

OCRA SEMI-ANNUAL REPORT  
(JULY 1, 2022 - DECEMBER 31, 2022)

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**I. INTRODUCTION**

Disability Rights California provides state-wide clients’ rights advocacy services for regional center clients under a two-year contract, HD119002, with the Department of Developmental Services (DDS) through the Office of Clients’ Rights Advocacy (OCRA). The contract was renewed effective July 1, 2021, for a two-year period ending June 30, 2023. OCRA is in the second year of this two-year contract. This semi-annual report covers July 1, 2022, through December 31, 2022. Advocacy services include helping clients access services and support, resolving complaints and issues, and taking legal action.

Between July 1, 2022, and December 31, 2022, OCRA handled 4,550 issues for 3,255 clients. Compared to the last semi-annual reporting period, OCRA handled 243 more issues and served 57 more clients. OCRA committed to handle more issues as the effects of the pandemic continue and did so with positive results.

OCRA held 151 trainings during this period, presenting to about 6,168 people. We held more trainings and reached 1,813 more people than the last semi-annual period. Most trainings were virtual, with an ever-growing number of in-person events. See section II.A.4 for details.

OCRA operates offices throughout the state, most of which are staffed by one Clients' Rights Advocate (CRA) and one Assistant or Associate CRA (ACRA). This enables our staff to be accessible to, and best understand, the local community. All OCRA offices are in locations convenient to regional center offices. OCRA has increased access to its services by using "Statewide" CRAs and ACRA's to help busier offices with cases and cover staff absences. OCRA also has a team dedicated to facilitating Outreach efforts, with a Managing Attorney, Supervising Attorney, Outreach Coordinators for northern and southern California, and a Peer Advocate in southern California.

One exciting project OCRA rolled out during this review period to increase staff satisfaction and retention is a Mentorship Project. An experienced CRA researched effective mentoring and put together a program for new OCRA staff to match with a mentor for their first 6 months. There are guidelines and structure, but also room for the mentor and mentee to craft a beneficial relationship. While OCRA staff previously had informal mentors, this is a structured model using best practices.

Some parts of the developmental disability community have returned to in-person meetings and events. However, the COVID-19 pandemic is still causing hardships for regional center clients and family members. The same hardships impact regional center staff and vendors, and OCRA staff, as people use new ways to receive and provide services.

One way OCRA meets the diverse needs of regional center clients is by hiring diverse staff. About 25% of OCRA staff identify as having a disability. Many OCRA staff speak languages other than English, such as Spanish, Farsi, and Arabic, and use American Sign Language. All OCRA staff receive training to remember cultural and language preferences while analyzing what the client needs and providing services. A list of the current staff and office locations is attached as Exhibit A.

## II. PERFORMANCE OBJECTIVES

Disability Rights California's contract requires performance objectives, see Exhibit A, Page 14, Paragraph M, of the contract. Each of the specific required outcomes is discussed in the following Sections A through F.

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

OCRA continues to serve many people with developmental disabilities. OCRA handled 4,550 issues for regional center clients during this six-month period, which is more than the same period last year. OCRA served 3,255 clients during this semi-annual review period, which is also more than during the same reporting period last year. During this review period, we have seen more clients in person since the pandemic's effects are fading. We have visited clients in their homes, day programs, school, and in facilities. Since it can be easier for clients and family members, OCRA still uses Zoom and other remote ways to visit clients when that is their preference.

OCRA represented and educated people on many legal issues and helped fix systemic issues. The statistics, attached as Exhibit B and discussed below, show the wide variety of issues handled by OCRA staff. The advocacy report at Exhibit C, covering July through December 2022, tells the stories and the impact our work has had on clients' lives.

#### **1) Advocacy Reports.**

OCRA's effective service to the community and the impact of that work is best shown in advocacy stories. Advocates regularly submit summaries of cases or outreaches with practical value and that show a good outcome or teach a lesson. The examples show the wide variety of legal issues handled by OCRA. Some stories reflect resolution of systemic problems through high-level direct representation. Others are resolved through negotiation because of collaborative relationships. And others show how clients and family members are empowered to resolve issues with tailored guidance from OCRA. In this way, OCRA provides a combination of both "lay" and "legal" advocacy.

