice, the improper procedure to reduce protective supervision hours, and the social worker and County actions that prevented S.F.'s parent from reviewing S.F.'s file and obtaining the evidence for hearing. After reviewing S.F.'s Position Statement, the County determined that S.F. did not need to proceed to hearing and reinstated S.F.'s protective supervision. Jacqueline Miller, CRA, Cynthia Salomon, Assistant CRA, Regional Center of Orange County.

ALJ grants 283 IHSS hours for A.C.

A.C. is a 10-year-old with cerebral palsy. In addition, he has a vision impairment and intellectual disabilities. A.C. lives with his parents. At school, A.C. requires 1:1 supervision because of his vision impairment and the likelihood of falling. Last year, A.C. fell at school and lost a tooth.

IHSS did not correctly calculate the hours needed by A.C. In addition, IHSS denied protective supervision hours. IHSS limited hours because a parent was present in the home. OCRA drafted a letter discussing the relevant law for the County. The letter explained that IHSS hours may be provided even if a parent is present, when a child is on the DDS waiver. The County did not respond to OCRA's letter. At hearing, the ALJ informed the County that the law supports providing IHSS hours even when a parent is present in the home. The worker agreed to re-calculate the hours and agreed to provide the maximum hours.

The only issue left for the ALJ to determine was whether the retroactive hours should go back a year. OCRA argued that the Medi-Cal rules allow retroactive payment for benefits back one year if: (1) services were rendered and (2) the beneficiary would have been eligible at that point. The ALJ decided that the retroactive hours should go back a year. Wendy Dumlao, CRA, Alba Gomez, Assistant CRA, San Diego Regional Center.

AAP Reinstates I.L.'s Dual Agency Rate.

I.L. lives in a foster family home and his care provider is his legal guardian. The County decreased I.L.'s AAP rate, because it was under the impression that I.L. was in an unlicensed, non-vendored facility. OCRA informed the guardian that the bed must be vendored by San Diego Regional Center to get the dual agency rate and provided I.L.'s guardian the laws and information to share with the County. AAP reviewed the information and agreed to settle the case outside of hearing and re-instate the dual agency rate for I.L. Wendy Dumlao, CRA, Alba Gomez, Assistant CRA, San Diego Regional Center.

OCRA Provides Technical Assistance in SSA Case.

With assistance from her caseworker, C.O.'s mother, who is monolingual-Cantonese speaking, contacted OCRA on C.O.'s behalf. C.O had received a notice for a reduction of her SSI. OCRA filled out the Request for Reconsideration and provided technical assistance to C.O's mother and caseworker.

C.O. then received notice that the Request for Reconsideration had been denied because SSA calculated that C.O. had not met her fair share of all household expenses for one month. OCRA called and explained to the SSA that C.O.'s mother had misunderstood and provided incorrect data that had led to the SSA's calculation. The SSA agreed to rescind the notice and the Request for Reconsideration was withdrawn. C.O.'s full benefit amount was restored. Katy Lusson, CRA, Amanda St. James, Assistant CRA, Golden Gate Regional Center.

S.L. Receives Rapid Response in SSI Case.

S.L. was denied her SSI benefits. OCRA believed S.L. was eligible on the basis of seizure disorder and mental retardation. OCRA also believed that benefits should be retroactive to February, 2007, when consumer applied.

OCRA provided direct representation at the SSI eligibility hearing. Less than a week after the hearing, OCRA was notified of a fully favorable decision. S.L. is eligible and will receive retroactive benefits. Arthur Lipscomb, CRA, Kay Spencer, Assistant CRA, Nate Navarro, Assistant CRA, Central Valley Regional Center.

S.M. Keeps IHSS with Both Parents Living in the Home.

S.M. is a 17-year old who is nonverbal, non-ambulatory, and requires physical assistance in all activities of daily living. S.M. has no conscious control over her muscles or body so she frequently flings her arms and legs and unknowingly pulls cords and tubes which sustain her life. Neither of S.M.'s parents works because it requires at least two people and sometimes three people to care for and protect S.M.

S.M. received a NOA from IHSS terminating her services because neither one of her parents work. An IHSS regulation prohibits payment to a parental caretaker when both are not employed. At the mother's request, OCRA represented S.M. at hearing. The ALJ found that the regulation is inconsistent with the statue for the IHSS program. Because S.M. requires the care of both parents, the regulation was found to be invalid. S.M. kept her IHSS hours. Jackie Coleman, CRA, Jacqueline Gallegos, Assistant CRA, Alta California Regional Center.

ALJ Rules from the Bench in SSI Eligibility Hearing.

W.B. is a 46-year-old man who recently became a regional center consumer. W.B. had been denied SSI prior to establishing his eligibility for regional center services. OCRA examined W.B.'s SSI records. His claim did not include any information about his cognitive deficits. The regional center psychologist agreed to do a thorough battery of assessments and to testify at the hearing.

At hearing, OCRA presented documentation regarding W.B.'s cognitive and functional deficits. The psychologist's testimony was persuasive. Additionally, OCRA showed that although the job record appeared to indicate that W.B. had worked in competitive employment, all of his jobs were either with family members or scaled back with considerable support.

Both the state's psychiatrist and vocational expert agreed that W.B. could not be employed as a result of his disability. Because drug and alcohol use were a presenting factor, the ALJ asked that W.B. agree to a date of onset after successfully completing rehab. W.B. agreed and the ALJ said that he would issue a fully-favorable decision. Katy Lusson, CRA, Amanda St. James, Assistant CRA, Golden Gate Regional Center.

IHSS Reinstates Protective Supervision Hours.

D.S. requires significant personal support services including feeding, bathing, and other personal care needs. In addition, due to D.S.'s significant self-injurious behaviors, he also requires protective

supervision. IHSS terminated the protective supervision, claiming that the record did not justify the need.

OCRA interviewed medical and clinical experts who work with D.S. to verify the need for protective supervision. Given D.S.'s profound developmental delays, he was not able to understand or appreciate dangers in the kitchen, bathroom, or public safety skills

After presenting updated records, medical reports, and other evidence to support D.S.'s need for protective supervision hours, OCRA worked carefully to develop the case and to prepare for an IHSS hearing. IHSS settled the case and agreed to reinstate the protective supervision hours prior to the hearing date. Leinani Neves, CRA, Filomena Alomar, Assistant CRA, Valley Mountain Regional Center.

J.T. Assessed for IHSS Services.

J.T. requires in-home assistance. However, his mother was told that J.T. could not receive IHSS due to property income levels being too high and because J.T. was not on the DD waiver. OCRA contacted the regional center and verified that J.T. was on the DD waiver. OCRA then spoke with the director of IHSS who also verified the information and sent J.T. an application for IHSS. After the assessment by the County, J.T. was granted 88 hours of IHSS. Rita Defilippis, CRA, Eleanor LoBue, Assistant ACRA, San Andreas Regional Center.

HOUSING

OCRA Demands Return of Security Deposit.

A.P. had moved and needed assistance because her landlord had not returned her security deposit. OCRA intervened on behalf of A.P. and sent a request to her landlord for the return of the security deposit. A.P.'s landlord subsequently mailed A.P. a check for her security deposit. Arthur Lipscomb, CRA, Kay Spencer, Assistant CRA, Nate Navarro, Assistant CRA, Central Valley Regional Center.

Eviction Notice Withdrawn Following OCRA Intervention.

K.O.'s rights were being denied because she was not allowed reasonable access to the telephone. OCRA investigated the complaint. After OCRA completed the investigation, the care home where K.O. lived issued an eviction notice. OCRA intervened on K.O.'s behalf and alleged that this was retaliatory eviction and unlawful. The care home agreed to withdraw the eviction notice. Arthur Lipscomb, CRA, Kay Spencer, Assistant CRA, Nate Navarro, Assistant CRA.

PERSONAL AUTONOMY

R.W. Gets His Wish.

R.W. is an adult who contacted OCRA for assistance in obtaining an appropriate placement. R.W. is currently living in a board and care and explained that he is not receiving the type of assistance he needs from staff. OCRA agreed to contact the regional center and home administrator and represent R.W. at a meeting to discuss placement. During the meeting, R.W. described the type of support he required from staff. The home administrator explained to R.W. that his current placement is a level 2 home and that the type of support R.W. was requesting was a level 3 home. Because of the long standing relationship between the home administrator and R.W., the home administrator offered R.W. a place in his level 3 home. R.W. agreed and requested that the regional center authorize this change in placement. The regional center staff presented the request to the placement committee and it was approved. R.W. will soon move to a placement which will better meet his needs. Veronica Cervantes, CRA, Beatriz A. Reyes, Assistant CRA, Inland Regional Center.

<u>R.H. Buys Home.</u>

R.H. is a single dad subsisting on SSI in a rental apartment. When R.H.'s father died leaving forty thousand dollars to R.H, he turned to OCRA for financial planning. Using summary probate, R.H. had the funds transferred into his name. R.H. is in the process of buying a

mobile home which will save R.H. hundreds of dollars in rent every month and allow him to continue his SSI benefits. Jim Stoepler, CRA, Redwood Coast Regional Center, Eureka and Ukiah.

A.W. Returns to His Home.

51-year-old A.W. had some medical problems and needed to be hospitalized. Unfortunately, the doctors recommended he be placed in a convalescent home instead of returning to his house where he had lived his whole life. Even though A.W. had some difficulty communicating, he was able to indicate excitement about the possibility of going home, which his older sister had been trying to arrange.

A.W. was not a regional center client even though he had cerebral palsy and mental retardation. The social worker at the home made the referral to the regional center and a service coordinator was assigned. The social worker felt A.W. should be able to go home with services in place. The doctor had a different opinion. He felt someone with disabilities as significant as A.W.'s should live in a facility. A.W.'s sister called OCRA for help.

OCRA met with A.W. and the convalescent home staff, and then called for an IPP meeting with the regional center at the home to discuss getting services in place. Since everyone but the doctor agreed on the goal of A.W. returning home, he was able to return home the next business day. The regional center agreed to fund a day program since he likes music and being around people. A.W.'s sister called IHSS to make sure a new IHSS assessment would take place. The physical therapist at the home had ordered A.W.'s new wheelchair, which would be ready soon. They also got him a specialized bed through Medi-Cal. The regional center will be providing case management to help meet the rest of his needs as they arise. Katie Meyer, CRA, Luisa Delgadillo, Assistant CRA, Westside Regional Center.

REGIONAL and DEVELOPMENTAL CENTERS

Service Coordinator Learns How to File a Complaint.

H.Z. needs wheelchair assistance when traveling to school. The school district repeatedly failed to provide a backup aide when H.Z.'s aide was not working, which resulted in H.Z not attending school. H.Z.'s mother, who speaks a Chinese dialect, complained to the school. The regional center service coordinator requested OCRA's assistance. After OCRA provided a brief training on how to file a special education compliance complaint, the service coordinator filed a complaint. The district was found to be out of compliance and was required to insure that a replacement aide was available for those times when the assigned aide was not at work. The district has now complied. The service coordinator was pleased to be able to advocate for the child and will continue to represent H.Z. at IEP meetings. Matt Pope, CRA, Eastern Los Angeles Regional Center.

R.H. Will Continue To Live With His Family.

R.H. requires total care in all activities of daily living and has significant inappropriate social behaviors. The regional center provided R.H. and his grandparents, whom he lives with, 60 hours of respite services, 39 hours of social recreation, and 152 additional lump sum respite hours per fiscal year. Due to R.H.'s grandmother's health concerns, R.H. was placed in an adult residential facility for 6 months. R.H. was unhappy at his placement and returned home after his grandmother's health improved. The regional center declined to reinstate the services R.H. had prior to placement and his grandmother contacted OCRA for assistance. The Assistant CRA agreed to provide direct representation after review of the case. At the informal meeting, the Assistant CRA negotiated the reinstatement of the 60 hours of respite and 40 hours of social recreation. However, the regional center denied the additional respite. The Assistant CRA represented at hearing and the ALJ ordered the regional center to reinstate the 152 lump sum respite hours. Due to the reinstatement of the previous services and supports, R.H. will continue to live with his family. Veronica Cervantes, CRA, Beatriz A. Reyes, Assistant CRA, Inland Regional Center.

