

ADVOCACY REPORT

OFFICE OF CLIENTS' RIGHTS ADVOCACY

January – June 2013

BENEFITS

IN HOME SUPPORT SERVICES (IHSS)

J.J. Receives IHSS Protective Supervision.

J.J. moved to California recently with his family and applied for IHSS. He has autism and is non-verbal. J.J. needs help with the bathroom as he wears diapers, needs help bathing, and needs help in most other areas of personal care. He also needs someone to watch him constantly as he is non-self-directing. For example, although he is 21, someone must help him onto the bus in morning so he can attend school. He was only given 55 hours per month of IHSS, which did not include any protective supervision. OCRA gathered his records which showed a clear impairment in memory, orientation, and judgment. OCRA agreed to represent J.J. at hearing and to negotiate with the County appeals unit.

OCRA sent documents to the appeals specialist and asked him to find that J.J. is entitled to protective supervision without having to go to hearing. The County had recently adopted a policy that the appeals unit can enter into conditional withdrawals with claimants that order the IHSS office to grant protective supervision. This change came about after negotiations between local interagency advocates, including OCRA, and the division of Appeals and State Hearings. The appeal specialist agreed this was one of those cases, where there is a preponderance of the evidence showing need for protective supervision. The case was settled the day before the hearing. J.J. will receive \$17,366.40 in retroactive IHSS benefits, and protective supervision hours going forward. Katie Meyer, CRA, Luisa Delgadillo, Assistant CRA, Katie Hornberger, Director, Westside Regional Center.

A.D. Keeps Maximum IHSS Hours.

A.D. is a teenager with autism and seizures. A.D.'s parent, who is a monolingual Spanish-speaker, contacted OCRA to appeal the county's decision to reduce A.D.'s IHSS, including his protective supervision hours. The county's reduction was because A.D. was receiving in home nursing care in the evenings and that was treated as an alternative resource. The county's reasoning was based on the county's mistaken assumption that the nurse was providing A.D.'s IHSS services during the nursing shifts. OCRA met A.D. and her parent in the family home to discuss A.D.'s needs and the services the nurse performed.

OCRA agreed to represent A.D. at hearing and contacted the county to try to resolve the matter prior to hearing. The county agreed to reinstate the IHSS hours after OCRA provided information showing that A.D.'s parent performed IHSS during the nursing shifts, including preparing A.D.'s special meals and assisting the nurse with A.D.'s bathing, toileting and dressing. A.D. continues to remain in the family home with appropriate supports. Gloria Flugum, Assistant CRA, Timothy Poe, Supervising CRA, Frank D. Lanterman Regional Center.

OCRA Assists Consumer in Obtaining Reimbursement for IHSS Hours.

K.C. contacted OCRA to obtain assistance when his Medi-Cal benefits were wrongfully denied. OCRA quickly assisted in communicating with Medi-Cal and advocated for his eligibility to be reinstated. Although his Medi-Cal benefits were reinstated, K.C.'s IHSS benefits that were paid for by Medi-Cal were not paid for an entire month. K.C. had to obtain a loan to pay his IHSS providers for the services they had provided him throughout the month he was denied Medi-Cal benefits.

OCRA assisted K.C. in filling out a Conlan Claim to obtain reimbursement for Medi-Cal benefits that he paid out of pocket while denied benefits. A Conlan Claim is a process where a person can be reimbursed for out of pocket IHSS funding, when IHSS is wrongly terminated.

OCRA drafted the Conlan Claim on K.C.'s behalf and submitted it. After submitting the claim, K.C. received a full reimbursement of the IHSS hours. Yulahlia Hernandez, CRA, Annie Breuer, Assistant CRA, Gail Gresham, Supervising CRA, North Bay Regional Center.

4-Year-Old Granted IHSS Protective Supervision.