These stories are just a sampling of the cases that OCRA handled. A longer Advocacy Report is available upon request. Stories from July 2022 through December 2022 are compiled and attached as Exhibit C.

During this review period, staff wrote about many SSI and Social Security cases. Clients need support or representation to resolve these issues on their own, or to even reach a Social Security representative by phone. It is well-known that the SSA's extended halt to almost all in-person operations devastated people with disabilities, who could not get help from SSA with any stage of the benefits process. This especially impacted regional center clients, and the problem continues.

Here are four Social Security advocacy examples.

**Judge Finds Sam is Not Liable for an SSI Overpayment.**

Sam's father contacted OCRA when Sam was due to go to a hearing. Social Security said Sam owed them nearly \$22,000 of SSI payments he already received. Social Security said the overpayment happened because of a joint account Sam held with his father. Even after an informal conference to show Sam did not have that money, Social Security did not remove the overpayment. OCRA interviewed Sam and his father, reviewed financial statements, and interviewed witnesses. OCRA also researched the law, gathered new evidence, drafted declarations, wrote a brief with supporting exhibits, and prepared Sam and his father for his hearing. During the hearing, OCRA explained to the judge why Sam is not legally responsible for the overpayment. The judge agreed, and less than a month later, issued a favorable decision finding Sam does not have to pay back the overpayment.

**Jade Gets Her SSI Back Plus a \$13,782 SSI Payment.**

In 2020, Social Security stopped Jade's SSI benefits because she received COVID-19 unemployment benefits. However, in 2021, Social Security changed their policy to exclude COVID-19 unemployment benefits from its eligibility calculations. Jade contacted Social Security and they said they will reinstate her SSI and send Jade a retroactive payment for the months she should have received SSI benefits. Jade waited patiently for 9 months, but Social Security had done nothing. Due to the delay, Jade went into debt and was about to lose her housing. Jade called OCRA, which took on her case. OCRA called Social Security to explain Jade's precarious situation and request immediate reinstatement. Two weeks after OCRA made this request, Social Security reinstated Jade's benefits and sent her a retroactive payment of \$13,782. With this payment, Jade paid off her debts and was able to stay in her home.

### **Jeremy Gets Social Security Back-pay and No Longer Owes an Overpayment.**

Social Security stopped Jeremy's SSDI benefits and owed an overpayment of \$57,353. Jeremy did not get his benefits for over a year and was at risk of losing his housing. OCRA helped Jeremy file a request for reconsideration appeal. After gathering Jeremy's evidence, OCRA wrote a letter to Social Security asking that it correct its calculations, remove Jeremy's overpayment, reinstate his benefits, and award backpay. OCRA supplied evidence showing that Jeremy did not earn substantial gainful activity because he had job supports. Social Security escalated the matter and agreed they made a mistake. A few months later, Jeremy had his benefits reinstated, his \$57,535 overpayment removed, and got \$11,507 in back-pay.

### **David Is No Longer Considered Dead with Help from OCRA.**

David contacted OCRA for help after Social Security mistakenly declared he was dead, mixing him up with his deceased twin. Believing David was no longer living, Social Security stopped his benefits and said David owed them an overpayment of \$92,370. OCRA opened a case to ask the California Department of Public Health to issue amended records. OCRA also contacted David's local congressperson's office about these concerns. OCRA worked with the local congressional office to resolve David's issues and help David complete necessary forms. After several months of back-and-forth, Social Security corrected the record and recognized that David is alive. They removed the \$92,370 overpayment and reinstated his monthly SSI benefits.

## **2) Analysis of Clients Served.**

OCRA handled 4,550 cases from July 1, 2022, through December 31, 2022. Exhibit B contains the complete compilation of data for the fiscal year.

