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# INTRODUCTION

The Office of Clients’ Rights Advocacy (OCRA) provides statewide services to regional center consumers through a contract (HD119002) between Disability Rights California (DRC) and the California Department of Developmental Services (DDS). OCRA is currently in the fourth year of a five year contract. This semi-annual report covers July 1, 2014, through December 31, 2014.

OCRA continues to increase the number of people it serves. Between July 1, 2014 and December 21, 2014 OCRA resolved 5,586 issues for consumers, which represents an increase of 548 service requests, nearly 10 percent, from the same period last year. OCRA served 3,759 consumers, an increase from the same period last year. OCRA also participated in 207 trainings in the first half of the fiscal year, presenting to approximately 8,196 people. Through these efforts OCRA has enhanced the lives of many clients.

OCRA continues to handle more service requests for clients living in restrictive settings. The law requires notification to OCRA in many circumstances and have led to an increase in cases. These cases are time intensive and often require staff to review large amounts of documents, make several visits to clients, negotiate with various entities on the client’s behalf, and attend many meetings before they are resolved. Although these cases take more time to resolve, they are often the cases that have the greatest impact on the lives of our clients, and OCRA staff continue to be excited about these new opportunities to secure community living for our consumers. We also look forward to working with clients in Community Crisis Homes and Enhanced Behavioral Supports Homes when they are up and running. Although the financial outlook for the state is improving, people with developmental disabilities and their families still face challenges obtaining services from agencies that received less funding. As a result OCRA’s work continues to be vital. To succeed, OCRA staff work hard to develop positive working relationships with DDS, regional centers, and federal, state, and local agencies. With support from these agencies providing generic services, OCRA’s efforts to secure needed services and protect the rights of people with developmental disabilities continue to be successful.

OCRA currently operates 22 offices throughout California, most of which are staffed by one CRA and one Assistant CRA. This enables our staff to be accessible and best understand the local community. In addition, we have added peer advocacy staff and as a result of a recent funding increase staff focused on consumers living in locked facilities. OCRA appreciates this additional support from DDS. A list of the current staff and office locations is attached as Exhibit A and on our website at <http://www.disabilityrightsca.org/about/OCRA.htm>.

# PERFORMANCE OBJECTIVES

Disability Rights California’s contract with DDS requires performance objectives as established in Exhibit A, Page 14, Paragraph M, of the contract. Each of the specific required outcomes is discussed in the following Sections A through F. The contract does not set specific numbers for performance for the outcomes.

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

OCRA has consistently provided a high volume of service. This continued during the first half of the fiscal year. OCRA handled 5,586 issues for regional center consumers during this reporting period. These issues included obtaining benefits from a variety of generic services, obtaining less restrictive living arrangements, educating people about their rights and addressing systemic problems. The statistics are discussed below (Exhibit B) and show the wide variety of issues and the large number of cases handled by OCRA staff, as does a copy of the advocacy report (Exhibit C), covering July through December, 2014.

### Advocacy Reports.

OCRA staff take great pride in their cases. Each advocate regularly submits a summary of at least one case that has practical value to their supervisor. In an effort toward brevity, the case summaries have been greatly reduced to reflect just a sampling of the types of cases that OCRA handled. A longer Advocacy Report is available upon request. The summaries from July 1, 2014, through December 31, 2014, are compiled and attached as Exhibit C. These advocacy examples demonstrate the variety of the cases OCRA handles. Recent changes to law have increased the demand for assistance by people living in restrictive settings. Generic resources like IHSS, SSI, and special education continue to be areas of need by OCRA callers. All of these cases show the impact and importance of OCRA.

A few examples of the advocacy:

After Three Years in an IMD, J.B. Moves into apartment.

J.B., who was placed in an Institute for Mental Disease (IMD) three years ago, requested assistance to move from the IMD to a community placement. J.B. expressed a desire to live independently, to learn how to cook, and to go shopping. OCRA worked with the regional center to get a one to one aide in the IMD to assist J.B. in preparing to move back into the community. The aide helped J.B. to become more independent with daily living skills and to learn appropriate ways to express needs. With the aide, J.B.’s self-help skills and behaviors significantly improved. J.B. was placed on a HUD housing project list and with community donations, J.B. secured furniture for a one bedroom apartment. J.B. was so excited to move into an apartment and have the supportive living that he needed to be successful in the community.