M.B. Is Made Eligible for Regional Center Services.

M.B. is an adult woman who had her children taken away from her due to allegations of neglect. Her dependency court attorney asked the judge to order an evaluation of her functioning level. M.B. had never been evaluated before. She dropped out of school in 8th grade and married and began her family. She had not worked outside the home until after her children were removed.

The evaluation found that M.B. had a diagnosis of mental retardation. She applied for regional center eligibility and was denied by the regional center in whose catchment area she was living at the time.

She contacted OCRA two years later regarding services to help her comply with the requests of the court to avoid termination of parental rights. OCRA prepared a packet of materials to apply at regional center where she now lived. OCRA also sent a letter on her behalf to the Judge in her dependency matter asking that any hearing regarding termination of parental rights be stopped pending the eligibility determination by the regional center. The new regional center then assessed M.B. and found her eligible. M.B. is now getting the services and supports that she needs to comply with her court orders. Katie Hornberger, CRA, Abigail Perez, Assistant CRA, Harbor Regional.

Expert Witness Provides Free Assessment and Testimony.

E.P. received services from the Early Start Program but was found ineligible for regional center services after the age of three. He appealed the denial. At the informal meeting, E.P.'s mother and a psychologist, who was a fellow from a major hospital, were unsuccessful in persuading the regional center to reverse its decision. The psychologist had completed a comprehensive assessment that included multiple hours and multiple meetings with E.P. E.P. was referred to OCRA for assistance. The psychologist agreed to provide expert testimony at hearing with no charge to the family. From the expert's testimony, the ALJ determined that E.P. was eligible for regional center services. OCRA agreed it will provide outreach to families connected with the hospital where the psychologist works. Matt Pope, CRA, Lucy Garcia, Assistant CRA, Eastern Los Angeles Regional Center.

S.V.'s Regional Center Eligibility.

S.V. is a 12-year-old with mental retardation who had been denied regional center eligibility twice on the basis that he had mixed expressive/receptive disorder. S.V. qualified for special education services as a student with mental retardation from age 3. S.V.'s mother was confused by the regional center denials and the repeated statements by the school district that S.A. should be receiving regional center services.

Mother contacted OCRA. Based on a review of all S.V.'s documents, OCRA recommended a psychological assessment with a private psychologist for a determination of mental retardation. The psychologist assessed and diagnosed S.V. with mental retardation. OCRA submitted S.A.'s records to the regional center for a new eligibility determination. S.A. was made eligible for services. Anastasia Bacigalupo, CRA, South Central Los Angeles Regional Center.

OCRA Assists M.R. to Maintain Transportation Services.

The regional center decided to stop providing transportation services for M.R. to a neurologist in Ventura, who has been treating M.R. for epilepsy over the last 21 years. The regional center decided that there was no need to have M.R. travel to Ventura when she could be treated by a local neurologist. M.R. had been seen by two local neurologists in the past but the medical treatment they provided had a detrimental affect on her condition because they lacked an understanding of her medical fragility. OCRA assisted M.R. with requesting a continuation of these transportation services through the appeal process. OCRA sent a letter to M.R.'s doctor requesting a written explanation of the need for MR to travel to Ventura. M.R.'s neurologist in Ventura expressed concerns regarding the continuity of care for M.R.'s condition, especially since she had recently been started on a new drug and the neurologist felt responsible for monitoring how M.R. responds to the new medication. Moreover, M.R.'s neurologist also stated that a transfer of care to another

neurologist at the present time would be complicated. After this information was provided to the regional center, transportation services for M.R. were continued. Mario Espinoza, CRA, Valerie Geary, Assistant CRA, Kern Regional Center.

OCRA Assisted A.A. with Placement in a New Group Home.

A.A. is a 17-year-old client with autism who was given a 30-day notice of termination from his group home. The home claimed it could no longer meet A.A.'s needs. A.A.'s mother believed this action was retaliation on the part of the group home because she filed a complaint with the Department of Social Services citing concerns about A.A.'s health, including but not limited to, extreme weight loss and bruises on his body for extended periods of time. The investigation cleared the group home owner and staff of any wrong doing.

OCRA contacted the regional center to inquire about potential solutions to A.A.'s eviction. A.A.'s service coordinator began an immediate search for another group home that could meet all of A.A.'s needs. In the meantime, A.A.'s parents made a written request to the owner of his group home asking that he be allowed to stay until his 18th birthday in order to allow his service coordinator to find another group home. The group home owner agreed to extend A.A.'s placement until his 18th birthday under certain conditions. Simultaneously, A.A.'s service coordinator found another group home with which the parents were impressed. A.A.'s parents informed the regional center they wanted A.A. to be placed at the new group home because it was an adult facility and would help him reach new levels of growth. The regional center agreed to place A.A. in the new group home and approved a 1:1 aid for the first 30 days to assist A.A. with the transition. Mario Espinoza, CRA, Valerie Geary, Assistant CRA, Kern Regional Center.

G.R. Finally Moves from County Jail to Community Placement.

The public defender requested assistance from OCRA for a regional center client who had been in the county jail awaiting disposition of his case. The public defender previously requested that the regional center complete a psychological evaluation to determine competency.

The regional center informed the public defender that since the client's case had been closed it would not be doing the evaluation. As a result, the public defender obtained an independent psychological evaluation. With the client's consent, OCRA determined that G.R.'s regional center case had not been closed. OCRA requested an IPP meeting to plan for G.R.'s regional center services. At the IPP meeting, G.R. requested that the regional center assist him in obtaining regional center placement and services upon his release from jail. Shortly thereafter, G.R. was found incompetent to stand trial. As a result the regional center was ordered by the court to secure competency training. The regional center located a group home placement in the community for G.R. along with competency training from a community psychologist. G.R. was finally released from custody after spending 14 months in county jail. Kathy Mottarella, CRA, Gina Gheno, Assistant CRA, Tri-Counties Regional Center.

SPECIAL EDUCATION

C.M. Obtains Needed Speech Therapy.

C.M. is a 4 year-old-boy diagnosed with autism. For a year, C.M.'s mother thought her son was receiving speech therapy at school. During a classroom visit, C.M.'s mother realized that when other students in the classroom were pulled out for speech, C.M. was not. C.M.'s mother contacted OCRA for assistance in the implementation of speech therapy. The Assistant CRA agreed to review the IEP and a speech evaluation to confirm if a compliance complaint was warranted. C.M.'s mother is monolingual Spanish-speaking and misinterpreted her son's IEP that was written in English. Although speech therapy was not part of the IEP, C.M. clearly needed speech therapy according to the speech report. The Assistant CRA agreed to represent C.M. at an annual IEP meeting and advocate for speech therapy. At the IEP meeting, the school agreed to begin speech therapy immediately. Because the speech evaluation was not a current one, the school also agreed to conduct an evaluation during the extended school year so that C.M. could begin the new school

year with appropriate services. Veronica Cervantes, CRA, Beatriz A. Reyes, Assistant CRA, Inland Regional Center.

S.A. Receives Appropriate Individual Transition Plan Services.

S.A.'s parents contacted OCRA for special education assistance as they wanted S.A. to continue his education and be given opportunities for life skills training and community-based instruction with at least two academic or elective subjects provided in an integrated classroom setting.

In May, 2009, OCRA represented S.A. at his annual IEP meeting and subsequent Individual Transition Plan (ITP) meeting. As a result of OCRA representation, S.A. will participate during the next school year in an integrated classroom setting for a minimum of two periods per day which includes mathematics/pre-algebra concepts, and computer applications and keyboarding. He will participate in community based instruction for the remaining four periods per day, in the areas of money management, personal information and identification, functional reading and social skills training. The district also agreed to resume behavior services pursuant to S.A.'s existing behavior plan and to provide compensatory hours for the time period when service was not provided. S.A. will receive behavior modification training during the Extended School Year 2009 and school year 2009-10. Behavior services will be provided by a non-public agency (NPA) staff person(s) with established education and expertise in behavior intervention and modification training. Behavior training hours also include supervisory consultation hours and parent training. Christine Armand, Associate CRA, South Central Los Angeles Regional Center.

W.K. Obtains Two Hours Per Week of Individual Speech Therapy.

W.K. is a regional center consumer with autism. Despite the fact that the district identified that W.K. had multiple areas of need in speech including poor understanding of language and poor use of verbal and nonverbal language, the district continued to offer only one individual speech therapy session of thirty (30) minutes per week. After reviewing W.K.'s school records, including the most recent speech and language assessment, OCRA advised W.K.'s parents to request an independent educational evaluation in speech and language. The district's speech and language assessment contained limited standardized testing and inconsistencies within the assessment.

OCRA then represented W.K. at an IEP meeting to discuss the parents' concerns with the district's speech and language assessment and the inadequate offer of speech and language services. After hearing OCRA's presentation, the district offered two (2) hours per week of individual speech therapy through a non-public agency (NPA). Jackie S. Chiang, CRA, Guadalupe Marquez, Assistant CRA, Lanterman Regional Center.

Consumer Benefits from Assistive Technology.

B.R. is non-verbal and in high school. His mother purchased a communication device for B.R.'s use at home and had requested that the assistive technology be added to her son's IEP. The school district refused to include his communication device as a related service in his IEP on the basis that the school would be found liable should anything happen to it.

OCRA wrote a letter to the district on the client's behalf, requesting that the communication device be written into the IEP but that staff and B.R. receive training on its proper use. The district drafted an addendum IEP including the assistive technology as a related service and agreed to provide training to both B.R. and school staff. Rita Defilippis, CRA, Eleanor LoBue, Assistant CRA, San Andreas Regional Center.

Appropriate Transition Program Is Provided.

C.A. was attending a transition program. During 2008, an IEP meeting was held to discuss an appropriate transition program for C.A. At this meeting, C.A. signed his educational rights over to his father to help C.A. make decisions regarding his education.

A month later, after an altercation with C.A., the transition program teacher and the school psychologist held an IEP meeting with C.A. but without the other IEP team members. This meeting violated educational laws and a follow-up meeting was scheduled.

At the follow-up meeting, C.A. told the IEP team that he wants to be in school but not at his current program. C.A. was offered a program in another district where he is in the community 4 hours a day instead of 2 and was also offered vocational training at an auto shop. C.A. and his father agreed to the transfer in order for C.A. to receive the appropriate program. Wendy Dumlao, CRA, Alba Gomez, Assistant CRA, San Diego Regional Center.

CDE Orders Compensatory Education for V.D.

In 2008, V.D. transferred from out of state. When V.D. later transferred back to California, V.D. was placed in a special day class (SDC) without the district discussing program options with his mother. V.D. was receiving direct math and direct reading instruction daily and occupational therapy (OT) when he was out of state, but the district did not provide these services.

OCRA filed a compliance complaint on behalf of V.D. The complaint alleged that V.D. was not provided a comparable program when he transferred to California from out of state. CDE agreed and ordered compensatory education for (1) direct reading instruction; (2) direct math instruction; and (3) OT.

Subsequently, OCRA and the regional center were unable to locate an appropriate location to provide the compensatory services. The district agreed to provide \$2,500.00 to the mother to use for V.D.'s compensatory education, to which the mother agreed. Wendy Dumlao, CRA, Alba Gomez, Assistant CRA, San Diego Regional Center.

OCRA Prevails in Special Education Due Process Hearing.

OCRA was contacted because the school district wanted to force K.U. to change schools her senior year of high school. This meant K.U. would have to leave her mainstream classes and attend a SDC at a different school. She would not graduate with her friends.

OCRA provided direct representation at a four-day due process hearing and prevailed. K.U. will remain at her current school with her friends and will graduate with them as she always wanted. Arthur Lipscomb, CRA, Kay Spencer, Assistant CRA, Nate Navarro, Assistant CRA, Central Valley Regional Center.

Health Aide Retained.