The data has been compiled by:

1. Age
2. County
3. Disability
4. Ethnicity
5. Race
6. Language

7. Gender
8. Gender Identity
9. Pronoun
10. Living Arrangement
11. Type of Problem (Problem Codes)
12. Service Type
13. Reason for Closing (Information and Referral service requests)

The reports included here are in non-table format so they are accessible to people who use screen-readers. Although the data is still in grids, the reader can look at each row from left to right and does not need a table header row for context.

The largest percentage of clients OCRA served by age were age 3 to 17, at 39.8 percent of clients served. This means parents or caregivers of children with developmental disabilities are the most frequent callers to OCRA. The regional center serves 37 percent of clients age 3-17, according to the latest DDS Fact Book, 18<sup>th</sup> edition. OCRA served only 1 percent of clients age 0-2 and these Early Start clients are 13.6 percent of the regional center population. The next largest age group OCRA served was the 22-31 age group with almost 19 percent. People age 62 and older account for 3.4 percent of OCRA clients and 4 percent of regional center clients.

Statistics on the ethnicity of clients served show OCRA's continuing commitment and success in serving underserved communities. For example, 42.5 percent of clients served by OCRA identified as Latinx. This is higher than the 39.8 percent of Hispanic/Latino regional center clients, per the Fact Book.

African American and Asian client data is in the report for "race," which is separated from "ethnicity" in our reporting system. African American clients represent 8.6 percent of regional center clients, but a larger 9.2 percent of clients served by OCRA. Asian clients make up 6.9 percent of regional center clients, but a higher 7.8 percent of clients served by OCRA. OCRA's progress in achieving and surpassing parity with Latinx, African American, and Asian regional center communities results from outreach efforts. See section A.4 for more details on outreach plans. For client language, OCRA serves 86.6 percent English-speakers, and 13.4 percent Non-English speakers. This is different from the regional centers, which serve 75.9 percent English-speakers and 24.1 percent Non-English

speakers per the most recent Fact Book. “Client language” does not account for when the client is English-speaking, but the family members OCRA communicate with are non-English-speaking. This underreports the percentage of issues requiring OCRA to use competent interpreters and translators, which parents and other family members may require even when the regional center client is English-speaking.

For gender, as in the past, OCRA served more males than females, with 67 percent of the clients served identifying as male and 33 percent identifying as female. These numbers are like the gender percentages served by regional centers, according to the recent Fact Book. Regional centers served 35.3 percent female, and 65.7 percent male clients. The Fact Book attributes the gender imbalance partly to individuals with an Autism diagnosis being over 80 percent male.

Clients living in the family home generate the largest number of service requests for clients served by OCRA, with 3,071 service requests showing clients living in the family home, or 67.5 percent of cases handled. This percentage is about the same as the last semi-annual report and is lower than the regional center percentage of clients served in this living arrangement, at 80.7 percent, per current the DDS Fact Book. As in previous review periods, the next largest group served by OCRA are those living independently, with 524 service requests or 11.5 percent with this living arrangement. This is a slightly lower percentage than last year during the same period and higher than the regional centers’ 7.6 percent of clients living with ILS/SLS.

OCRA’s case management database categorizes service requests by issue. Issues are labeled by a problem area and a subproblem area. OCRA’s largest problem area is Regional Center Services. This can be anything from regional center eligibility cases, to disputes over services, to problems with case management. This area is 26.5 percent of OCRA’s cases. The next largest is Income Maintenance, at 24 percent. These cases involve IHSS, Social Security, or other income programs. The third largest is Education, which can be a range of different special education cases, at 17.7 percent. The remaining problem areas ranged from less than 1 percent to 5.6 percent. These include Placement, Discrimination, Health, and Housing, among others.

OCRA now collects data about why staff closed a case at the lowest level of help. The lowest level is called an “Information and Referral”



case. OCRA staff select from 12 possible reasons for closing the case. During this review period, the largest percentage of these cases, 38 percent, were closed because the caller asked only for information, referral, or a publication. The next highest, at 15 percent, were closed because the issue was not OCRA-eligible. This could be family law, criminal law, personal injury, or another type of case OCRA does not handle. The next highest, at 10.6 percent, were closed because OCRA reviewed an Individual Behavior Supports Plan (IBSP) or a comprehensive assessment only. OCRA does this work on behalf of people in restrictive settings (see next section). The remaining reasons for closing these Information and Referral cases range from less than 1 to 7 percent and are listed in the report.