I.B. is Found Eligible for SSI Benefits and 237.56 IHSS Hours.

I.B.’s mother contacted OCRA seeking assistance with SSI and IHSS eligibility. OCRA reviewed both cases and agreed to directly represent I.B. in both matters. OCRA attended an informal conference at the Social Security office and provided income and resource information needed to determine SSI eligibility. As a result, I.B. was found eligible for SSI benefits including retroactive payments totaling $12,847.31. OCRA also provided advocacy assistance to I.B. on the IHSS matter. As a result of an IHSS hearing, an administrative law judge decided that I.B. needed IHSS hours to remain safely in his home and ordered the county to reassess I.B. OCRA represented I.B. at the reassessment. After the reassessment, the county found I.B. eligible for 237.56 IHSS hours including protective supervision. I.B.’s hours were retroactive to January 2014, so he received a back-payment of $17,972.80.

OCRA Helps I.S. Stay in California to Get the Supports He Needs.

I.S.’s family contacted OCRA after he was suspended from his school and the district proposed an out-of-state educational placement. OCRA agreed to represent I.S. at upcoming IEP meeting. At the IEP meeting, OCRA pointed out that I.S.’s multiple classroom changes, lack of consistent positive behavior intervention, lack of appropriate behavioral support and poor school staff training led to the behavioral incidents and subsequent suspensions. The district quickly backed away from its proposal for I.S. to be placed out-of-state. Instead, it agreed to fund a comprehensive behavioral assessment and develop a comprehensive program to meet his educational needs at home which included over 5 hours per day of a 1:1 aide, consultation from a credentialed teacher, a speech therapist, and occupational therapist. The district also agreed to fund 84 hours of compensatory education for time I.S. missed while suspended.

H.U.’s Plan to Transition Back to the Community is Successful.

H.U. had been living in a locked facility for more than eight years. He wanted to move back into the community. OCRA assisted in developing a plan for H.U. to leave the locked facility to attend a day program. Participating in the day program turned out to be the best motivation for H.U., as he made tremendous progress and had no incidents. After learning of this progress, the regional center found a placement in the community for H.U., and he moved out of the locked facility. H.U. is receiving appropriate services to support him in his new living arrangement. He has been working closely with his support team to make his transition back into the community a success.

### Analysis of Consumers Served.

OCRA handled a total of 5,586 cases from July 1, 2014, through December 31, 2014. The complete compilation of data for the fiscal year is included as Exhibit B.

The data has been compiled by:

1. Age
2. County
3. Disability
4. Ethnicity
5. Race
6. Gender
7. Living Arrangement
8. Problem and Sub-Problem
9. Service Level

Please note that the report now includes separate race and ethnicity data, and now includes a problem code report which provides a more summary report of the service request problems than the more detailed sub-problem report.

Please also note that the reports included here are in non-table format so that they are accessible. Although the data is still contained in grids, each row of the table is self-explanatory as read from left to right and does not require the navigational reference of a table header row for context. OCRA served 1,500 individuals in the 4-to-17-year-old age group during this time period, which is the largest number of consumers served by age. The next largest is the 23-40 age group with 877 people served, this is consistent with past data. 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, 64 percent of the consumers served being male and 36 percent being female in this reporting period. This representation of males in the system is consistent with historical trends related to people with developmental disabilities and the continuing research into autism and other disorders.

The percentage of consumers residing in the parental or other family home remains by far the largest number of consumers served with 3,808 consumers living in the family home or 68 percent of the cases handled. The next largest group served is those living independently, with OCRA serving 707 people or almost 13 percent with this living arrangement. Interestingly, the more urban areas have a higher percentage of consumers living in a family home and the more rural areas saw a much higher percentage of consumers living independently than in urban areas. OCRA represented 6 new consumers admitted to Fairview Developmental Center pursuant to Welfare & Institutions Code §4418.7. Staff also participated in IPP meetings for 48 other consumers at Sonoma Developmental Center, Fairview Developmental Center, Lanterman Developmental Center, and Porterville Developmental Center. OCRA also represented 40 consumers residing in IMDs, and other restrictive settings.