M.D. is 10-years old and is attending a county school program. After agreeing to conduct an occupational therapy assessment, the district failed to do the assessment or develop an assessment plan. M.D.'s mother requested a follow-up IEP meeting to discuss this as well as her daughter's health needs. The district had suggested ending her daughter's 1:1 health aide support on the basis that M.D. has had no accidents or injuries that would compromise the effectiveness of her pacemaker.

The district failed to hold an IEP meeting within 30 days from the time of the mother's request and failed to notify the mother of the date and time of the meeting when it was finally schedule. OCRA wrote a compliance complaint on the parent's behalf to the California Department of Education (CDE). CDE found the district to be out of compliance requiring corrective action. OCRA also represented M.D. during an IEP meeting and obtained the continued services of a 1:1 health aide. Rita Defilippis, CRA, Eleanor LoBue, Assistant CRA, San Andreas Regional Center.

J.W. Receives 640 Minutes of Compensatory Speech and Language Therapy.

J.W.'s IEP called for speech therapy with use of a smart board. J.W.'s parents contacted OCRA because J.W. was not receiving the service. OCRA provided direct representation at IEPs where J.W.'s speech therapist admitted she did not have the proper equipment nor did she have the proper training for the smart board.

OCRA requested compensatory hours for the speech therapy sessions conducted by the therapist who was not providing services with the proper equipment. The school district agreed to provide J.W. with 640 minutes of compensatory speech and language services. Arthur Lipscomb, CRA, Kay Spencer, Assistant CRA, Nate Navarro, Assistant CRA, Central Valley Regional Center.

School Placement Developed after OCRA Intervention.

E.C. is a young boy with significant physical and cognitive impairments. OCRA was contacted by his social worker because E.C. was not enrolled in any school program. The school district said that it did not have an appropriate class and that the county class was not available.

OCRA spoke with the district representative several times. OCRA then received a call from E.C.'s social worker. EC's parents had been informed by the school district that there was now a new county class and that E.C. would be immediately enrolled. Katy Lusson, CRA, Amanda St. James, Assistant CRA, Golden Gate Regional Center.

School District Agrees to Assessment by School for the Blind.

B.S. is a teenager with a visual impairment. Her parents initially contacted OCRA with regard to problems B.S. was having at school regarding her aides. After reviewing the IEP, OCRA had additional concerns, and the parents requested representation at an IEP meeting. OCRA attended the IEP meeting and discussed the need for a comprehensive assessment from the State School for the Blind. The district agreed to the evaluation. Rita Defilippis, CRA, Eleanor LoBue, Assistant CRA, San Andreas Regional Center.

Student Receives Home/Hospital Instruction.

S.P.'s mother was extremely concerned because S.P. would not leave her bedroom due to her fragile emotional state. S.P.'s mother

felt it would be too traumatizing to force S.P. to go to school but did want some type of educational service for her. S.P.'s mother contacted OCRA for assistance. The CRA agreed to attend an IEP meeting with S.P.'s mother. As a result, S.P. is now receiving weekly Home/Hospital Instruction. Marisol Cruz, Assistant CRA, Aimee Delgado, CRA, San Gabriel/Pomona Regional Center.

Failure to Follow IEP Resolved.

N.W.'s mother contacted OCRA, concerned because the local school district had ignored some things in N.W.'s IEP. The mother had seen regression in N.W.'s speech and desire to attend school. His last IEP meeting had consisted of a 15-minute meeting without an administrator or the special education director present.

OCRA evaluated the IEP and assisted N.W.'s mother in constructing a list of concerns. This list was incorporated into an IEP request. At the IEP, OCRA presented N.W. and focused discussion on specifics required to address the concerns. The IEP that resulted was thorough with respect to the related services, including occupational therapy, behavior intervention, inclusion in the general education program, and the provision of speech therapy. N.W.'s mother reported a month later that the attitude of the school staff, N.W.'s performance, and his willingness to go to school have all vastly improved. Doug Harris, CRA, Redwood Coast Regional Center.

OUTREACH/TRAINING

Safety Training and Emergency Preparedness at Vine Village.

Vine Village is a day program for consumers in the Napa Valley. Each day, consumers work on art projects and personal goals that foster creativity and independence. OCRA has been providing selfadvocacy and rights training to consumers at Vine Village for many years.

On June 26, 2009, OCRA and the Peer Self-Advocacy Unit at Disability Rights California provided a newly developed training on "Personal Safety in an Emergency." OCRA staff provided resource information, material for emergency kits, a DVD titled "Feeling Safe/Being Safe" which was developed by the DDS Consumer Advisory Committee, and put on a skit related to safety awareness.

Consumers and staff also had a great time playing the new "Safety Bingo Game." Prizes included small flashlights, toothpaste and toothbrush, comb and brush, socks, small food items, and band-aids for the emergency kits. The favorable response to the new training demonstrates that being safe really can be fun. Yulahlia Hernandez, CRA, Trina Saldana, Assistant CRA, North Bay Regional Center, Daniel Meadows, DDPSAU, Gail Gresham, Supervising CRA, Sacramento.

ADVOCACY REPORT

OFFICE OF CLIENTS' RIGHTS ADVOCACY

Summer 2009

BENEFITS

J.I. Gets AAP Supplement Retroactive to July, 2007.

J.I. was adopted from foster care. His family receives Adoption Assistance Program (APP) funding. Due to his developmental disabilities, J.I.'s parents purchase many services and supports for him. His family found out about the AAP Supplement when the State Department of Social Services All-County Letter (ACL) was issued. The family immediately applied for the supplement.

Unfortunately, neither the regional center staff nor the post-adoptions workers in the Department of Children and Family Services (DCFS) had been fully trained in the process for completing the forms and there had been no response to J.I.'s request. J.I.'s father then contacted OCRA.

OCRA reviewed the instructions in the ACL with both the regional center and DCFS. The ACL said that DCFS should contact the regional center service coordinator, obtain information over the phone, complete the form, and then fax the form to the service coordinator to sign, insuring that the information is correct. DCFS then makes a determination regarding the amount of supplement for which the child qualifies (\$250.00, \$500.00, \$750.00, or \$1,000.00 per month) and sends the family a notice of action (NOA).

DCFS and regional center completed the forms after being contacted by OCRA, and DCFS awarded the full supplement of \$1,000.00 per month. J.I. was also eligible for retroactive payments back to August, 2007. Katie Hornberger, CRA, Harbor Regional Center.

Termination of Protective Supervision Reversed at Fair Hearing.

J.S. is 29-years old and has Fragile X syndrome. For the past five years, J.S. had been receiving 24-hour a day Supported Living Services (SLS) and was living in his own home. Prior to that J.S. had been living in an assisted living group home.

In addition to SLS, J.S. was receiving IHSS and protective supervision of 283 hours per month. Following J.S.'s annual review, the County determined that J.S. was no longer entitled to protective supervision, and issued a NOA decreasing his hours from 283 to 105.8. The County contended that J.S. was doing well and that there had been no problems, so he no longer needed protective supervision.

J.S. has a very active life style. He participates in many community activities, social, and recreational programs. The County apparently did not realize that J.S. always had 1:1 supervision, both in and out of the home. In spite of what the County characterized as "great emotional growth," J.S.'s successful life style was only possible with the SLS and the protective supervision he was receiving.

OCRA represented J.S. at hearing. The Administrative Law Judge (ALJ) found that the County's determination was only supported by the observations of the social worker during one short home visit. Her observations were contradicted by the medical professional's opinion regarding the need for protective supervision, and the observations of J.S.'s behavior over time by his SLS staff. The ALJ ruled that J.S. was entitled to keep protective supervision and 283 hours a month of IHSS. Andy Holcombe, CRA, Lorie Atamiam, Assistant CRA, Far Northern Regional Center.

Social Security Termination Successfully Appealed.

C.W. is 38-years-old and has worked part-time as a courtesy clerk for the local Safeway store for almost 20 years. He routinely sent his pay stubs to the Social Security Administration (SSA) at the end of each month. In late 2005, the SSA sent C.W. a notice stating his entitlement to disability insurance ended in 1997, due to his employment. C.W. was assessed an overpayment in excess of \$53,000.00. C.W.'s supported living worker contacted OCRA for assistance.

OCRA evaluated the circumstances of C.W.'s work and determined that he received supports necessary to keep him working, worked at a significantly slower pace, and performed substantially fewer tasks compared to other courtesy clerks. Unfortunately, the store manager, while agreeing with all the above, refused to testify or even provide a declaration to this effect.

One co-worker did agree to testify based on direct observation over two years as to a reduced range of responsibilities and slower work pace. A job coach provided a declaration. The supported living worker and regional center service coordinator testified at the hearing. OCRA also provided a brief in support of C.W.'s claim.

The hearing was held December 6, 2007, but was abruptly continued by the ALJ upon realizing more witnesses had yet to testify. In spite of requests for explanation of the delay, the hearing was not reconvened until December 7, 2008.

On March 25, 2009, the ALJ issued a "partially favorable" decision consisting of a remand back to the SSA to re-evaluate the question of gainful work but only counting half the total wages as earnings because of the special circumstances involved. The SSA issued a NOA in April, 2008, stating C.W.'s earnings had been reconsidered and it was found that his disability continued and payments would be restored. Doug Harris, CRA, Redwood Coast Regional Center.

State Hearing Filing Generates NOA Giving Consumer 195 Hours Of IHSS Services.

J.H. was receiving 29 hours per month of IHSS non-medical, personal care hours. The County conducted the annual in-home recertification for J.H. in November, 2008, at which J.H.'s parent requested protective supervision. The county mailed the parent forms to complete in late November. J.H.'s parent made the necessary appointment to complete the medical form and in early January, returned the completed forms along with additional information documenting J.H.'s unsafe behaviors. Despite repeated phone requests to the County, J.H.'s parent did not receive a NOA responding to her request for protective supervision. OCRA agreed to represent J.H. and filed a state hearing for failure to provide a NOA.

The County responded and J.H. was authorized an additional 166 hours per month for protective supervision. J.H. will now receive a total of 195 hours per month of IHSS. Christine Armand, Associate CRA, South Central Los Angeles Regional Center.

L.A. Is Now Eligible for SSI With \$16,000 In Retroactive Benefits.

L.A., is an infant with multiple disabilities, should have been eligible for Supplemental Social Security (SSI) under the listing for cerebral palsy. However, when his mother applied, she did not have all the necessary documentation. The SSA denied L.A.'s request for SSI.

OCRA agreed to represent L.A. at the hearing. OCRA gathered documents from California Children Services (CCS), the regional center and L.A.'s medical providers.

At the hearing, OCRA presented both oral and documentary evidence proving that L.A. fit the listing for cerebral palsy. The hearing decision was issued indicating that L.A. is eligible for SSI. Since L.A.'s initial application was done in October, 2007, L.A. will receive \$16,000.00 in retroactive benefits. Anastasia Bacigalupo, CRA, South Central Los Angeles Regional Center.

County Agrees to Rescind R.F.'s Medi-Cal Denial.

R.F. was denied Medi-Cal benefits after he failed to submit the requested documentation during the Medi-Cal application process. OCRA agreed to represent him after the County informed the ALJ that R.F. had agreed to a continuance when R.F. did not believe that he had. At the hearing, OCRA argued that the County should rescind its decision and re-open R.F.'s Medi-Cal application. The ALJ asked the County if it had complied with its own procedures, which require the County to notify a claimant by phone of the need to submit additional documentation. The County agreed it had not done this.

At the hearing, the County agreed to rescind the termination. The ALJ issued a written decision confirming the County's stipulation to rescind its denial and re-determine R.F.'s eligibility back to the original application date. With the assistance of OCRA, R.F. submitted all of the requested documentation. OCRA received written notice that R.F. is now eligible for the 250% working disabled Medi-Cal program back to his original application date. Kathy Mottarella, CRA, Gina Gheno, Assistant CRA, Tri-Counties Regional Center.

OCRA Successful with IHSS Appeal.