A.S. is an active four-year-old who has poor judgment and is drawn to dangerous situations requiring constant supervision. According to her mother, keeping A.S. safe is a 24-hour job. A.S. has a tendency to elope, to hide under vehicles, and to squeeze into spaces where adults can't reach her. She is especially friendly with men, always wanting to hug them whether they are known to her or strangers. A.S. previously applied for IHSS but was turned away because the county determined she was too young. OCRA assisted A.S.'s mother in preparing an IHSS information packet that included an independent nursing assessment funded by the regional center and additional supporting documents showing A.S. required protective supervision. OCRA attended the in-home assessment during which, OCRA provided the IHSS social worker with the information packet. Soon after the in-home assessment A.S. was granted eligibility for IHSS services including protective supervision. Eva Casas-Sarmiento, CRA, Cynthia Patricia Salomón, Assistant CRA, Katherine Mottarella, Supervising CRA, Harbor Regional Center.

MEDI-CAL

L.G. Keeps Nursing Hours and Remains in Family Home.

L.G. is an adult who requires 24-hours per day of care due to significant mental and physical impairments. L.G. received 273 hours per month of in home care. Of the 273 hours, 174 hours were authorized for nursing care. L.G. received a notice that the Department of Health Care Services (DHCS) planned to reduce her nursing hours to 83 hours a month. OCRA contacted DHCS regarding their plan to reduce nursing services. Following the discussions with OCRA, DHCS agreed to withdraw their notice and keep the nursing services the same. Arthur Lipscomb CRA, Celeste

Palmer, Associate CRA, Timothy Poe, Supervising CRA, Regional Center of the East Bay.

MEDI-CAL MANAGED CARE

OCRA Assists Consumer in Obtaining 24 Sessions of Speech Therapy .

M.F. is nine-years-old and he is five years delayed in speech, which causes him to have behavioral problems. His speech therapist submitted a Treatment Authorization Request (TAR) to the Medi-Cal managed care entity in his county. The TAR was denied and M.F.'s parents appealed.

The Managed Care entity issued a Notice of Decision denying the Appeal. It stated that "Medi-Cal does not cover treatment for Autism, which is the diagnosis listed as the cause of the patient's speech problem. Disorders related to mental health issues are covered by the local health department. School districts often will provide speech therapy also."

OCRA with the clients' permission enlisted the help of the Disability Rights California (DRC) regional office staff. They contacted the Managed Care entity. Initially the entity cited Health and Safety Code Section 1374.72(d)(7), part of the Mental Health Parity provisions, for authority that autism is a mental health diagnosis. However that provision supported M.F.'s eligibility for the service. Regional office staff and OCRA argued that the broader provisions of Medi-Cal medical necessity and ESPDT law also applied.

The Managed Care entity stated that it would grant a resubmitted TAR. It then granted M.F. 24 speech therapy visits over a six month period. Jim Stoepler, CRA, Gail Gresham, Supervising CRA, Redwood Coast Regional Center, Ukiah, with Sujatha Branch, Sacramento Regional Office and Maria Iriarte, San Diego Regional Office.

SUPPLEMENTAL SECURITY INCOME (SSI)

A.B.'s SSI Payment Amount is Restored and His Overpayment is Cleared!

For many years, A.B., an older adult, had been living with his parents and receiving care from them. He did not receive In-Home Supportive Services, but rather received the SSI Non-Medical Out-of-Home Care (NMOHC) rate (sometimes call the “Board and Care” rate). The SSI NMOHC rate is a cash benefit that is higher than the regular SSI rate because it pays for the SSI recipient to live in a home where meals and personal care are provided. The home is usually that of a relative, legal guardian, or conservator, and the state must certify the home as a NMOHC facility.

A.B. received a notice from the Social Security Administration (SSA) reducing his payment amount and alleging an overpayment of \$6,726.00. SSA changed his living arrangement retroactively, and said he was not in a NMOHC arrangement, but rather was living independently in his own household. A.B.'s mother tried to find out how this happened by calling SSA several times, but no one could explain it to her. A.B.'s mother told SSA that nothing had changed in A.B.'s living arrangement and that she didn't agree with this action. SSA sent a form to complete – a request for waiver of overpayment recovery. This is not the correct form, because it admits the overpayment is correct and requests to not pay the money back to SSA because the recipient is not at fault. SSA should have sent her an appeal form, the Request for Reconsideration.