OCRA strives to effectively serve all regional center clients across California. OCRA’s statistics on the ethnicity of consumers served for the year show commitment to and success in assisting underserved communities. For example, 39.7 percent of consumers served by OCRA identified as Hispanic/Latino, whereas only 36.1 percent of regional center consumers identified as Hispanic/Latino. 10.45 percent of consumers served by OCRA identified as African-American, whereas only 9.4 percent of regional center consumers identified as African-American, based on information from the DDS Fact Book, 12th Edition dated January 2015. To further aid more underserved communities, OCRA staff continue to carefully review the Purchase of Service (POS) Data collected by regional centers under Welfare & Institutions Code § 4519.5 and attend stakeholder meetings and committees.

### Analysis of Consumers Assisted with Moving to a Less Restrictive

### Living Arrangement.

Given the changes to the law regarding OCRA notification about people living in restrictive settings such as developmental centers, IMDs, and MHRCs, it is important to review the casework in this area. During the reporting period, OCRA represented all (meaning only 6 admitted) 6 new consumers placed at Fairview Developmental Center in the acute crisis unit. OCRA also continued representation of clients placed in acute crisis earlier in the year. This involved reviewing records, interviewing and developing a relationship with the consumer, attending meetings and court dates, and continuous advocacy for movement back to the community. OCRA also represented 48 other consumers living in developmental centers to ensure that they are able to live in their preferred living arrangement. OCRA also conducted trainings at the developmental centers and participated in regular collaborative meetings.

Following the mandatory notification of OCRA regarding comprehensive assessments for people residing in IMDs and MHRCs, OCRA has worked with 40 clients. OCRA continues to work with regional centers to develop best practices for notification. The increased clarity in the law has assisted in obtaining placement notices. For the cases where OCRA provided direct representation, staff spent considerable time advocating for less restrictive options. In many other cases, OCRA provided counsel and advice to consumers, family members, and public defenders. In both the developmental center and IMD cases, OCRA has been successful in getting many consumers moved into the community.

### Outreach/Trainings.

OCRA provides community training to both notify people about the availability of OCRA assistance and educate people about their rights. OCRA provides outreach to a wide variety of people. These groups include direct consumers, family members, regional center staff and vendors, and community members. These trainings include but are not limited to, consumers’ rights, abuse and neglect issues, special education, voting rights, SSI, living options, and alternatives to conservatorships, among other topics. Trainings on IHSS have been particularly popular given the changes to the program as a result of overtime pay requirements.

During the last fiscal year, OCRA presented at 207 trainings (slightly more than last year) with a total attendance of approximately 8,196 people at the various trainings. This represents a tremendous amount of work and staff time.

Kendra McWright served as the Southern California Outreach Coordinator and Christine Hager as the Northern California Outreach Coordinator. The coordinators advise staff in implementation of their target outreach plans. These are two-year plans based upon an evaluation of previous outreach plan results, new census data and figures from DDS regarding the ethnicity of consumers served by each regional center. We are currently in the second year of the two year plan. The outreach plan guides staff in reaching out to traditionally underserved communities. Each OCRA office targets at least three outreaches per year to a specific group of persons who are underrepresented in the office’s catchment area. A detailed report on target outreach and training is included as Exhibit D.

OCRA continues to have a Peer Advocate. This is a person with a developmental disability who provides community trainings, coaching and advocacy to clients, and assists staff in developing consumer friendly trainings. For this review period, one Peer Advocate directly assisted four consumers, provided seven trainings, and assisted OCRA staff in several more. In the coming year, we will be hiring another Peer Advocate and they will also be developing new and innovative trainings.