M.L.'s father contacted OCRA regarding issues he was having with M.L.'s IHSS. The father requested assistance with appealing the County's decision to award M.L. 52.3 hours per month of IHSS. M.L.'s parent also requested assistance obtaining protective supervision for his daughter as well.

OCRA contacted the County on M.L.'s behalf and negotiated a conditional withdrawal wherein the County agreed to reassess M.L. for protective supervision. After the reassessment, a new NOA was issued granting a total of 252.3 hours per month including protective supervision retroactive to October, 2008. M.L.'s parent recently reported that he received a check in the amount of \$12,331.83 in retroactive benefits. Ibrahim Saab, CRA, Ada Hamer, Assistant CRA, North Los Angeles County Regional Center.

A.S. Regains No-Share of Cost Medi-Cal.

A.S. is a 63-year old woman with cerebral palsy who receives Social Security benefits on her father's earnings record as a disabled adult child (DAC). OCRA was contacted by A.S.'s service coordinator because of concerns about A.S.'s extremely high Medi-Cal share of cost SOC). A.S. is currently living in a skilled nursing facility but would like to live more independently. Because A.S. is paying over \$600 a month in SOC, she did not have money to get her own apartment.

For several years, OCRA has worked hard to ensure that recipients of DAC benefits get the zero-SOC Medi-Cal to which they are

entitled. Under these rules, consumers who lose financial eligibility for SSI because of an increase in DAC are treated for Medi-Cal purposes as if they still receive SSI.

In this case, OCRA appealed the NOA assigning a SOC and was able to get the County to review A.S.'s file and correctly assign her Medi-cal with zero SOC without going to hearing. A.S. will now be able to move into a more independent living situation. Anna Leach-Proffer, CRA, Celeste Palmer, Associate CRA, Regional Center of the East Bay.

A.Z. Gets Correct Number of IHSS Hours

A.Z. has significant health impairments and is being raised by his 81year-old grandparents. An IHSS social worker assessed him and granted 100 hours of personal care services even though A.Z. needs total care in all areas. OCRA guided the family through the appeal, conditional withdrawal, and reassessment process. However, A.Z. was only given a small increase in hours.

OCRA gathered documentary medical evidence and family testimony that A.Z. required significantly more help. After two lengthy hearings, A.Z. prevailed and was awarded 223.8 hours per month in the areas of personal care, related, and paramedical services. Katie Meyer, CRA, Westside Regional Center

M.P. Secures Retroactive IHSS Funding.

M.P.'s mother requested an increase in IHSS hours for M.P. because he was convalescing at home after surgery. The request was verbally denied by the County. A written NOA was not issued. M.P.'s mother asked OCRA for assistance. OCRA filed for hearing. On the day of the hearing, the County agreed to do a reassessment. OCRA requested that the reassessment include consideration of retroactive protective supervision and an increase in the hours during the time that M.P. was convalescing at home. The reassessment increased the IHSS hours to 50.4 with no retroactive benefits.

At OCRA's request, the hearing was placed back on calendar. At the hearing, OCRA requested that the ALJ structure the proceedings to

consider dividing the fact-finding into three distinct time periods: the time prior to the convalescent period, the convalescent period and the post-convalescence period. The ALJ agreed and issued three separate decisions providing protective supervision before the convalescent period and afterward at the non-severe rate of 195 hours and provided for an increase in personal care during the convalescent period. Matthew M. Pope, CRA, Eastern Los Angeles Regional Center.

Home Visit by Advocate Ends Need for Hearing.

E.C. is a 5-year-old boy with autism. E.C.'s mother attended an OCRA outreach regarding SSI and IHSS and learned that it was possible to obtain Medi-Cal through the Home and Community Based Waiver (HCBW). E.C applied for the Waiver and was found eligible for full scope Medi-Cal. Mother understood that she could therefore apply for IHSS and did so. The County worker, and supervisor, denied the IHSS, stating that it was the mother's responsibility to care for a young child. The mother contacted OCRA for help with filing an appeal.

OCRA assisted the parent by helping her fill out an IHSS log and organize her information. OCRA was present for the County reassessment at E.C.'s home. During the County re-assessment, OCRA assisted the mother by ensuring that she voiced all her issues at the appropriate times as well as to offer guidance to the social worker when she seemed to be in doubt when appraising whether the issues were related to IHSS. The County issued a NOA providing for 195 IHSS hours which included protective supervision. Lucy Garcia, Assistant CRA, Eastern Los Angeles Regional Center.

\$99,146.75 SSI Overpayment Waived.

D.S. is diagnosed with mild developmental delays. He works as a bowling alley assistant with support from a job coach and co-workers. D.S. reported his income to the local SSA office every other week for many years. After 10 years, SSA notified D.S. that he had been overpaid almost \$100,000.

OCRA represented D.S. at the appeal and successfully argued that the overpayment was not the fault of D.S. and that collection of such an overpayment would be against equity and good conscience. Leinani Neves, CRA, Valley Mountain Regional Center.

I.M.'s SSI Re-instated after a Year in the Reconsideration Process.

In March, 2008, I.M. received an SSA NOA terminating SSI eligibility back to January, 2006, based on an assumption that I.M. had excessive income. SSI payments stopped in April, 2008.

OCRA conducted legal research, reviewed relevant records and agreed to provide legal representation in the reconsideration process. The Assistant CRA attended the informal meeting and submitted evidence of income to the SSA. Subsequently, I.M.'s appeal was dismissed by an ALJ due to the SSA's failure to issue a determination on the request for reconsideration. This ended I.M.'s appeal rights. After a year of OCRA's continuous letters to the SSA regarding its violations of I.M.'s appeal rights, her SSI was re-instated. Also, she received retroactive payments back to the termination date. Wendy Dumlao, CRA, Alba Gomez, Assistant CRA, San Diego Regional Center.

Termination of Protective Supervision Rescinded.

S.F.'s protective supervision services from IHSS were terminated. The NOA indicated that S.F.'s hours were reduced because S.F. had a parent provider. When the parent obtained the County's Position Statement, the parent learned that the County was terminating S.F.'s protective supervision because the social worker did not observe selfinjurious behaviors on her 40-minute home visit. OCRA assisted the parent with writing a position statement that addressed the improper notice, the improper procedure to reduce protective supervision hours, and the social worker and County actions that prevented S.F.'s parent from reviewing S.F.'s file and obtaining the evidence for hearing. After reviewing S.F.'s Position Statement, the County determined that S.F. did not need to proceed to hearing and reinstated S.F.'s protective supervision. Jacqueline Miller, CRA, Cynthia Salomon, Assistant CRA, Regional Center of Orange County.

ALJ grants 283 IHSS hours for A.C.

A.C. is a 10-year-old with cerebral palsy. In addition, he has a vision impairment and intellectual disabilities. A.C. lives with his parents. At school, A.C. requires 1:1 supervision because of his vision impairment and the likelihood of falling. Last year, A.C. fell at school and lost a tooth.

IHSS did not correctly calculate the hours needed by A.C. In addition, IHSS denied protective supervision hours. IHSS limited hours because a parent was present in the home. OCRA drafted a letter discussing the relevant law for the County. The letter explained that IHSS hours may be provided even if a parent is present, when a child is on the DDS waiver. The County did not respond to OCRA's letter. At hearing, the ALJ informed the County that the law supports providing IHSS hours even when a parent is present in the home. The worker agreed to re-calculate the hours and agreed to provide the maximum hours.

The only issue left for the ALJ to determine was whether the retroactive hours should go back a year. OCRA argued that the Medi-Cal rules allow retroactive payment for benefits back one year if: (1) services were rendered and (2) the beneficiary would have been eligible at that point. The ALJ decided that the retroactive hours should go back a year. Wendy Dumlao, CRA, Alba Gomez, Assistant CRA, San Diego Regional Center.

AAP Reinstates I.L.'s Dual Agency Rate.

I.L. lives in a foster family home and his care provider is his legal guardian. The County decreased I.L.'s AAP rate, because it was under the impression that I.L. was in an unlicensed, non-vendored facility. OCRA informed the guardian that the bed must be vendored by San Diego Regional Center to get the dual agency rate and provided I.L.'s guardian the laws and information to share with the County. AAP reviewed the information and agreed to settle the case outside of hearing and re-instate the dual agency rate for I.L. Wendy Dumlao, CRA, Alba Gomez, Assistant CRA, San Diego Regional Center.

OCRA Provides Technical Assistance in SSA Case.

With assistance from her caseworker, C.O.'s mother, who is monolingual-Cantonese speaking, contacted OCRA on C.O.'s behalf. C.O had received a notice for a reduction of her SSI. OCRA filled out the Request for Reconsideration and provided technical assistance to C.O's mother and caseworker.

C.O. then received notice that the Request for Reconsideration had been denied because SSA calculated that C.O. had not met her fair share of all household expenses for one month. OCRA called and explained to the SSA that C.O.'s mother had misunderstood and provided incorrect data that had led to the SSA's calculation. The SSA agreed to rescind the notice and the Request for Reconsideration was withdrawn. C.O.'s full benefit amount was restored. Katy Lusson, CRA, Amanda St. James, Assistant CRA, Golden Gate Regional Center.

S.L. Receives Rapid Response in SSI Case.

S.L. was denied her SSI benefits. OCRA believed S.L. was eligible on the basis of seizure disorder and mental retardation. OCRA also believed that benefits should be retroactive to February, 2007, when consumer applied.

OCRA provided direct representation at the SSI eligibility hearing. Less than a week after the hearing, OCRA was notified of a fully favorable decision. S.L. is eligible and will receive retroactive benefits. Arthur Lipscomb, CRA, Kay Spencer, Assistant CRA, Nate Navarro, Assistant CRA, Central Valley Regional Center.

S.M. Keeps IHSS with Both Parents Living in the Home.

S.M. is a 17-year old who is nonverbal, non-ambulatory, and requires physical assistance in all activities of daily living. S.M. has no conscious control over her muscles or body so she frequently flings her arms and legs and unknowingly pulls cords and tubes which sustain her life. Neither of S.M.'s parents works because it requires at least two people and sometimes three people to care for and protect S.M.

S.M. received a NOA from IHSS terminating her services because neither one of her parents work. An IHSS regulation prohibits payment to a parental caretaker when both are not employed. At the mother's request, OCRA represented S.M. at hearing. The ALJ found that the regulation is inconsistent with the statue for the IHSS program. Because S.M. requires the care of both parents, the regulation was found to be invalid. S.M. kept her IHSS hours. Jackie Coleman, CRA, Jacqueline Gallegos, Assistant CRA, Alta California Regional Center.

ALJ Rules from the Bench in SSI Eligibility Hearing.

W.B. is a 46-year-old man who recently became a regional center consumer. W.B. had been denied SSI prior to establishing his eligibility for regional center services. OCRA examined W.B.'s SSI records. His claim did not include any information about his cognitive deficits. The regional center psychologist agreed to do a thorough battery of assessments and to testify at the hearing.

At hearing, OCRA presented documentation regarding W.B.'s cognitive and functional deficits. The psychologist's testimony was persuasive. Additionally, OCRA showed that although the job record appeared to indicate that W.B. had worked in competitive employment, all of his jobs were either with family members or scaled back with considerable support.

Both the state's psychiatrist and vocational expert agreed that W.B. could not be employed as a result of his disability. Because drug and alcohol use were a presenting factor, the ALJ asked that W.B. agree to a date of onset after successfully completing rehab. W.B. agreed and the ALJ said that he would issue a fully-favorable decision. Katy Lusson, CRA, Amanda St. James, Assistant CRA, Golden Gate Regional Center.

IHSS Reinstates Protective Supervision Hours.

D.S. requires significant personal support services including feeding, bathing, and other personal care needs. In addition, due to D.S.'s significant self-injurious behaviors, he also requires protective

supervision. IHSS terminated the protective supervision, claiming that the record did not justify the need.