OCRA agreed to represent A.B. directly because he met the criteria for the NMOHC rate and had been getting it for many years, which meant the State had previously certified the relative's home as a NMOHC facility. Nothing had changed. OCRA submitted an appeal and asked to see the evidence SSA relied on in changing A.B.'s living arrangement and payment amount retroactively. Through negotiations with SSA, OCRA determined that SSA never received the form it sent to the State to re-certify the home as NMOHC. Instead of keeping the SSI benefits the same until they received the form, SSA reduced the benefit and went back more than two years which created a large overpayment. OCRA explained that A.B.'s

care needs are great, and his parents could have applied for IHSS for him, but they chose not to, because of their age and because A.B. was already receiving the SSI NMOHC rate for him. SSA reversed its determination and changed his living arrangement and payment amount back to the higher NMOHC rate. Katie Meyer, CRA, Luisa Delgadillo, Assistant CRA, Katie Hornberger, Director, Westside Regional Center.

\$12,214 SSI Overpayment Is Reduced Then Waived Entirely.

J.A. is a minor child who received notice from the Social Security Administration (SSA) of a \$12,214 overpayment for the family's failure to report the living situation and being over the resource limit. J.A.'s mother/payee contacted OCRA for assistance. OCRA filed a Request for Reconsideration based on the SSA's office error in computing the family resources. OCRA included information regarding the actual values of the family vehicles and proof of bank accounts. After meeting with the SSA office, it was determined that SSA erred in the value of the family vehicles and bank accounts and reduced the overpayment to \$7,918. The SSA office stated that the remaining overpayment was due to the family's failure to report J.A.'s living situation. OCRA then filed a Request for Waiver of Overpayment Recovery (waiver) as his or her mother reported the family's living situation in a timely manner but the SSA office failed to reflect the changes in their computer system. As a result of OCRA's efforts, the SSA office determined that J.A.'s payee was not at fault in causing the overpayment and that the payee cannot afford to repay the money. Therefore, the remaining \$7,918 overpayment was waived in its entirety. Veronica Cervantes, CRA, Beatriz Reyes, Associate CRA, Katie Meyer, Supervising CRA, Inland Regional Center.

OCRA Assists Adult Consumer to Become Her Own Payee for Social Security Benefits.

M.B. is an adult consumer who made the decision for the regional center to become her payee because she was temporarily homeless and had no address to receive her SSI checks. When M.B. secured housing, she notified the Social Security office that she wanted to again become her own payee. The Social Security case worker

informed M.B. that it was presumed that she lacked capacity to handle her own finances when the regional center became her payee and therefore she had to get a letter from her physician stating that she is capable to handle her own finances. M.B.'s physician was not willing to do so, as he had no knowledge about M.B.'s ability to handle her financial affairs. OCRA accompanied M.B. to an appointment at the Social Security office and asserted that the presumption that M.B. lacked capacity to handle her own finances, solely because she has a disability was discriminatory. OCRA asserted that Social Security should communicate directly with M.B. to verify her capacity to become her own payee. The Social Security worker asked M.B. a series of questions and determined her to have capacity to handle her finances and immediately approved M.B. to become her own payee. Rita Defilippis, CRA, Filomena Alomar, Assistant CRA, Irma Wagster, Supervising CRA, San Andreas Regional Center.

J.P. Gets Increase in SSI Benefits.

J.P. received a Notice of Action from SSA indicating that her benefit was going to be reduced by \$236.66 per month. OCRA advised her to appeal by filing a request for reconsideration. After reviewing the Notice of Action it was determined that SSA was reducing J.P.'s benefit because J.P. was receiving In-Kind Support, by living in the home of another. OCRA assisted J.P. in determining her fair share of household expenses. After J.P.'s review with SSA, it was determined that J.P. was paying her share of household expenses. J.P.'s benefits were reinstated. Jacqueline Miller, CRA, Jazmin Romero, Assistant CRA, Irma Wagster, Supervising CRA, Regional Center of Orange County.

SOCIAL SECURITY DISABILITY INSURANCE (SSDI)

Collection of SSDI Overpayment Waived.

C.C. worked for many years as an In-Home Support worker. Since her father worked, she receives SSDI as a disabled adult child based on his employment record. For a couple of months in 2012, her

income was over the eligibility amount for SSDI, resulting in an overpayment of SSDI totaling nearly \$2000. C.C. agreed to have \$50 per month deducted from her benefit to pay back the money.