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

OCRA staff continue to successfully resolve matters informally. From July 1, 2014, through December 31, 2014, OCRA resolved 5,586 issues for consumers. Of those served, all but 19 were resolved informally. This means that more than 99 percent of all the matters that OCRA handled were resolved informally. Data showing this is attached as Exhibit E.

## Collaborative and harmonious working relationships are fostered.

OCRA staff have done a wonderful job of collaborating with the local regional centers, stakeholders, and community members. Some examples of collaboration include serving on Behavioral Modification Review Committees, Risk Assessment Committees, County Coordinating Councils, Supported Life Training Planning Committees, Appeals and State Hearings Interagency Collaborative, DC Taskforce Implementation Workgroup, Autism Taskforce, State Hearings Division Stakeholder meeting, Fiesta Educativa, and many others. Several CRAs have participated in planning meetings for their regional centers’ Self-Determination Services committees that are being formed and staffed. Many staff meet regularly with regional center staff and community partners to share ideas and expertise on many subjects. This philosophy of collaboration is not only incorporated into Disability Rights California’s contract with DDS, but is also 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 OCRA receives from varied sources, by its ability to resolve matters informally, and by its recognition as an excellent resource for people with developmental disabilities and their families.

### 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. We are working to ensure that all MOUs are updated during the contract period and as needed. The meetings have been collaborative and positive. OCRA has very good working relationships with many centers. During this time period MOUs were updated at Eastern Los Angeles Regional Center, North Los Angeles County Regional Center, Redwood Coast Regional Center, San Gabriel/Pomona Regional Center and Tri-Counties Regional Center. We are finalizing terms and awaiting signatures with other centers and have meetings scheduled in the spring. Copies of all MOUs have been forwarded to DDS. The status of each revised MOU is listed in Exhibit F.

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

Katie Hornberger, Director, OCRA and Eileen Richey, Executive Director, Association of Regional Center Agencies (ARCA) met on July 29, 2014 and on October 21, 2014 Ms. Hornberger met with Amy Westling, Director of Policy, ARCA. At those meetings, many issues impacting people with developmental disabilities were discussed. Ongoing quarterly meetings are scheduled to continue working together on issues affecting our joint clients.

## Consumers and families are satisfied with the services provided.

Disability Rights California recognizes the importance of consumer satisfaction. OCRA is committed to serving consumers and family members in a manner and with results that ensure consumer and family satisfaction with the services provided.

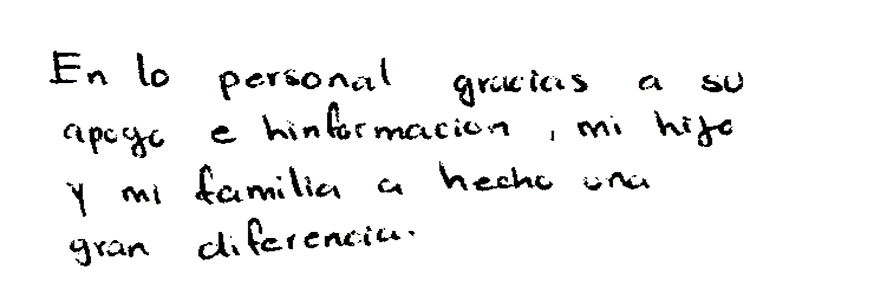
### Consumer Satisfaction Survey.

OCRA measures consumer satisfaction by use of an instrument developed jointly by staff, the OCRA Consumer Advisory Committee, and DDS. One-thousand, two-hundred six (1,206) surveys were mailed out. Two-hundred sixty (260) people returned the surveys. This represents a 22 percent return rate. From the results of the most recent survey, it is clear that consumers remain generally satisfied with the services provided by OCRA. Of those responding to the questions, 96 percent of the respondents who answered the questions felt they were treated well by the staff, the same percentage as the same reporting period last year. We saw gains in the number of people who understood the information they were provided, 95 percent over 90 percent in the same reporting period last year. And 96 percent of respondents believed their CRA listened to them, an increase of 5 percent over the same reporting period last year. Despite increases in some measures of general satisfication, OCRA continues to look for ways to improve its services. We had slight decreases in both the percentage of people who felt helped by by the CRA (87 to 85 percent) and the percentage of people who would ask for help from the CRA again 91 to 89). The OCRA management team call back all responders who request a call back and those with any negative responses that have supplied contact information. In this way we are able to remedy any concerns and provide additional support to consumers.