### **3) Analysis of Clients Assisted with Moving to a Less Restrictive Living Arrangement.**

The law requires regional centers to tell OCRA about people who live in restrictive settings and people whose community placements are at risk of failing. This includes people who live in, or are at risk of going into, Porterville Developmental Center, Canyon Springs, an Institution for Mental Disease, and STAR homes. The law requires regional centers to send OCRA comprehensive assessments and meeting notifications for clients in these restrictive settings, and clients living in Enhanced Behavioral Support Homes (EBSHs) and Community Crisis Homes (CCHs). Providers of EBSHs and CCHs must invite OCRA to Individual Behavior Support Team (IBST) meetings, and staff attend as many as possible.

OCRA's local and statewide CRAs and ACRAAs handle these cases. Assistance or representation often takes considerable time and many activities. These include speaking with the client about their wishes, reviewing records, attending a variety of meetings, negotiating through phone calls, drafting and filing documents for court, speaking with the client's public defender, service coordinator, family members, or home administrators about possible living arrangements and services, and attending discharge planning meetings and court dates, all to advocate for movement back to the community or for more services to stay in the community. OCRA staff are committed to helping people live in the least restrictive environment, a mandate of the Lanterman Act.

During this review period, OCRA staff took on 107 cases for people who live in Enhanced Behavioral Supports Homes and 79 cases for people who live in Community Crisis Homes. OCRA staff handled 64 cases for people

who live in Porterville Developmental Center Canyon Springs Community Facility. OCRA also helped in 18 cases where the client was in a STAR home for treatment. OCRA handled 26 cases for people in IMDs.

The law also requires regional centers to notify OCRA about clients whose 6500 commitments are expiring or have a hearing scheduled, clients under a 5250 or higher-level commitment, clients for whom a petition is filed for a Lanterman Petris-Short (LPS) conservatorship, and clients referred to Porterville Developmental Center. OCRA receives relatively few of these notifications from regional centers, despite going over this requirement during quarterly meetings and providing them a “cheat sheet” with the law and duties in a chart. This lack of information means there are people in highly restrictive settings and experiencing deprivation of rights, but OCRA is not aware of their potential need for advocacy help.

Here is one story highlighting how a client achieved community integration.

### ***Freddy Walks His Path from Porterville Developmental Center to the Community.***

Freddy, a man with a mild intellectual disability, entered Porterville Developmental Center (PDC) in 2014 through the usual route. Freddy was accused of crimes, declared incompetent to stand trial, and did 2 years of competency training. After those 2 years, he had to stay at PDC under a civil commitment for people with developmental disabilities. In 2019, the search for community placement began. Unfortunately for Freddy, and for many other people at PDC, community providers did not accept Freddy straight from PDC. The stigma of incorrectly associating PDC with jail has prevented many otherwise stable people from living in their least restrictive placement. Fortunately for Freddy, with help from OCRA, he convinced his team to suggest a transfer to the much less restrictive Canyon Springs Community Facility. At Canyon Springs, Freddy got the chance to prove every day he was ready to live in the community. He worked on the coveted landscaping team and enjoyed daily community outings. These were opportunities not available to him at PDC. Soon enough, providers saw him with different eyes. Freddy now lives in a community care group home. He enjoys fishing, hiking, and all things related to outdoor, country living.

#### **4) Outreach/Training.**

Outreach and Training serve two important purposes: 1) telling people about OCRA services and how to get help and 2) educating people about

the law and their rights. OCRA provides training on many issues to a wide variety of people. Training topics include clients' rights, abuse and neglect issues, IHSS, Medi-Cal, special education, voting rights, Social Security benefits, rights in the community, rights under new laws, alternatives to conservatorships, self-determination, and other topics. Training audiences include direct clients, family members, regional center staff and vendors, and community members. For details about self-advocacy trainings specifically, see section II.F.