Later, poor health forced C.C. to cut her working hours to only a few a week. At the same time, she was forced to move, thereby incurring more expenses. The monthly deduction became a hardship, so she called OCRA. OCRA assisted her in filing a request for a waiver. Her request was granted and the balance of the overpayment (about \$500) was waived. When collection stopped, she once again began receiving her full monthly benefit. Lynne Page, CRA, Gail Gresham, Supervising CRA, Redwood Coast Regional Center.

DEPARTMENT OF REHABILITATION

OCRA Assists Consumer to an Extended Situational Assessment with a Job Coach during Eligibility Determination Period.

M.V. is an adult with an intellectual disability and autism. M.V. applied for Department of Rehabilitation (DOR) services and was determined to be unemployable and not eligible for DOR services. OCRA represented M.V. at her eligibility meeting and asserted that M.V. was not a full participant in the situational assessment and DOR did not provide her with supports to accommodate her disability needs. DOR had documented all the areas that M.V. did not demonstrate appropriate social skills but did not discuss these with her so that she could improve her performance by the end of the assessment. DOR also did not provide M.V. with any social skills training to assist her to improve her skills in areas directly related to her disability.

With the clients' permission, the case was referred to DRC regional office Client Assistance Program (CAP) staff to file an appeal. Following mediation, DOR agreed to conduct a second situational assessment providing a job coach through the regional center and full participation by M.V. through weekly reviews and written feedback. Rita Defilippis, CRA, Irma Wagster, Supervising CRA, San Andreas

Regional Center with Suge Lee and Elizabeth Zirker, Oakland Regional Office.

DISCRIMINATION/ACCESS

Church Grants J.H. Accessibility at Church, Accompanied by Aide.

J.H. is an adult with an intellectual disability and uses a wheelchair. J.H.'s case manager at the regional center contacted OCRA regarding J.H.'s inability to attend church because the facility was not wheelchair accessible. OCRA met with J.H. to confirm that she wanted to attend church and participate in the church choir. OCRA toured the church and met with church administrator. The church was recently renovated and now fully accessible by wheelchair. The church administrator agreed to have J.H. participate in the choir if an aide could assist J.H. OCRA contacted J.H.'s group home and the group home administrator agreed to provide staff to accompany J.H. to the church. She is now attending church and participating in the choir. Aruti Patel, CRA, Jessica Freedman, Assistant CRA, Gail Gresham, Supervising CRA, Golden Gate Regional Center.

HOUSING

J.H. contacted OCRA after his former landlord alleged that he owed \$1,246.68 in addition to the \$600.00 security deposit for damage done to the apartment he and his wife, also a regional center consumer, had recently moved out of. OCRA contacted the landlord and negotiated a reduced settlement for solely the \$600.00 deposit to cover the cost of replacing the blinds and screens, cleaning the carpet, and a general cleaning. J.H. was very happy as his discussions with the landlord had not been fruitful. Kimberlee Candela, CRA, Lorie Atamian, Associate CRA, Katie Hornberger, Director, Far Northern Regional Center.

PERSONAL AUTONOMY

K.A. is a 21-year-old woman who has Down Syndrome. K.A. lives in a care home and works in supported employment at a local pizza parlor. K.A. befriended a student in her transition program through

school and developed a friendship with his family. OCRA received a referral from the regional center case manager who stated that K.A.'s school friend's family advised her that they were intending to file for an adult adoption of K.A. OCRA met with K.A. in person and discussed her right to personal autonomy and clients' rights. K.A. adamantly opposed the adoption and requested OCRA advocacy assistance with advising this family of her personal choices. OCRA drafted an advisory letter of K.A.'s rights, reiterated her opposition to the proposed adoption and provided a copy to all members of her IPP team and the family. Due to OCRA advocacy, no adoption petition was filed. Leinani Walter, CRA, Christine Hager, Assistant CRA, Gail Gresham, Supervising CRA, Valley Mountain Regional Center.

V.H. Has Criminal Charges Dropped.