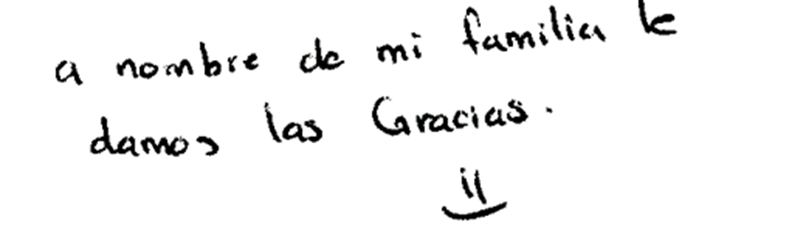
The percentage of responders receiving a call back within 2 days dropped from 88 to 84 percent. To ensure that everyone is called back timely we have a plan to expand our electronic call back log statewide. We have also added an additional Bilingual Assistant Clients’ Rights Advocate for Northern California to assist with our busiest offices. With the additional funding from DDS we have also added a CRA for Southern California to handle DC and IMD cases. We are in process of hiring a CRA for Northern California for these cases. These extra positions have helped to absorb the increase in these types of cases due to changes in the law. We appreciate the extra funding to do this important work. OCRA continues to look at office resources to find creative ways to allow CRAs to provide timely service to as many people as possible. See Exhibit G, which discusses the results of OCRA’s survey.

### Letters of Appreciation.

OCRA consumers and family members often take the time to write letters of appreciation. These kind words and the time it took to send them represent the high value of the work performed by OCRA staff.

Below is just a sample of the many letters received.[[1]](#footnote-1) 

(Image above shows comment in Spanish that translates to, “Personally would like to say, thank you for your support and information. My son and my family have seen a big difference.”)

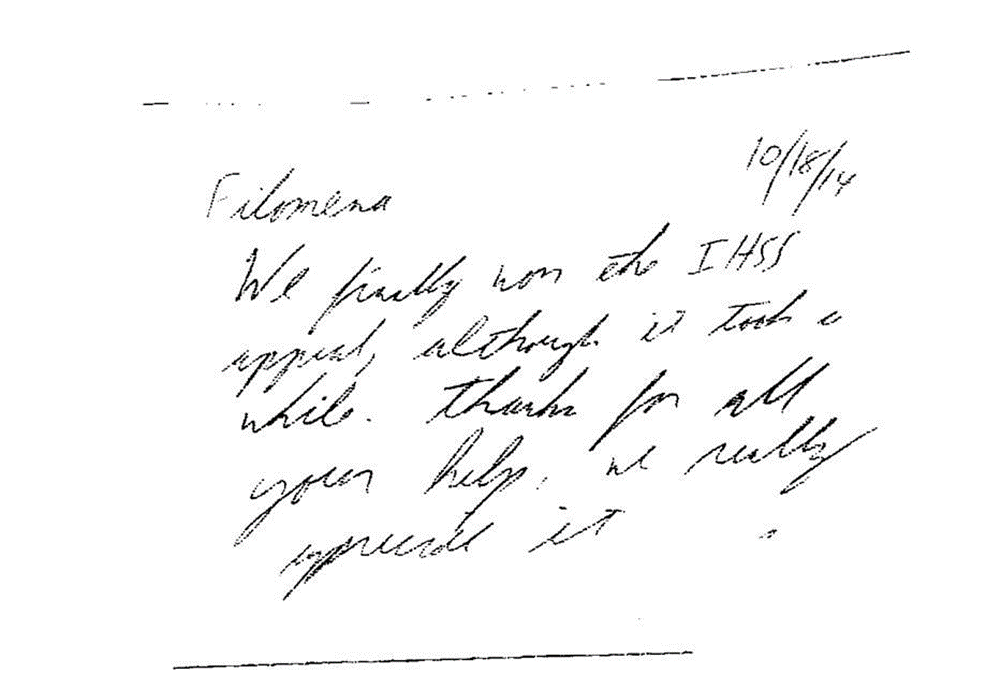


(Image above shows comment in Spanish that translates to, “On behalf of my family, thank you so much!”)