OCRA interviewed medical and clinical experts who work with D.S. to verify the need for protective supervision. Given D.S.'s profound developmental delays, he was not able to understand or appreciate dangers in the kitchen, bathroom, or public safety skills

After presenting updated records, medical reports, and other evidence to support D.S.'s need for protective supervision hours, OCRA worked carefully to develop the case and to prepare for an IHSS hearing. IHSS settled the case and agreed to reinstate the protective supervision hours prior to the hearing date. Leinani Neves, CRA, Filomena Alomar, Assistant CRA, Valley Mountain Regional Center.

J.T. Assessed for IHSS Services.

J.T. requires in-home assistance. However, his mother was told that J.T. could not receive IHSS due to property income levels being too high and because J.T. was not on the DD waiver. OCRA contacted the regional center and verified that J.T. was on the DD waiver. OCRA then spoke with the director of IHSS who also verified the information and sent J.T. an application for IHSS. After the assessment by the County, J.T. was granted 88 hours of IHSS. Rita Defilippis, CRA, Eleanor LoBue, Assistant ACRA, San Andreas Regional Center.

HOUSING

OCRA Demands Return of Security Deposit.

A.P. had moved and needed assistance because her landlord had not returned her security deposit. OCRA intervened on behalf of A.P. and sent a request to her landlord for the return of the security deposit. A.P.'s landlord subsequently mailed A.P. a check for her security deposit. Arthur Lipscomb, CRA, Kay Spencer, Assistant CRA, Nate Navarro, Assistant CRA, Central Valley Regional Center.

Eviction Notice Withdrawn Following OCRA Intervention.

K.O.'s rights were being denied because she was not allowed reasonable access to the telephone. OCRA investigated the complaint. After OCRA completed the investigation, the care home where K.O. lived issued an eviction notice. OCRA intervened on K.O.'s behalf and alleged that this was retaliatory eviction and unlawful. The care home agreed to withdraw the eviction notice. Arthur Lipscomb, CRA, Kay Spencer, Assistant CRA, Nate Navarro, Assistant CRA.

PERSONAL AUTONOMY

R.W. Gets His Wish.

R.W. is an adult who contacted OCRA for assistance in obtaining an appropriate placement. R.W. is currently living in a board and care and explained that he is not receiving the type of assistance he needs from staff. OCRA agreed to contact the regional center and home administrator and represent R.W. at a meeting to discuss placement. During the meeting, R.W. described the type of support he required from staff. The home administrator explained to R.W. that his current placement is a level 2 home and that the type of support R.W. was requesting was a level 3 home. Because of the long standing relationship between the home administrator and R.W., the home administrator offered R.W. a place in his level 3 home. R.W. agreed and requested that the regional center authorize this change in placement. The regional center staff presented the request to the placement committee and it was approved. R.W. will soon move to a placement which will better meet his needs. Veronica Cervantes, CRA, Beatriz A. Reyes, Assistant CRA, Inland Regional Center.

<u>R.H. Buys Home.</u>

R.H. is a single dad subsisting on SSI in a rental apartment. When R.H.'s father died leaving forty thousand dollars to R.H, he turned to OCRA for financial planning. Using summary probate, R.H. had the funds transferred into his name. R.H. is in the process of buying a

mobile home which will save R.H. hundreds of dollars in rent every month and allow him to continue his SSI benefits. Jim Stoepler, CRA, Redwood Coast Regional Center, Eureka and Ukiah.

A.W. Returns to His Home.

51-year-old A.W. had some medical problems and needed to be hospitalized. Unfortunately, the doctors recommended he be placed in a convalescent home instead of returning to his house where he had lived his whole life. Even though A.W. had some difficulty communicating, he was able to indicate excitement about the possibility of going home, which his older sister had been trying to arrange.

A.W. was not a regional center client even though he had cerebral palsy and mental retardation. The social worker at the home made the referral to the regional center and a service coordinator was assigned. The social worker felt A.W. should be able to go home with services in place. The doctor had a different opinion. He felt someone with disabilities as significant as A.W.'s should live in a facility. A.W.'s sister called OCRA for help.

OCRA met with A.W. and the convalescent home staff, and then called for an IPP meeting with the regional center at the home to discuss getting services in place. Since everyone but the doctor agreed on the goal of A.W. returning home, he was able to return home the next business day. The regional center agreed to fund a day program since he likes music and being around people. A.W.'s sister called IHSS to make sure a new IHSS assessment would take place. The physical therapist at the home had ordered A.W.'s new wheelchair, which would be ready soon. They also got him a specialized bed through Medi-Cal. The regional center will be providing case management to help meet the rest of his needs as they arise. Katie Meyer, CRA, Luisa Delgadillo, Assistant CRA, Westside Regional Center.

REGIONAL and DEVELOPMENTAL CENTERS

Service Coordinator Learns How to File a Complaint.

H.Z. needs wheelchair assistance when traveling to school. The school district repeatedly failed to provide a backup aide when H.Z.'s aide was not working, which resulted in H.Z not attending school. H.Z.'s mother, who speaks a Chinese dialect, complained to the school. The regional center service coordinator requested OCRA's assistance. After OCRA provided a brief training on how to file a special education compliance complaint, the service coordinator filed a complaint. The district was found to be out of compliance and was required to insure that a replacement aide was available for those times when the assigned aide was not at work. The district has now complied. The service coordinator was pleased to be able to advocate for the child and will continue to represent H.Z. at IEP meetings. Matt Pope, CRA, Eastern Los Angeles Regional Center.

R.H. Will Continue To Live With His Family.

R.H. requires total care in all activities of daily living and has significant inappropriate social behaviors. The regional center provided R.H. and his grandparents, whom he lives with, 60 hours of respite services, 39 hours of social recreation, and 152 additional lump sum respite hours per fiscal year. Due to R.H.'s grandmother's health concerns, R.H. was placed in an adult residential facility for 6 months. R.H. was unhappy at his placement and returned home after his grandmother's health improved. The regional center declined to reinstate the services R.H. had prior to placement and his grandmother contacted OCRA for assistance. The Assistant CRA agreed to provide direct representation after review of the case. At the informal meeting, the Assistant CRA negotiated the reinstatement of the 60 hours of respite and 40 hours of social recreation. However, the regional center denied the additional respite. The Assistant CRA represented at hearing and the ALJ ordered the regional center to reinstate the 152 lump sum respite hours. Due to the reinstatement of the previous services and supports, R.H. will continue to live with his family. Veronica Cervantes, CRA, Beatriz A. Reyes, Assistant CRA, Inland Regional Center.

M.B. Is Made Eligible for Regional Center Services.

M.B. is an adult woman who had her children taken away from her due to allegations of neglect. Her dependency court attorney asked the judge to order an evaluation of her functioning level. M.B. had never been evaluated before. She dropped out of school in 8th grade and married and began her family. She had not worked outside the home until after her children were removed.

The evaluation found that M.B. had a diagnosis of mental retardation. She applied for regional center eligibility and was denied by the regional center in whose catchment area she was living at the time.

She contacted OCRA two years later regarding services to help her comply with the requests of the court to avoid termination of parental rights. OCRA prepared a packet of materials to apply at regional center where she now lived. OCRA also sent a letter on her behalf to the Judge in her dependency matter asking that any hearing regarding termination of parental rights be stopped pending the eligibility determination by the regional center. The new regional center then assessed M.B. and found her eligible. M.B. is now getting the services and supports that she needs to comply with her court orders. Katie Hornberger, CRA, Abigail Perez, Assistant CRA, Harbor Regional.

Expert Witness Provides Free Assessment and Testimony.

E.P. received services from the Early Start Program but was found ineligible for regional center services after the age of three. He appealed the denial. At the informal meeting, E.P.'s mother and a psychologist, who was a fellow from a major hospital, were unsuccessful in persuading the regional center to reverse its decision. The psychologist had completed a comprehensive assessment that included multiple hours and multiple meetings with E.P. E.P. was referred to OCRA for assistance. The psychologist agreed to provide expert testimony at hearing with no charge to the family. From the expert's testimony, the ALJ determined that E.P. was eligible for regional center services. OCRA agreed it will provide outreach to families connected with the hospital where the psychologist works. Matt Pope, CRA, Lucy Garcia, Assistant CRA, Eastern Los Angeles Regional Center.

S.V.'s Regional Center Eligibility.

S.V. is a 12-year-old with mental retardation who had been denied regional center eligibility twice on the basis that he had mixed expressive/receptive disorder. S.V. qualified for special education services as a student with mental retardation from age 3. S.V.'s mother was confused by the regional center denials and the repeated statements by the school district that S.A. should be receiving regional center services.

Mother contacted OCRA. Based on a review of all S.V.'s documents, OCRA recommended a psychological assessment with a private psychologist for a determination of mental retardation. The psychologist assessed and diagnosed S.V. with mental retardation. OCRA submitted S.A.'s records to the regional center for a new eligibility determination. S.A. was made eligible for services. Anastasia Bacigalupo, CRA, South Central Los Angeles Regional Center.

OCRA Assists M.R. to Maintain Transportation Services.

The regional center decided to stop providing transportation services for M.R. to a neurologist in Ventura, who has been treating M.R. for epilepsy over the last 21 years. The regional center decided that there was no need to have M.R. travel to Ventura when she could be treated by a local neurologist. M.R. had been seen by two local neurologists in the past but the medical treatment they provided had a detrimental affect on her condition because they lacked an understanding of her medical fragility. OCRA assisted M.R. with requesting a continuation of these transportation services through the appeal process. OCRA sent a letter to M.R.'s doctor requesting a written explanation of the need for MR to travel to Ventura. M.R.'s neurologist in Ventura expressed concerns regarding the continuity of care for M.R.'s condition, especially since she had recently been started on a new drug and the neurologist felt responsible for monitoring how M.R. responds to the new medication. Moreover, M.R.'s neurologist also stated that a transfer of care to another

neurologist at the present time would be complicated. After this information was provided to the regional center, transportation services for M.R. were continued. Mario Espinoza, CRA, Valerie Geary, Assistant CRA, Kern Regional Center.

OCRA Assisted A.A. with Placement in a New Group Home.

A.A. is a 17-year-old client with autism who was given a 30-day notice of termination from his group home. The home claimed it could no longer meet A.A.'s needs. A.A.'s mother believed this action was retaliation on the part of the group home because she filed a complaint with the Department of Social Services citing concerns about A.A.'s health, including but not limited to, extreme weight loss and bruises on his body for extended periods of time. The investigation cleared the group home owner and staff of any wrong doing.

OCRA contacted the regional center to inquire about potential solutions to A.A.'s eviction. A.A.'s service coordinator began an immediate search for another group home that could meet all of A.A.'s needs. In the meantime, A.A.'s parents made a written request to the owner of his group home asking that he be allowed to stay until his 18th birthday in order to allow his service coordinator to find another group home. The group home owner agreed to extend A.A.'s placement until his 18th birthday under certain conditions. Simultaneously, A.A.'s service coordinator found another group home with which the parents were impressed. A.A.'s parents informed the regional center they wanted A.A. to be placed at the new group home because it was an adult facility and would help him reach new levels of growth. The regional center agreed to place A.A. in the new group home and approved a 1:1 aid for the first 30 days to assist A.A. with the transition. Mario Espinoza, CRA, Valerie Geary, Assistant CRA, Kern Regional Center.

G.R. Finally Moves from County Jail to Community Placement.

The public defender requested assistance from OCRA for a regional center client who had been in the county jail awaiting disposition of his case. The public defender previously requested that the regional center complete a psychological evaluation to determine competency.

The regional center informed the public defender that since the client's case had been closed it would not be doing the evaluation. As a result, the public defender obtained an independent psychological evaluation. With the client's consent, OCRA determined that G.R.'s regional center case had not been closed. OCRA requested an IPP meeting to plan for G.R.'s regional center services. At the IPP meeting, G.R. requested that the regional center assist him in obtaining regional center placement and services upon his release from jail. Shortly thereafter, G.R. was found incompetent to stand trial. As a result the regional center was ordered by the court to secure competency training. The regional center located a group home placement in the community for G.R. along with competency training from a community psychologist. G.R. was finally released from custody after spending 14 months in county jail. Kathy Mottarella, CRA, Gina Gheno, Assistant CRA, Tri-Counties Regional Center.