V.H. is an adult with an intellectual disability. V.H. was standing in front of a liquor store when another individual asked V.H. to buy some alcoholic beverages. V.H. made the purchase and was arrested by police when exiting the store. OCRA was contacted by the regional center and V.H.'s day program to assist V.H. After speaking with V.H., OCRA agreed to contact his public defender and advocate that V.H. lacked the capacity to understand the individual was a minor, what the legal age for drinking was, or why he had been arrested. OCRA explained to V.H. and his support staff the procedures that would be involved with his court appearance and what they could do to support V.H. OCRA wrote a letter to the Court explaining V.H.'s disability and the circumstances surrounding the case. This letter served to educate the court and the public defender about disabilities and capacity. OCRA was contacted by V.H.'s support staff after the court date and told that all charges had been dropped. Katy Lusson, CRA, Jessica Freedman, Assistant CRA, Gail Gresham, Supervising CRA, Golden Gate Regional Center.

REGIONAL CENTER

D. P. Moves into the Community Placement of his Choice.

D.P. contacted OCRA after attending a presentation on client's rights and the IPP process by OCRA and DRC's Developmental Disability Peer Self Advocacy Unit. D.P. requested assistance to move out of

his current residential campus placement in an adult residential facility (ARF) and back into an apartment in the community. For years D.P. had lived in his own apartment. D.P. felt he had been tricked by staff into moving from his apartment back onto the residential campus. Residential program administrators felt that D.P. was safer within the ARF campus environment and they did not support D.P.'s move to an apartment.

OCRA agreed to represent D.P. in a series of IPP meetings where it was agreed and he approved a move from the residential campus to a home in the community with supported living and other ancillary services. After a process of roommate hunting and apartment searching, D.P. has finally moved into a house in the community and is living with two other individual's he has known for some time. Kendra McWright, CRA, Gina Gheno Assistant CRA, Katherine Mottarella, Supervising CRA, Tri-Counties Regional Center.

In Home Nursing Funded by the Regional Center.

J.B. was receiving in home Early Periodic Screening, Diagnosis, and Treatment (EPSDT) nursing hours through Medi-Cal. Her nursing hours stopped when Medi-Cal switched to Medi-Cal Managed Care. J.B.'s mother timely appealed the termination of nursing hours and requested the regional center to gap fund the nursing hours. The regional center denied the request and only agreed to fund 12 hours a month of respite. J.B.'s mother timely appealed that denial also.

OCRA, with permission from the client, obtained assistance from DRC regional office staff. Together, they drafted a Position Statement for J.B.'s mother to take to the fair hearing. OCRA prepared the evidence packet and prepared J.B.'s mother for fair hearing.

At fair hearing the regional center agreed to fund the in home nursing hours that J.B. needed. Aimee Delgado, CRA, Marisol Cruz, Assistant CRA, Irma Wagster, Supervising CRA, San Gabriel/Pomona Regional Center, Marilyn Holle, Los Angeles Regional Office.

OCRA Helps Prevent Placement at Fairview Developmental Center Due to Diabetes.

OCRA was contacted about a 13-year-old consumer with type 1 diabetes and an intellectual disability currently living in a group home. The group home did not have a nurse assigned to work the night shift therefore regional center sought an alternative placement. When no alternative placements were found following a statewide search regional center made a referral for placement at Fairview Developmental Center (FDC). M.B. and his family were opposed to placement at FDC and contacted OCRA. OCRA obtained and reviewed M.B.'s records. OCRA requested that the regional center secure a Regional Resource Development Project (RRDP) assessment in order to determine the appropriateness of placement at FDC. The RRDP completed their assessment and recommended that M.B. stay in his current group home with appropriate supports and services. Regional center agreed with the recommendation and obtained the appropriate nursing support for M.B. at his current group home. Mario Espinoza, CRA, Valerie Geary, Assistant CRA, Katherine Mottarella, Supervising CRA, Kern Regional Center.

OCRA Assists Consumer to Attend College by Negotiating Rate of Pay for Personal Assistant.

R.H. requires 1:1 support for mobility, feeding, toileting, and to use her communication device. R.H. has Independent Living Skills (ILS) services through an agency but the agency was unable to find a personal assistant for R.H. as the rate set by DDS for a personal assistant did not compensate the assistant for all of the services that R.H. required. The regional center and the ILS agency requested an exemption from the rate set by DDS. The exemption was granted, now R.H. can access community activities, including attending her college classes. Rita Defilippis, CRA, Filomena Alomar, Assistant CRA, Irma Wagster, Supervising CRA, San Andreas Regional Center.