During this six-month review period, OCRA presented 151 trainings with a total attendance of about 6,168 people. This is more trainings and more attendees than the last semi-annual reporting period. More than half of the outreach events and trainings are virtual, consistent with the wishes of the community who tell us that virtual events are more accessible for many reasons. OCRA staff also collaborated and presented at in-person events and enjoyed connecting and reconnecting with the community.

To help people from traditionally underserved communities, OCRA has developed target outreach plans. Each OCRA office targets at least six outreaches per year to a specific underrepresented group in the office's catchment area. These are two-year plans based upon evaluating prior outreach plans' results, new census data, a review of regional center purchase of service data, and the race and ethnicity of clients served by each regional center. This semi-annual report covers the second 6 months of a 2-year outreach cycle that began July 1, 2021. For more details on this and all outreach and training, see the report in Exhibit D.

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

From July 1, 2022, through December 31, 2022, OCRA resolved 4,550 issues for clients. Of those, all but 17 were resolved informally. Over 99 percent of all the matters that OCRA handled were resolved without using administrative hearings or court proceedings. Data showing this is attached as Exhibit E.

**C. Collaborative and harmonious working relationships are fostered.**

OCRA staff continue to collaborate with the local regional centers, stakeholders, and community members. Examples of collaboration with regional centers include participation in:

- Regional Center Diversity Committees

- Disparity Task Force Meetings
- ECT Review Committees
- Bioethics Committees
- Behavioral Modification Review Committees
- Risk Management and Planning Meetings
- Client Advisory Committees
- Primary Advisory Committee (PAC) Meetings

Some examples of collaboration with stakeholder and community groups include participation in:

- County Coordinating Councils
- Supported Life Training Planning Committees
- Meetings with counties about benefits, services, and appeals issues
- IHSS Statewide Advocates' Meetings
- DS Taskforce and Implementation Workgroups
- DDS Focus Groups
- UCEDD CAC
- State Hearings Division Stakeholder meetings
- The Arc of California planning committees
- El Arc de California
- Health & Wellness Committee-Forensic Task Force
- Criminal Justice Task Force
- Multi-Agency Advisory Board (MAAB)
- DDS Plain Language and Directives Workgroup
- DDS Regional Center Liaison Meetings
- Healthcare Task Force
- Adult Transition Task Force
- People with Disabilities and Aging Advisory Council (PWDAAC)
- Foster Youth Social Security Benefits Workgroup
- SSI Statewide Advocates' Meetings
- LA County Dependency Court Education Committee
- Kern County Superior Court/Mental Health Committee

All local CRAs participate in their regional centers' Self-Determination Program Local Advisory Committee meetings. Many OCRA staff provide training to regional center staff and vendors on topics such as clients' rights, OCRA services, or a substantive area of the law such as Social Security benefits. This has been true during the COVID-19 pandemic,

where OCRA staff have provided training by video and webinars. OCRA staff meet regularly with regional center staff and community partners to spot trends, share experiences and knowledge, and collaborate on many subjects. Most meetings are by video, but some have been in person recently. Many regional center staff have made OCRA their primary contact if their clients have legal issues.

OCRA has found, consistent with this requirement in Disability Rights California's contract with DDS, that some of the most effective advocacy takes place because of interpersonal relationships and informal advocacy. OCRA's calls come from many sources. OCRA staff have maintained the ability to resolve issues and complaints informally, and word of these successful negotiations often spread around the disability community.

#### **5) Memorandums of Understanding.**

OCRA has established Memorandums of Understanding (MOUs) with each regional center that address the center's individual needs, concerns, and method of operation. Generally, MOUs are updated as needed. For example, we may need to meet and update the MOU if we have changes in the law. These meetings have been productive and positive. OCRA has very good working relationships with most regional centers. During this review period, OCRA and these regional centers updated their MOUs: Far Northern, Harbor, Lanterman, North Los Angeles, and San Andreas Regional Center. OCRA has forwarded copies of all MOUs to DDS. Exhibit F lists the status of each revised MOU.