SPECIAL EDUCATION

C.M. Obtains Needed Speech Therapy.

C.M. is a 4 year-old-boy diagnosed with autism. For a year, C.M.'s mother thought her son was receiving speech therapy at school. During a classroom visit, C.M.'s mother realized that when other students in the classroom were pulled out for speech, C.M. was not. C.M.'s mother contacted OCRA for assistance in the implementation of speech therapy. The Assistant CRA agreed to review the IEP and a speech evaluation to confirm if a compliance complaint was warranted. C.M.'s mother is monolingual Spanish-speaking and misinterpreted her son's IEP that was written in English. Although speech therapy was not part of the IEP, C.M. clearly needed speech therapy according to the speech report. The Assistant CRA agreed to represent C.M. at an annual IEP meeting and advocate for speech therapy. At the IEP meeting, the school agreed to begin speech therapy immediately. Because the speech evaluation was not a current one, the school also agreed to conduct an evaluation during the extended school year so that C.M. could begin the new school

year with appropriate services. Veronica Cervantes, CRA, Beatriz A. Reyes, Assistant CRA, Inland Regional Center.

S.A. Receives Appropriate Individual Transition Plan Services.

S.A.'s parents contacted OCRA for special education assistance as they wanted S.A. to continue his education and be given opportunities for life skills training and community-based instruction with at least two academic or elective subjects provided in an integrated classroom setting.

In May, 2009, OCRA represented S.A. at his annual IEP meeting and subsequent Individual Transition Plan (ITP) meeting. As a result of OCRA representation, S.A. will participate during the next school year in an integrated classroom setting for a minimum of two periods per day which includes mathematics/pre-algebra concepts, and computer applications and keyboarding. He will participate in community based instruction for the remaining four periods per day, in the areas of money management, personal information and identification, functional reading and social skills training. The district also agreed to resume behavior services pursuant to S.A.'s existing behavior plan and to provide compensatory hours for the time period when service was not provided. S.A. will receive behavior modification training during the Extended School Year 2009 and school year 2009-10. Behavior services will be provided by a non-public agency (NPA) staff person(s) with established education and expertise in behavior intervention and modification training. Behavior training hours also include supervisory consultation hours and parent training. Christine Armand, Associate CRA, South Central Los Angeles Regional Center.

W.K. Obtains Two Hours Per Week of Individual Speech Therapy.

W.K. is a regional center consumer with autism. Despite the fact that the district identified that W.K. had multiple areas of need in speech including poor understanding of language and poor use of verbal and nonverbal language, the district continued to offer only one individual speech therapy session of thirty (30) minutes per week.

After reviewing W.K.'s school records, including the most recent speech and language assessment, OCRA advised W.K.'s parents to request an independent educational evaluation in speech and language. The district's speech and language assessment contained limited standardized testing and inconsistencies within the assessment.

OCRA then represented W.K. at an IEP meeting to discuss the parents' concerns with the district's speech and language assessment and the inadequate offer of speech and language services. After hearing OCRA's presentation, the district offered two (2) hours per week of individual speech therapy through a non-public agency (NPA). Jackie S. Chiang, CRA, Guadalupe Marquez, Assistant CRA, Lanterman Regional Center.

Consumer Benefits from Assistive Technology.

B.R. is non-verbal and in high school. His mother purchased a communication device for B.R.'s use at home and had requested that the assistive technology be added to her son's IEP. The school district refused to include his communication device as a related service in his IEP on the basis that the school would be found liable should anything happen to it.

OCRA wrote a letter to the district on the client's behalf, requesting that the communication device be written into the IEP but that staff and B.R. receive training on its proper use. The district drafted an addendum IEP including the assistive technology as a related service and agreed to provide training to both B.R. and school staff. Rita Defilippis, CRA, Eleanor LoBue, Assistant CRA, San Andreas Regional Center.

Appropriate Transition Program Is Provided.

C.A. was attending a transition program. During 2008, an IEP meeting was held to discuss an appropriate transition program for C.A. At this meeting, C.A. signed his educational rights over to his father to help C.A. make decisions regarding his education.

A month later, after an altercation with C.A., the transition program teacher and the school psychologist held an IEP meeting with C.A. but without the other IEP team members. This meeting violated educational laws and a follow-up meeting was scheduled.

At the follow-up meeting, C.A. told the IEP team that he wants to be in school but not at his current program. C.A. was offered a program in another district where he is in the community 4 hours a day instead of 2 and was also offered vocational training at an auto shop. C.A. and his father agreed to the transfer in order for C.A. to receive the appropriate program. Wendy Dumlao, CRA, Alba Gomez, Assistant CRA, San Diego Regional Center.

CDE Orders Compensatory Education for V.D.

In 2008, V.D. transferred from out of state. When V.D. later transferred back to California, V.D. was placed in a special day class (SDC) without the district discussing program options with his mother. V.D. was receiving direct math and direct reading instruction daily and occupational therapy (OT) when he was out of state, but the district did not provide these services.

OCRA filed a compliance complaint on behalf of V.D. The complaint alleged that V.D. was not provided a comparable program when he transferred to California from out of state. CDE agreed and ordered compensatory education for (1) direct reading instruction; (2) direct math instruction; and (3) OT.

Subsequently, OCRA and the regional center were unable to locate an appropriate location to provide the compensatory services. The district agreed to provide \$2,500.00 to the mother to use for V.D.'s compensatory education, to which the mother agreed. Wendy Dumlao, CRA, Alba Gomez, Assistant CRA, San Diego Regional Center.

OCRA Prevails in Special Education Due Process Hearing.

OCRA was contacted because the school district wanted to force K.U. to change schools her senior year of high school. This meant K.U. would have to leave her mainstream classes and attend a SDC at a different school. She would not graduate with her friends.

OCRA provided direct representation at a four-day due process hearing and prevailed. K.U. will remain at her current school with her friends and will graduate with them as she always wanted. Arthur Lipscomb, CRA, Kay Spencer, Assistant CRA, Nate Navarro, Assistant CRA, Central Valley Regional Center.

Health Aide Retained.

M.D. is 10-years old and is attending a county school program. After agreeing to conduct an occupational therapy assessment, the district failed to do the assessment or develop an assessment plan. M.D.'s mother requested a follow-up IEP meeting to discuss this as well as her daughter's health needs. The district had suggested ending her daughter's 1:1 health aide support on the basis that M.D. has had no accidents or injuries that would compromise the effectiveness of her pacemaker.

The district failed to hold an IEP meeting within 30 days from the time of the mother's request and failed to notify the mother of the date and time of the meeting when it was finally schedule. OCRA wrote a compliance complaint on the parent's behalf to the California Department of Education (CDE). CDE found the district to be out of compliance requiring corrective action. OCRA also represented M.D. during an IEP meeting and obtained the continued services of a 1:1 health aide. Rita Defilippis, CRA, Eleanor LoBue, Assistant CRA, San Andreas Regional Center.

J.W. Receives 640 Minutes of Compensatory Speech and Language Therapy.

J.W.'s IEP called for speech therapy with use of a smart board. J.W.'s parents contacted OCRA because J.W. was not receiving the service. OCRA provided direct representation at IEPs where J.W.'s speech therapist admitted she did not have the proper equipment nor did she have the proper training for the smart board.

OCRA requested compensatory hours for the speech therapy sessions conducted by the therapist who was not providing services with the proper equipment. The school district agreed to provide J.W. with 640 minutes of compensatory speech and language services. Arthur Lipscomb, CRA, Kay Spencer, Assistant CRA, Nate Navarro, Assistant CRA, Central Valley Regional Center.

School Placement Developed after OCRA Intervention.

E.C. is a young boy with significant physical and cognitive impairments. OCRA was contacted by his social worker because E.C. was not enrolled in any school program. The school district said that it did not have an appropriate class and that the county class was not available.

OCRA spoke with the district representative several times. OCRA then received a call from E.C.'s social worker. EC's parents had been informed by the school district that there was now a new county class and that E.C. would be immediately enrolled. Katy Lusson, CRA, Amanda St. James, Assistant CRA, Golden Gate Regional Center.

School District Agrees to Assessment by School for the Blind.

B.S. is a teenager with a visual impairment. Her parents initially contacted OCRA with regard to problems B.S. was having at school regarding her aides. After reviewing the IEP, OCRA had additional concerns, and the parents requested representation at an IEP meeting. OCRA attended the IEP meeting and discussed the need for a comprehensive assessment from the State School for the Blind. The district agreed to the evaluation. Rita Defilippis, CRA, Eleanor LoBue, Assistant CRA, San Andreas Regional Center.

Student Receives Home/Hospital Instruction.

S.P.'s mother was extremely concerned because S.P. would not leave her bedroom due to her fragile emotional state. S.P.'s mother

felt it would be too traumatizing to force S.P. to go to school but did want some type of educational service for her. S.P.'s mother contacted OCRA for assistance. The CRA agreed to attend an IEP meeting with S.P.'s mother. As a result, S.P. is now receiving weekly Home/Hospital Instruction. Marisol Cruz, Assistant CRA, Aimee Delgado, CRA, San Gabriel/Pomona Regional Center.

Failure to Follow IEP Resolved.

N.W.'s mother contacted OCRA, concerned because the local school district had ignored some things in N.W.'s IEP. The mother had seen regression in N.W.'s speech and desire to attend school. His last IEP meeting had consisted of a 15-minute meeting without an administrator or the special education director present.

OCRA evaluated the IEP and assisted N.W.'s mother in constructing a list of concerns. This list was incorporated into an IEP request. At the IEP, OCRA presented N.W. and focused discussion on specifics required to address the concerns. The IEP that resulted was thorough with respect to the related services, including occupational therapy, behavior intervention, inclusion in the general education program, and the provision of speech therapy. N.W.'s mother reported a month later that the attitude of the school staff, N.W.'s performance, and his willingness to go to school have all vastly improved. Doug Harris, CRA, Redwood Coast Regional Center.

OUTREACH/TRAINING

Safety Training and Emergency Preparedness at Vine Village.

Vine Village is a day program for consumers in the Napa Valley. Each day, consumers work on art projects and personal goals that foster creativity and independence. OCRA has been providing selfadvocacy and rights training to consumers at Vine Village for many years.

On June 26, 2009, OCRA and the Peer Self-Advocacy Unit at Disability Rights California provided a newly developed training on "Personal Safety in an Emergency." OCRA staff provided resource information, material for emergency kits, a DVD titled "Feeling Safe/Being Safe" which was developed by the DDS Consumer Advisory Committee, and put on a skit related to safety awareness.

Consumers and staff also had a great time playing the new "Safety Bingo Game." Prizes included small flashlights, toothpaste and toothbrush, comb and brush, socks, small food items, and band-aids for the emergency kits. The favorable response to the new training demonstrates that being safe really can be fun. Yulahlia Hernandez, CRA, Trina Saldana, Assistant CRA, North Bay Regional Center, Daniel Meadows, DDPSAU, Gail Gresham, Supervising CRA, Sacramento.



Serving Consumers of South Central Los Angeles Regional Center

www.disabilityrightsca.org

MEMORANDUM

TO:	Jeanne Molineaux, Director
FROM:	Anastasia Bacigalupo, Outreach Coordinator
RE:	Annual OCRA Outreach Report 2008-2009
DATE:	9/9/2009

OCRA staff completed the second year of their two-year outreach plans on June 30, 2009. OCRA staff met their commitment to developing on-going relationships within their communities, increasing community contacts and the strengthening of individual office relationships with members of their communities.

OCRA staff had many new accomplishments in this second year of the twoyear plan, 2007-2009. The OCRA outreach committee and the OCRA Supervising CRAs continue to encourage staff to seek out opportunities to educate consumers, their families and community leaders. The outreach training to OCRA staff in June, 2009, focused on preparing for different types of outreaches in the community including preparation and planning for accommodation needs, the development of outreach boxes, and accessible materials.