A.A. Finds Suitable Placement Following History of Inappropriate Care Homes and Unstable Placements.

A.A. is an unconserved adult who lived in various facilities throughout the state. A.A. has been placed in more than 10 care homes in as many years, leading to a great deal of instability that proved extremely difficult for him due to his psychological and developmental disabilities. A.A.'s sister contacted OCRA for assistance with finding a new home after he received a 30-day notice to terminate his tenancy.

OCRA assisted A.A. in locating a replacement care home; however, due to his behaviors, A.A. received another 30-day notice. OCRA worked with the regional center to find a more suitable facility and were able to secure a new placement for A.A. without any lapse that may have resulted in A.A. becoming homeless. A.A. has settled into his new home and now enjoys frequent community outings with staff members and other residents. Asa Marie Standfeldt, CRA, Ramona Landeros, Assistant CRA, Timothy Poe, Supervising CRA, Alta California Regional Center.

OCRA and Regional Center Work Together with DDS to Ensure that Consumers Are Not Evicted and Continue Living in the Community with Specialized Services and Supports.

OCRA was contacted by regional center case management on behalf of R.B, T.C., M.K. and A.K. These four adult individuals had significant health and behavioral needs and were at risk of being evicted from their group home. They needed a higher level of specialized services at the group home with an increased monthly rate. OCRA worked closely with the regional center and the group home administrator to document and explain why a higher rate of pay was required to meet the unique needs of the four consumers. DDS granted an exemption and authorized a higher provider rate so the group home could continue to serve these consumers in the least restrictive and most integrated community setting. Ibrahim Saab, CRA, Ada Hamer, Associate CRA, Timothy Poe, Supervising CRA, North Los Angeles County Regional Center.

SPECIAL EDUCATION

B.P. Receives the Educational Therapies He Needs.

Before age three, B.P. received occupational therapy (OT) and physical therapy (PT) through the regional center to help improve the disabilities related to his rare genetic condition. When he turned three and enrolled into special education through the school district, he was not able to attend a preschool classroom because of his medical fragility. He was instead given home instruction with a teacher two times per week. B.P.'s mother asked for OT and PT. The district told B.P.'s mother that he could not receive any therapies because he is not attending school. OCRA obtained all of B.P.'s school records and had him evaluated by a neurologist for California Children's Services (CCS) eligibility, which he had in the past, but was denied. The neurologist found he did not meet legal criteria for CCS eligibility, so it would then be the district's responsibility to provide therapy. The district would not perform assessments for the therapies, because it said he would have to be a classroom placement to get them.

OCRA filed a compliance complaint with the California Department of Education (CDE) alleging that the district failed to provide an assessment plan or perform assessments for OT and PT, though his parent requested assessments, and failed to provide a copy of the IEP document in Spanish, though his parent requested it. About a week after OCRA filed the compliance complaint and sent a copy to the district, the district mailed B.P.'s mother a copy of the IEP in Spanish. CDE found the district to be out of compliance by not sending an assessment plan, nor performing assessments. The district scheduled evaluations at B.P.'s home and found him eligible to receive OT and PT. CDE ordered the district to provide compensatory services for the time that was missed, if B.P. was found eligible for them. OCRA represented B.P. at an IEP meeting where the compensatory and ongoing OT and PT hours were put into place. Katie Meyer, CRA, Luisa Delgadillo, Assistant CRA, Katie Hornberger, Director, Westside Regional Center.

F.P. Obtains Speech and Language Services from the School District.

F.P. is a 3-year-old with significant disabilities, including seizures, a G-tube and trachea tube, blindness, and constant hospitalizations for pneumonia and infection. F.P.'s parent contacted OCRA because F.P. was transitioning from the regional center into the school system, and F.P.'s parent was concerned that F.P.'s ongoing educational services would be terminated. The school district previously told the parent that F.P.'s speech and language services would be terminated because F.P. was not verbal and therefore would not benefit from language and speech services.