“Dear Celeste,

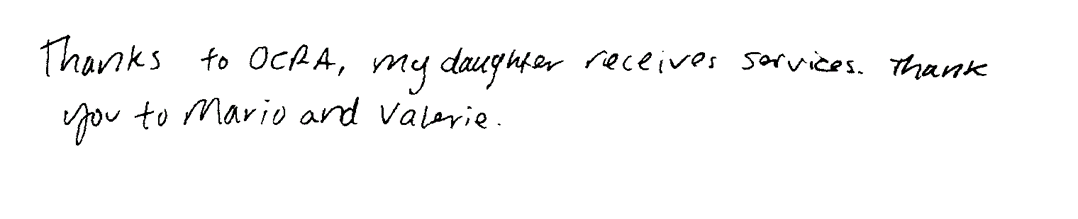
You have lifted my spirits when I really needed it by showing me that someone cares, someone(you) was willing to help someone you don’t know, with no experience trying to navigate in a system loaded with bureaucracy and red-tape for a cause that is so worthy and essential to those who cannot speak for themselves. I can’t say thank you enough. This states it was so clearly and I appreciate your time and help. Is an amazing little boy and I will go to the ends of the early to obtain the services he needs so he can be healthy, safe, happy and someday a productive member of society. Thank you for helping me in that direction.”

“Dear Lorie, Thank you very much for talking with me regarding good outcomes for developmentally disabled adults – and my son xxx, in particular. You do so much to help so many people. Very best wishes for the holidays and the new year. Take care.”



(Image above shows comment that says, “Filomena, we finally won the IHSS appeal, although it took a while. Thanks for all your help, we really appreciate it.”)

“I think what you are doing for families is such an amazing gift and blessing! I hope the state and people continue to support services like you for families. We need it. You are very valuable to us and we are beyond grateful to have been able to receive your advice and feedback. Thank you for your time, resources, and expertise. Our family sincerely appreciates it! Respectfully.”

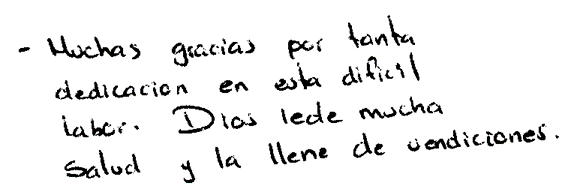


(Image above shows comments that says, “Thanks to OCRA, my daughter receives services. Thank you to Mario and Valerie.”)

“Dear Margaret,

I just wanted to end a quick note to thank you once again for all your help in assisting me with my regional center issues for my son. And my daughter xxx You knowledge and advise has been wonderful and a great help! With your assistance I was able to obtain all the needed and requested services for my children. I could not have done it without you. With your help I was able to obtain 120 hours of daycare for each of my children. This is of great relief to my family. The time spent with me was extremely helpful. You taught me so much and the I was able to go to medication and hearing prepared and educated. Not only did it help with obtaining these services, but I can now take the knowledge and continue advocating for my children for any future issues that arise. Thank you so much! Sincerely,”

“Muchas gracias por todo su apoyo, y tiempo. Gracias a personas como usted es que a hecho una gran diferencia para este grupo. Gracias por tener mucha información en nuestro idioma. Que pase unas felices fiestas con su familia. Se le quiere mucho.” (“Thank you so much for all your support and time. Thank you for people like you. You have made such a great difference for this group. Thank you for having information in our language. Thank you for your support. Have a happy holiday season with your family. You are loved very much!”)



(Image above shows comment in Spanish that translates to, “Thank you so much for much dedication in this difficult work. May God give you much health and fill you with blessings.”)