Over the course of the plan year, OCRA continued its focus on 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 Rights, IEP Development, IPP Development, Regional Center Fair Hearing Process, Medi-Cal, Social Security, In-Home Supportive Services, Alternatives to Conservatorships, and Denial of Rights. OCRA also conducted numerous

self-advocacy trainings including financial abuse, voting rights, and clients' rights.

Over this past year, OCRA has provided approximately 420 outreach trainings and reached over 18,700 people. Examples of statewide activities involving multiple OCRA offices are Fiesta Educativa and Congreso Familiar which are resource fairs to meet the varied needs of Latino communities from Sacramento, Butte, Glenn, Tehama, Colusa, Shasta, Yuba, Sutter, Placer, Nevada, Sierra, El Dorado, Santa Cruz, Monterey, Santa Clara, San Diego, Alameda County, Los Angeles, Orange County, Kern, and the San Gabriel Valley.

Office of Clients' Rights Advocacy Memorandums of Understanding

REGIONAL CENTER	STATUS OF MOU		
Alta	MOU dated 9/17/07.		
Central Valley	MOU dated 12/19/06.		
East Los Angeles	MOU dated 10/17/06.		
Far Northern	MOU dated 11/17/06.		
Golden Gate	MOU dated 3/07.		
Harbor	Previous MOU dated 4/02.		
	Update submitted to RC.		
Inland	MOU dated 4/10/07.		
Kern	MOU dated 5/2007.		
Lanterman	Previous MOU adopted 8/17/07.		
North Bay	MOU dated 5/30/07.		
North Los Angeles	MOU dated 11/1/08.		
Redwood Coast	Previous MOU dated 10/01.		
	Unable to schedule meeting with RC.		
Regional Center of East	MOU dated 8/8/08.		
Bay			
Regional Center of	MOU dated 9/07.		
Orange			
San Andreas	MOU dated 2/07.		
San Diego	MOU dated 1/07.		
San Gabriel/Pomona	MOU dated 7/30/07.		
South Central	MOU dated 10/06.		
Tri-Counties	MOU dated 10/06.		
Valley Mountain	MOU dated 11/14/06.		
Westside	MOU dated 4/07.		
110000100			



Office of Clients' Rights Advocacy 100 Howe Avenue, Suite 240N Sacramento, CA 95825 Tel: (916) 575-1615 TTY: (877) 669-6023 Toll Free: (800) 390-7032 Fax: (916) 575-1623 www.disabilityrightsca.org

Memo

To: Disability Rights CA Board of Directors

From: Jeanne Molineaux, Director

Date: July 24, 2009

Re: Consumer Satisfaction Survey

Attached are the results of the current Consumer Satisfaction Survey. The surveys were sent out for the period of July 1, 2008, through June 30, 2009. Every fourth closed case was randomly selected from OCRA's computer intake system to receive a survey, which included a self-addressed stamped envelope.

Seven hundred and eleven surveys were mailed out. 185 people returned the surveys. This represents a 26 percent return rate. Of those responding to the questions, 94 percent of the respondents who answered the questions felt they were treated well by the staff, 91 percent understood the information they were provided, 92 percent believed their CRA listened to them, 93 percent would ask for help from the Clients' Rights Advocate again, 88 percent were helped by the CRA, and 85 percent received a call back within two days.

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

	Satisfied	Not <u>Satisfied</u>	Did Not <u>Check</u>
1. I was treated well by the staff.	☺ 170	⊗ 11	4
2. My call was returned within two (2) da	ays 155	27	3
3. I could understand the information I g	ot. 162	17	6
 My Clients' Rights Advocate listened to me. 	166	14	5
 I was helped with my question/proble by my Clients' Rights Advocate. 	m 158	21	6
 I would ask for help from the Clients' Rights Advocate again. 	164	12	9

Comments: ¹

- Andy Holcombe and Lorie Atamian of Chico, CA OCRA are phenomenal. Lorie & Andy are thorough, organized, extremely knowledgeable, & highly respected by myself & others. They help each & every step along the way. They are personable, reliable and are open to talk to us for any issue....I give them my highest respect. We could not have accomplished what we for our autistic son without them. Thank you.
- My son's CRA is a "take charge/get things done" individual. After waiting 6-7 months, yes, and getting no response from the "officer of the day" or the "top-dog", this CRA got my son's "request for services" issues resolved. TCRC needs more people like her. She is TCRC/Oxnard/CI. office coordinator ______. She gives parents/caregivers hope that their voices are heard.

¹ 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.

- Se siente muy contenta cuando la jente brinda su ayuda de una manera rapida. (Feels very happy when people provide prompt assistance).
- We do thank Katy lusson for all the effort she gave us, & all the advice that we received, & thanks to her staff.
- CRA/Jacqueline OC office helped me win my hearing with IHSS judge. Jacqueline from the CRA office in OC helped me very professionally win my IHSS case and was very patient and cooperative with my son's case. I really want to say thank you, for her great help and support. Thank you and keep-up the great work.
- Katherine Mottarella is an exceptional Attorney & human being. Deeply caring & brilliant. Very grateful for her assistance.
- Muchas Gracias! (Thank you very much!)
- Todo el personal muy amable. Especialmente la abogada, Sra. Brigitte Ammons. Muy profesional y eficiente y mil gracias a ustedes y a todas las personas que colaboran y que hacen posible estos servicsios. Gracias. (All the personnel very pleasant. Especially attorney Ms. Brigitte Ammons. Very professional and efficient and a thousand thanks to you and all the people that collaborate and that make these services possible. Thank you.)
- Katie Hornberger is fantastic.
- Very helpful.
- ______ is my S.C. She works with me side by side. She never gets mad nor say's unkind things to me. Aimee Delgado is my lawyer. She got me on adult community independent. ______ treats me like I have some sense. I have an eight grade education. I love working with my professionals. All of them never baby me. I am 61, but I feel and act like 25 years old. There is no such thing as , I'm old.
- Please send me few business cards to scare the people at my children's school. I would like to know if it is possible & if I need it, for Katy or anyone in the office can send a letter saying that m children are represented by this office?
- Advocate provided insight into underlying issues.
- Kathy Mottarella is great! She is an asset to the community, very knowledgeable, and extremely kind. Thanks for having her on staff.
- All was great, but the last offer that the school district gave me, my CRA told me one thing & the districts offer that I signed said

something else. I wish I read it myself & not relied on my CRA to tell me what the info. was.

- I appreciate the service your office provides, the help is invaluable!
- It's actually been some time since I spoke w/someone from CRA but I feel it was important to mail this survey – I just found it between the pages of my calendar.
- Celeste Palmer was with me all the way. Treated me with respect. Thank you for providing me with the services and for having to represent me at the _____. Thank you very much – Celeste & team.
- I believe they need more resources to be effective. My call was not always returned within two (2) days. They said they were too busy to help me & I would have to do the work myself.
- I have recently received a survey from the Office of Clients' Rights. However, I am wondering --- why? First of all, the last time that I had the slightest notion that someone would actually help me with my daughter's ongoing illness was back in August, 2008, and secondly, I should have known better than to expect any kind of help. You see, the most profound answer the Regional Center is "She is An Adult", and if one as a parent does not have "conservatorship", then your child, is completely out of luck......If you have read this far, I would like to thank you.
- Me gustaria saber mas de ustedes porque abogan por los derechos de los clients porque he tenido otros problemas. Me gustaria saber mas de ustedes por favor gracias....____y otros y nada por favor pido su alluda que puedo aser gracias. (I would like to know more about you. Why do you advocate for clients' rights because I have had other problems. I would like to know more about you please, thank you...._____ and more and nothing please I ask for your help, what can I do, thank you.)
- The staff at North Bay Regional Center are really great. My new regional worker ______ is super & excellent worker. He helps me with my goals, budget & issues when I have questions to ask him 5 stars. _____ is a great person too, though ______ too. She works for _____ and she is super 5 stars.
- I have gotten help from this office many times and it has been very helpful.
- Katie Meyer is an extraordinary person. We need her to get thru the system.

- Too slow problems continue.
- I was impressed they keep track of me from previous calls. I appreciate the verbal support over the phone in presenting my case in court.
- Really appreciate that there is a clients rights advocate.
- Mi esposo, mi hijo y yo estamos muy agradesidos por tan inmensa ayuda y atención para con nosotros todo su personal, dios les bendiga a todas. (My husband, my son, and I are appreciative for the immense help and attention with us and from all your personnel, god bless all of you.)
- Keep up the good work.
- I am not happy, because I don't have a job, and my service coordinator isn't doing anything for me. _____ doesn't want to take me back.
- I was treated with respect and professionalism. The staff from the advocacy office were great! They help me a lot! Thanks!
- Me gustaria que me mandaran informacion sobre ayuda de viviendas de bajos recursos. (I would like you to send me information on low income housing.)
- I would like to know how to get more involved in advocacy for other parents of Blind & low vision kids. The problems in the schools are so misunderstood by teachers, administration, & districts. We just finished our 4 day trial with 2 districts & won both cases...___ my daughter is now in High School 14 yrs old with a 3.6 GPA with hopes to go to UC Davis!
- Thank you for giving us the opportunity to respond to the services that our brother, ______, received from your organization. Please find the completed survey enclosed with this letter. _____ has benefited tremendously from OCRA's services, however, his cognitive abilities and communication skills prevented him form completing your survey, which is why we responded to it...OCRA's services as provided by Alexis Ortega, Arthur Lipscomb, and their staff (Ernie Moreno and Kay Spencer) have had a profoundly positive effect, not only on _____ life and well being, but also on the life of his family. We hope OCRA will continue to protect the rights of this vulnerable population and the people who love them.
- Le doy las gracias de parte de mi hijo ____ por todo el apoyo que nos brindaron durante el proceso con el IHSS. Ya que esto no hubiese sido posible sin su ayuda. Gracias. (I thank you on behalf of my son

_____ for all the support you provided during the IHSS process. This would not have been possible without your help. Thank you.)

- Excellent, Always Excellent. I would absolutely ask for help from the Clients' Rights Advocate again. That Katie Casada-Hornberger is amazing as an advocate in representing my son and his rights. As well as, Lucy Garcia!!
- I never got a call back as a result my family re-located to San Diego.
- I never got to speak to the CRA. The last time I called the CRA office in Bakersfield was in July 2008, Valerie the Secretary answered my questions & assisted me.
- Katie Hornberger is Fantastic! She held my hand through the process Thank you!
- Crystal Padilla helped me. She answered my questions (back).
- Celeste Palmer que gracias por ayudarme y que...(Celeste Palmer Thank you for helping me and...)
- Estoy muy contenta con su alluda. (I am very happy with your assistance.)
- Dear Lori and Andy You two have been very instrumental in our family's success through the I.E.P. process for _____. Several times I called to "tell my story" blow by blow, and I always received support and direction. Than you!
- El trató fue excelente muchisimas Gracias a Mi Defensora y Personal. Bendiciones para todos ustedes. (Treatment was excellent, thank you very much to my personal advocate. Blessings for all of you.)
- Impressive, helpful, happy to have found them. Wendy Dumlao is an excellent asset to your organization. She knows the law, advocates for the consumer and makes sure that the law is implemented. Words cannot say enough about how well she does her job.
- I was put off, shelved.
- My call was never returned!
- I would maybe ask for help from the Clients' Rights Advocate again. I did not receive the help I needed, yet I got a letter stating that my case was going to be close because I did not return the call but they never called me at home, cell #, e-mail. I called back left msg. and they still did not return call. Thank you for everything else you do.
- Mi llamada fue regresada hasta la tercera vez que pedi ayuda. La primera y segunda vez que trate de recibir ayuda de ______ jamas regreso mi llamada. Hasta la tercera vez hable con Marisol y

ella fue quien me asesoro y me brindo ayuda...porque por lo general, ellas siempre estan demasiado ocupadas. Gracias. (My call was returned back the third time that I requested help. The first and second time that I tried to get assistance from ______ she never returned my call. Until the third time I talked to Marisol and she was the one that provided me assistance and advice...because in general they are always much too busy. Thank you.