OCRA agreed to represent F.P. at the Individualized Education Plan (IEP) and advocated that the school district provide speech and language services. At the IEP, the school district agreed to provide speech and language therapy including individual sessions. Hannah Liddell, CRA, Timothy Poe, Supervising CRA, Frank D. Lanterman Regional Center.

Request for Independent Educational Evaluation Granted.

W.S. is a 16-year-old man diagnosed with an intellectual disability. He was in need of special education services and his family had experienced difficulties advocating for services and understanding the special education system due to a language barrier. W.S. had just moved to the United States last year and was home schooled until the school district finally began providing special education services.

OCRA agreed to request W.S.'s school records, assist his sister and mother in preparing for the Individualized Education Program meeting, and representing W.S. at the IEP meeting. At the IEP meeting, OCRA disagreed with the school district's occupational therapy assessment and requested that they conduct an Independent Educational Evaluation (IEE). The school district granted the IEE, we are awaiting those results. Jackie Dai, CRA, Lucy Garcia, Assistant CRA, Irma Wagster, Supervising CRA, Eastern Los Angeles Regional Center.

A.V.'s School District Fully Implements IEP, Supporting His Safety and Success.

A.V. is a middle school student with autism who requires significant behavioral supports, including use of a communication book to make his needs known. A.V.'s mother contacted OCRA after an incident at school in which A.V. hit his head on a bench. School staff said that he had a "tantrum" which resulted in the injury. A.V.'s mother did not think this sounded like something her son would do when receiving the right supports. The school district would not allow her onto the school campus to observe what was happening and was not forthcoming with information about the incident. After receiving advice from OCRA, including information about government tort claims and a personal injury referral list, she called an IEP meeting at which she discovered that school staff had not been ensuring that A.V. had his communication book with him when he was outdoors. Staff conceded that not being able to communicate his needs might have contributed to the incident in which he was injured. Staff agreed to fully implement A.V.'s behavior plan and even wrote into the IEP that A.V.'s mother was allowed to make occasional unannounced visits during the school day to ensure that the IEP was being followed. A.V.'s mother told OCRA that things have greatly improved at school for A.V., and that she felt empowered and more effective as A.V.'s advocate. Megan Chambers, CRA, Patricia Martin, Assistant CRA, Irma Wagster, Supervising CRA, San Diego Regional Center.

Accommodating Student's Needs Allows Him to Remain in His Neighborhood School.

C.Q. is 10-years-old and has Down syndrome. As a result of his disability he has toileting accidents and frequent school absences. C.Q. has many friends and is well liked at school in his small rural community. C.Q. was attending a special day class at his neighborhood school and was mainstreamed for a portion of the day. Although C.Q. was making progress, the school district said that he was beginning to have some behavior problems at school so they wanted him placed in a county special day class that had a restroom in the classroom and was twenty-five minutes from his home. After C.Q.'s parents visited the program they were opposed to the placement.

OCRA represented C.Q. at two IEP meetings and a special meeting requested by the school district administration. OCRA argued that C.Q. could remain in his current placement if he were properly accommodated there. The school district finally agreed that C.Q. could remain in his neighborhood school. They planned to move C.Q.'s classroom location closer to a restroom to accommodate his toileting needs and to create a behavior plan to address the behavior concerns at school. Margaret Oppel, CRA, Maricruz Magdaleno, Assistant CRA, Kay Spencer, Assistant CRA, Katherine Mottarella, Supervising CRA, Central Valley Regional Center.

OTHER

OCRA Assists Client in Accessing Counseling through the Victim Witness Fund.

J.L. had been a victim of a crime and she was receiving counseling through her family's health insurance to deal with effects of the crime. The counseling sessions were helping with J.L.'s behaviors. However, the insurance co-payments and deductibles were making it difficult for her parents to continue paying for the counseling.

OCRA assisted the family in accessing the Victim Witness Program. OCRA wrote a letter to the Victim Witness Program, which accompanied J.L.'s application. The Victim Witness Program accepted J.L.'s application to the program. J.L. will be reimbursed for the health insurance co-payments and will be able to continue to receive counseling. Jim Stoepler, CRA, Gail Gresham, Supervising CRA, Redwood Coast Regional Center, Ukiah.