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

ARCA and OCRA met during this fiscal year, including discussions around legislative and state budget issues. ARCA and OCRA also serve on committees together and keep in contact to discuss issues.

#### **D. Clients and families are satisfied with the services provided.**

Disability Rights California recognizes the importance of client satisfaction. OCRA is committed to serving clients and family members in a way and with results that ensure client and family satisfaction with the services provided. In the past, OCRA used a Client Satisfaction Survey, developed with DDS many years ago. Survey results showed positive client satisfaction during each review period. OCRA is forming a committee, with client and DDS representation, to revise the survey and process. OCRA did not send the former survey to any clients during this

review period. Once the revised survey is final, OCRA will begin to send it and report the results.

An indicator of client satisfaction is the low number of grievances compared to the number of cases OCRA handles. During this review period, there were just 5 level one grievances and none escalated to a higher level. Compared to 4,550 cases handled, this low number of grievances is remarkable .

#### **7) Cases will be handled in a timely manner.**

Clients and families contact OCRA because something has gone wrong. They may be losing a government benefit, forced to move to a new more restrictive environment, or facing another urgent situation. OCRA's policy is that all calls will be returned as soon as possible, but not later than the close of the next business day. OCRA staff note this policy on the outgoing voicemail message that callers hear when reaching the office voicemail. Statewide CRAs and ACRA's handle calls in offices with a high call volume or when there are staff absences or vacancies. Staff also use electronic call logs to ensure timeliness and client satisfaction.

Once a caller completes an intake and a case is opened for a client, OCRA staff use internal timelines to move through the case timely. OCRA supervisors work with staff to track each case to see how many days it has been open and how many days it should be open, given the timelines. For example, a case under the category "Information and Referral" should be resolved within 7 calendar days. For this type of case, OCRA staff provide information, such as publications, and/or a referral to another legal aid organization, attorney, or resource. The 7-day timeline ensures the caller gets this information and referral timely. A case under the type, "Counsel and Advice" should be resolved within 28 days. The OCRA Office Manager runs a report, as a check and balance, to show each case's number of days open and highlight any cases that need more attention.

#### **E. 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 meets with the DDS contract manager during the fiscal year to review information about OCRA services in the Annual and Semi-Annual Reports. When DDS has asked to see specific data, OCRA responds by adding it to the next report. DRC's Board of Director's Community

Engagement Committee gathers input from the multicultural disability community, including people with developmental disabilities, about DRC and OCRA services. The OCRA Director and staff have served on several stakeholder committees about the fair hearing process and conservatorship reform during this review period. During these sessions, OCRA learns the developmental disability community's priorities. Underserved communities are often the focus of reform. The OCRA Director has also held listening sessions with OCRA staff to hear ideas on how to provide better services to clients. Staff ideas come from working directly with consumers and family members to hear what is important to them. Direct work includes direct case work and outreach events. Because listening has been so informative, OCRA will continue to hear from the community on how to provide high quality, efficient services with which clients are satisfied.

**F. Self-advocacy training is provided for clients 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 clients of regional center services provide at least two self-advocacy trainings for clients each year. Disability Rights California's contract with DDS mirrors this language. OCRA strongly believes in the importance of self-advocacy and requires at least one self-advocacy training by each of the 21 OCRA offices per year, far exceeding the two mandated trainings. Many offices provide more than one training per year. During this 6-month review period, OCRA staff provided 12 self-advocacy presentations statewide. Many OCRA staff talk and meet with self-advocates regularly without providing formal training. OCRA's Peer Advocate has been meeting with offices to share ideas on connecting with self-advocates and groups in different ways. Staff may present any of the DDS-approved self-advocacy trainings. To date, OCRA has developed seven packets of information to use in the approved trainings in addition to the DDS Consumer Safety materials and the living arrangement options materials developed by DDS.