### Cases will be handled in a timely manner.

Consumers and families contact OCRA because something has gone wrong for them. It may be that they are losing a government benefit, being forced to move to a new more restrictive environment, or are struggling with another urgent situation. Therefore, it is important that OCRA staff be responsive. 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 is concerned that only 84 percent of responders report a call back within two days. To try to increase this percentage, we have hired additional staff and developed, and will soon begin implementing, a new statewide electronic phone call log system. This will help the management team and staff better track incoming calls and ensure that people are called back timely.

## The provision of clients’ rights advocacy services is coordinated in consultation with the DDS contract manager, stakeholder organizations, and persons with developmental disabilities and their families representing California’s multi-cultural diversity.

OCRA works through the OCRA Advisory Committee to ensure that this performance outcome is achieved. Attached as Exhibit H is a list of the members of the Disability Rights California Board of Director’s OCRA Advisory Board Committee effective December, 2014.

Public members of the Advisory Committee are appointed by the 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 provides valuable insight to the OCRA staff. A wide variety of topics are addressed at the meetings and members become better self-advocates as a result of having been on the committee. Members and staff exchange information about the types of problems people need assistance with and relevant types of training needed in the community. The minutes for the September 19, 2014, meeting are included as Exhibit H.

DDS staff is invited and encouraged to participate in the next meeting, which is set for March 6, 2014, in San Diego.

## Self-advocacy training is provided for consumers and families at least twice in each fiscal year.

Welfare and Institutions Code, Section 4433 (d)(5), requires that the contractor providing advocacy services for 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 strongly believes in the importance of self-advocacy and requires each of its offices to provide at least one self-advocacy training for consumers per year, far exceeding the two mandated trainings. Many offices provide additional trainings, currently seven offices have already given more than the required one training per year. These trainings serve a vital role in educating consumers about their rights and how to stand up for themselves. A list of Self-Advocacy Trainings held last year are in Exhibit I. The Peer Advocate, mentioned in Section II.A.4, is developing new self-advocacy materials and providing community trainings. Consumers are able to identify with the Peer Advocate and are responding very well to the trainings. The Peer Advocate also provides self-advocacy training to consumers in restrictive settings like Canyon Springs. Staff may present from any of the approved self-advocacy trainings. To date, OCRA has developed six separate packets of information for OCRA staff to use in the mandated trainings in addition to the DDS Consumer Safety materials and the living arrangement options materials developed by DDS as part of the settlement in *Capitol People First*. Samples of the OCRA self-advocacy packets (all are in both English and Spanish), have been provided to DDS with previous reports. As always, OCRA welcomes comments from DDS on any training packets and suggestions about future trainings.

# 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 were no Title 17 Complaints filed during this reporting period, as noted on Exhibit J.

# 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 Clients’ Rights Advocate must approve the denial and submit a quarterly report to DDS by the last day of each January, April, July, and October. OCRA is including the reports concurrently with the contractual date to provide OCRA’s reports. If this is not acceptable to DDS, OCRA will submit duplicate reports as requested. Attached as Exhibit K is the current log of Denials of Rights from the OCRA Offices.

# 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.

OCRA handled five first level grievances and one second level grievance during this reporting period. OCRA agreed to provide additional information or services to the consumer in two of them. Attached as Exhibit L is a chart detailing the grievances filed against OCRA during this period.

# 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, Associate, or unlicensed Clients’ Rights Advocates, all of whom work 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.

OCRA did not collect any attorney fees this time period.

# CONCLUSION

OCRA continues to provide exceptional service to people with developmental disabilities throughout the state. OCRA handled over 5,586 cases in the first half of the fiscal year, an increase over the same time period last year. Additionally, OCRA provided 207 trainings to 8,196 consumers, family members, regional center staff and vendors, and interested community members. OCRA also continues to meet each of its performance objectives. OCRA looks forward to continuing to work with people with developmental disabilities and helping access the services and supports they need to live the most independent and productive lives possible.

1. OCRA is providing the letters of appreciation with the wording from the originals, including any grammatical errors, unless otherwise indicated. We have also edited client names. [↑](#footnote-ref-1)