- Please take me off your mailing list. I thank you for all the help that your company had given me, but my daughter has passed away.
- No me volvieron a llamar y lo unico que me dijieron era que si mi hijo tenia syndrome de Down/Autismo. (They didn't call me back and the only thing they asked me was if my son had Down Syndrome/Autism.)
- Matt Pope and Lucy are exceptional! I have 2 children with very different needs advocate very nice, accessible and great help!
- I would have liked someone to be with me the day of the hearing.
- Katie Hornberger is fantastic! She is Godsend to my family.
- Things are no better and cannot do anything no help.
- Que traten muy bien a las personas. Todos somo iguales y merecemos un mejor trato. Otra cosa poner mas personal bilingue y comprensibles. Gracias por todo lo que ustedes estan haciendo para mejoras el sistema. Que Dios los bendiga. (To treat people very well. We are all equal and deserve better treatment. Another thing place more bilingual and compassionate staff. Thank you for all you do to better the system. God bless you.)
- Valerie Geary is very knowledgeable about clients' rights. She is very helpful.
- The answers in this survey apply only to the secretary. She was extremely helpful, patient and informative. I never actually got to speak or meet with the attorney. Don't know why.
- Special needs director has been ...
- I spoke with Kay Spencer regarding bus transportation issues. She was helpful ...
- Muy mal servicio y atencion. (Very bad service and attention.)
- Thank you so much for helping. You made a difference. My son is now back in school and happy. It's a relief to know that I have some one to turn to and help when things get tuff.

- Que fueron muy cuidadosos en como ayudarme. Gracias por su ayuda. (You were very careful in how you helped me. Thank you for your help.)
- Got no help whatsoever on our situation. No call back.
- Carol Campbell is an excellent advocate. She is personable and kind and we look forward to seeing the results of her actions in place for my sister!
- Gracias a ustedes nosotros podremos defendernos. Gracias. (Thanks to you we will be able to defend ourselves. Thank you.)
- San Diego Regional Center at Santee ...
- I think Protection and Advocacy (Katy Lusson) is a tremendous resource for families and am very grateful for this agency.
- Valerie is very professional and helpful. She gives great advice.
- The second time I was told no lawyer to give a paper to _____.
- Jacqueline Miller, esq. represented our son ... for regional center eligibility. Jacqueline was just great ...
- There were great and I really appreciate there help and I'm very thankful.
- They (staff) were fantastic!
- Katie Hornberger is an excellent advocate for children like mine.
- Please warn clients no to move to the High Desert areas. Too many lawsuits! Terrible school placements for special needs children!
- They were not able to help me with my case because my son is not a regional center client, but they are exceptionally good and helpful.
- Receptionist needs a class in phone etiquette. She was rude, loud and not a person I felt comfortable leaving information with.
- Marcie Gladson was so nice and patient. I felt empowered ...
- Jacqueline was fantastic.

DISABILITY RIGHTS CALIFORNIA BOARD OCRA ADVISORY COMMITTEE December, 2008

Committee Members:

Dan Owen Ted Cottini Spencer McClay Eric Ybarra Billy Hall (Bishop) (Oroville) (Grass Valley) (Stockton) (Glendale)

OCRA ADVISORY COMMITTEE MINUTES March 6, 2009

Present: Billy Hall, Eric Ybarra, Ted Cottini, Dan Owen (by phone), Ori Medicinebull, Precious Medicinebull, Jose Flores, Stan Price

Absent: Spencer McClay

Staff: Evelyn Abouhassan, Alice Ximenez, Jeanne Molineaux, Jackie Coleman, Yulahlia Hernandez, Cara Armstrong, Catherine Blakemore and Dalena Quan

Facilitators: Steve Austin (Eric Ybarra)

Eric Ybarra chaired the meeting and called the meeting to order at 12:00 p.m.

Orientation and Operating Rules of Committee: Jeanne Molineaux reviewed orientation binder with the Committee and asked for feedback on self-advocacy experiences and better ways that OCRA could work with Committee regarding advocacy for people with disabilities. The Committee members gave examples of personal experiences, and suggested ideas on how to work together: 1.) Offering tools to help one best express ones self without creating problems, 2.) Gathering a group of CRAs and people with disabilities to discuss ways of dealing with daily life and also provide this information in writing, 3.) Roleplay real situations such as a meeting with a service coordinator, and/or a meeting with a facility social worker, 4.) Roleplay should include family members to build networking and support systems.

Presentation: Proposed legislation. Evelyn Abouhassan gave an update to the Committee on legislation and budget issues affecting people with developmental disabilities including upcoming propositions. She also encouraged members to view the Disability Rights California webpage for additional information.

Presentation: Jackie Coleman, Clients' Rights Advocate, Alta California Regional Center, shared information regarding a discount method for people with disabilities to use when renewing an identification or driver's license card. *Verification for Reduced Fee Identification Card*.

Presentation: Yulahlia Hernandez, Clients' Rights Advocate, North Bay Regional Center, reviewed current successful cases and showed a video of local news coverage discussing success of individuals and their involvement in various programs.

The meeting adjourned at 2:00 p.m.

ATTEST,

Eric Ybarra, Chair

Office of Clients' Rights Advocacy Self-Advocacy Trainings July 1, 2008 – June 30, 2009

Self-Advocacy Trainings held:

Alta RC	April 17, 2009
Central Valley RC	August 14, 2008
-	January 27, 2009
East LA RC	October 14, 2008
	April 30, 2009
Far Northern RC	December 8, 2008
	March 19, 2009
	June 8, 2009
Golden Gate RC	September 16, 2008
	September 22, 2008
	January 9, 2009
	January 15, 2009
	June 12, 2009
Harbor RC	September 9, 2008
	September 16, 2008
	September 20, 2009
	September 23, 2008
Inland RC	May 8, 2009
Kern RC	March 27, 2009
Lanterman RC	September 23, 2008
	October 17, 2008
	October 24, 2008
	January 14, 2009
	January 23, 2009
North Bay RC	July 16, 2008
	August 1, 2008
	September 16, 2008
	October 20, 2008
	June 26, 2009
North LA RC	August 28, 2009
RC of East Bay	August 6, 2009
RC of Orange County	April 13, 2009
	April 15, 2009

Redwood Coast RC	October 15, 2008
San Andreas RC	January 5, 2009 August 29, 2008 September 23, 2008
San Diego RC	January 17, 2009 October 29, 2008 March 7, 2009 June 30, 2009
San Gabriel/Pomona RC	July 24, 2008 November 19, 2008
South Central LA RC	February 10, 2009 May 28, 2009
Tri-Counties RC	November 7, 2008 November 14, 2008
Valley Mountain RC	August 29, 2008 September 9, 2008 February 11, 2009 March 6, 2009
Westside RC	May 21, 2009

OFFICE OF CLIENTS' RIGHTS ADVOCACY ANNUAL REPORT JULY 1, 2008 – JUNE 30, 2009

TITLE 17 REPORT

TITLE 17 LETTER	COMPLAINT (INITIALS)	NATURE OF COMPLAINT	STATUS	OUTCOME
7/15/08	E.J.	Right to prompt medical treatment. Improper case management.	Closed	Allegations not Supported
4/7/09	K.O.	Violations of various requests	Closed	Allegations partially Sustained and Supported
4/17/09	S.M.A.	Violations of various rights	Closed	Allegations not Supported

OFFICE OF CLIENTS' RIGHTS ADVOCACY ANNUAL REPORT (July 1, 2008 – June 30, 2009)

DENIAL OF CLIENTS' RIGHTS

Regional Center	Good Cause	Right(s) Denied	Date Denial Began	Date of Review	Date of Restoration
ACRC08- 121		V,T,L,P	11/1/08	12/1/08	12/10/08
ACRC08- 122		V,T,L,P	11/1/08	12/1/08	10/10/08
ACRC08- 123		V,T,L,P	11/1/08	12/1/08	12/10/08
ACRC09- 06	O, D	С	6/1/09	6/30/09	7/1/09
CVRC08- 01	0	Т	6/25/08	8/8/08	Moved to new grouphome on 1/2/09.
CVRC08- 02	Ι	C	7/11/08	8/12/08	Client passed away on 10/1/08.
HRC08-02	I, O, D	V, T	3/27/08	7/18/08	7/18/08
HRC09-04	I	V, J	3/27/09	4/24/09	Ongoing Review
HRC09-04	I	V, J	3/27/09	5/28/09	Ongoing Review
HRC09-05	I, O	V, J	6/19/09	6/19/09	Ongoing Review
NBRC08- 04	I, O	Т	9/17/08	9/18/08	Ongoing Review
NBRC08- 04	I, O	Т	9/17/08	9/24/08	Ongoing Review
NBRC08- 04	I, O	Т	9/17/08	10/7/08	Ongoing Review
NBRC08- 04	I, O	Т	9/17/08	10/14/08	Ongoing Review
NBRC08- 04	I, O	Т	9/17/08	11/12/08	Ongoing Review
NBRC08- 04	I, O	Т	9/17/08	12/2/08	Ongoing Review

NBRC08-	I, O	Т	9/17/08	12/12/08	Telephone
04					access with
					supervision
					restored on
					9/24/08.
NBRC08-	I, O	Т	12/5/08	12/10/08	Ongoing
05					Review
NBRC08-	I, O	Т	12/5/08	12/16/08	Telephone
05					access with
					supervision.
SARC08-	Ι	V	5/25/08	8/28/08	Ongoing
02					Review
SARC08-	Ι	V	5/25/08	9/9/08	Ongoing
02					Review
SARC08-	I	V	5/25/08	9/16/08	Ongoing
02					Review
SARC08-	I	V	5/25/08	9/19/08	Ongoing
02					Review
SARC08-	I	V	5/25/08	9/24/08	Ongoing
02					Review
SARC08-	I	V	5/25/08	10/6/08	Ongoing
02					Review
SARC08-	I	V	5/25/08	11/10/08	Ongoing
02					Review
SARC08-	I	V	5/25/08	12/3/08	Ongoing
02					Review
SARC08-	I	V	5/25/08	12/19/08	Client concurs
02					with plan of
					implementation
					regarding
					restoration of
					visitation
SDRC08-	L, O, D	P, C	10/23/08	11/18/08	11/18/08
10					
Clients' Righ	4a.				

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.

OFFICE OF CLIENTS' RIGHTS ADVOCACY ANNUAL REPORT JULY 1, 2008 – JUNE 30, 2009

CONSUMER GRIEVANCES WITH CONTRACTOR

DATE OF RESOLUTION LETTER	COMPLAINT (INITIALS)	NATURE OF COMPLAINT	STATUS	OUTCOME
7/17/08	A.T.	3 rd Level- Failure to represent in regional center matter	Closed	Upheld OCRA's actions
7/10/08	D & D.P.	1 st Level- Closed Failure to provide advocacy		Upheld OCRA's actions
9/23/08		2 nd Level- Failure to provide advocacy	Closed	Upheld OCRA's actions
11/5/08	J.T.	2 nd Grievance- Failure to provide representation in regional center matter.		Upheld OCRA's actions
11/18/08	M.Y.	1 st Level- Failure to provide effective advocacy		Upheld OCRA's staff's actions
2/3/09	E.A.	1 st Level- Failure to provide representation	Closed	Upheld OCRA's staff's actions

		2 nd Level-	Closed	Partially Upheld
		Failure to		
		provide		
		adequate		
		investigation		
3/16/09	S.M.A.	Failure to	Closed	Upheld OCRA's
		provide		staff's actions
		adequate		
		investigation		
6/11/09	S.M.A.	Failure to	Closed	Upheld OCRA's
		provide		staff's actions
		adequate		
		investigation		

OCRA Attorney's Fees Fiscal Year July 1, 2008 – June 30, 2009

Date:	From:	Subject:	Case #:	Amount:
November 2008	Lynwood Unified	Special	719295	\$ 2,500.00
	School District	Education		
January 2009	Garvey School	Special	713591	\$ 4,000.00
	District	Education		
March 2009	Hayward Unified	Special	871723	\$ 5,700.00
	School District	Education		
	Total For			<u>\$12,200.00</u>
	FY 2008 - 09			