Samples of the OCRA self-advocacy packets (all 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 previous Contract Manager, all agreed that OCRA should not submit duplicate training packets. As always, OCRA welcomes comments from DDS on any training packets. A list of Self-Advocacy Trainings held last year are in Exhibit G.

Self-Advocacy training survey responses from consumers are valuable to give feedback and to give us ideas for future trainings. Here is a sampling comments from training surveys, which participants completed during in-person self-advocacy trainings this review period.

### HANDS OFF MY MONEY

3. Did you learn something from this training?

YES NO



Comments: Brought up very useful points.

3. Did you learn something from this training?

"Brought up very useful points."

4. Was the speaker interesting?

YES NO



Comments: very ~~thorot~~ thorough and engaging

4. Was the speaker interesting?

"Very thorough and engaging."

8. Other comments or suggestions: Very good and

important presentation! 😊

8. Other comments or suggestions:

"Very good and important presentation! 😊"



## VOTING

5. How did this training meet your needs?

I Learned a bit more about voteing & Political Partys

5. How did this training meet your needs?

"I learned a bit more about voteing & political partys."

5. How did this training meet your needs?

Yes my Needs were met, they answered  
all my questions

5. How did this training meet your needs?

"Yes my needs were met, they answered all my questions."

5. How did this training meet your needs?

It trained me Very good

5. How did this training meet your needs?

"It trained me very good."

## EMERGENCY PREPAREDNESS

7. Comments/suggestions:

Click here to enter text.

I like the Water juice box that was  
amazing.

7. Comments/suggestions:

"I like the water juice box that was amazing."

6. Are there any issues or areas you would like OCRA to train in over the next year? *NO, There was no issues with the training*  
Click here to enter text.

6. Are there any issues or areas you would like OCRA to train in over the next year?

"No, there was no issues with the training."

### **III. TITLE 17 COMPLAINTS**

CCR, Title 17, Section 50540, sets forth a complaint procedure whereby a regional center client, 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 client protections. Nobody filed a Title 17 Complaint with OCRA during this review period, as noted on Exhibit H.

### **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 client if there is a danger to self or others or a danger of property destruction caused by the actions of a client. The Clients' Rights Advocate must investigate and approve the denial for it to be started. The regulation requires that OCRA submit a quarterly report to DDS by the last day of each January, April, July, and October. Instead, OCRA has included the reports concurrently with the contractually-required Annual and Semi-Annual reports. OCRA can submit duplicate reports quarterly to DDS, if requested. Attached as Exhibit I is the current log of Denials of Rights from the OCRA offices.

### **V. CLIENT 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 and is available in all 11 threshold languages. The grievance procedure is offered in all letters to clients or

others who contact OCRA, when an office declines to provide the requested service to that person.

During the 6-month review period, OCRA handled 4,550 matters. OCRA received 5 grievances filed during this review period. Attached as Exhibit J is the grievance chart.

## **VI. COLLECTION OF ATTORNEYS FEES**

OCRA does not charge clients, 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 like those collected by private attorneys or advocates for special education cases or other cases where there are statutory attorney's fees. Neither Disability Rights California nor OCRA ever collect attorney's fees from clients.

OCRA collected no attorney's fees during this review period, see Exhibit K.

## **VIII. CONCLUSION**

OCRA has continued to provide exceptional service to people with developmental disabilities throughout the state. Clients and callers are satisfied with OCRA's and outreach/training and casework, shown in the positive training survey responses and the low number of grievances compared to the number of cases. In just 6 months, OCRA handled 4,550 cases for 3,255 clients in a wide variety of legal problem areas. In these 6 months, OCRA also provided 151 trainings to 6,168 clients, family members, regional center staff and vendors, and interested community members - all while meeting each of its performance objectives. OCRA has surpassed parity with underserved communities such as Latinx, Black and African American, and Asian communities. OCRA staff are committed every day to helping regional center clients access services and supports to live the most independent and productive lives in the least restrictive environment. OCRA looks forward to continuing to work with people with developmental disabilities and provide the advocacy services they need.