I. INTRODUCTION

Disability Rights California provides state-wide clients’ rights advocacy services for regional center consumers pursuant to a multi-year contract, HD069010, with the Department of Developmental Services (DDS) through the Office of Clients’ Rights Advocacy (OCRA). The contract was renewed effective July 1, 2006, for a 5-year period ending June 30, 2011. This is the final Annual Report required under the contract, pursuant to Exhibit E, Paragraph 14, for Fiscal Year 2009-2010.

Disability Rights California was awarded the grant for the next five year contract, effective July 1, 2011, Contract No. HD119002.

OCRA takes great pride in its accomplishments. The statistics and work product for the past year, which are discussed throughout this report, give ample evidence of continuing effective advocacy. During the past year, OCRA resolved over 9,323 issues for consumers. OCRA also participated in 422 trainings last fiscal year, presenting to approximately 18,172 people.

Disability Rights California is pleased that this year it implemented a collaborative agreement between OCRA and People First of California to provide joint trainings to consumers in large facilities on their right to make choices in their own lives.

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

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

Disability Rights California’s contract with DDS requires performance outcomes, as established in Exhibit E, Page 6, Paragraph 3, of the contract. Each of the specific required outcomes is discussed in the following Sections A through F. The contract does not set specific numbers for performance for the outcomes. OCRA is willing to establish specific numbers in consultation with DDS, if it so desires.

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

OCRA continues its tradition of serving a large number of people with developmental disabilities. OCRA handled 9,323 issues for regional center consumers during the fiscal year. Last fiscal year, OCRA experienced a nine percent increase in cases from the previous year, 2008-2009. This year, OCRA experienced a five percent increase from 2008-2009. OCRA believes that it cannot increase the number of cases that its staff handles without adverse consequences to the services it provides, either by handling fewer direct representation cases, being only able to provide brief services, or other unanticipated outcomes.

Additionally, the breath of issues in these cases is staggering and reflects the need for staff to know the current law that affects people with developmental disabilities in a large number of areas. The statistics, attached as Exhibit B, are discussed below and show the wide variety of issues and the large number of cases handled by OCRA staff, as does copies of the last two advocacy reports, which are included as Exhibit C.

1) Advocacy Reports.

Each advocate provides on a quarterly basis a summary of at least one case that has unique situations from which others can learn and that can be used as examples of the advocacy that OCRA accomplishes. The summaries for Winter, 2010, and Spring, 2011, are compiled and attached as Exhibit C. OCRA is extremely pleased that such outstanding examples of advocacy are available to show
the value of the work that OCRA accomplishes. A few examples of the advocacy:

**OCRA Assists J.J. to Obtain Additional IHSS Hours.**

OCRA was initially contacted by J.J.’s mother, a monolingual-Spanish speaker, questioning the County’s determination that her 16-year-old son was ineligible for additional hours under the IHSS program. The County authorized J.J. a total of 53.6 hours per month of IHSS personal care services. However, no time was allocated by the County for related services.

OCRA agreed to represent J.J. in an effort to resolve this matter informally. The sole basis of the County’s denial of personal care hours was that J.J. was a minor and therefore was not entitled to related services. Following unsuccessful attempts to resolve this issue with the County Representative, OCRA agreed to represent J.J. at hearing.

At hearing, OCRA maintained that J.J. was entitled to receive both personal care and related services. The ALJ agreed with OCRA’s interpretation of the regulations and concluded that J.J. was entitled to an increase of 17.32 hours a week for related and personal care services. This resulted in an increase of 75 hours per month of IHSS retroactive to January 1, 2010

**ALJ Finds Consumer Eligible for SSI and Awards $16,000 in Retroactive Payments.**

K.G.’s mother contacted OCRA requesting assistance with a denial of SSI eligibility. K.G. is a 21-year-old who receives regional center services. OCRA agreed to represent K.G. at an SSI hearing. It was determined that K.G. met the listing for mental retardation and should have been found eligible for SSI previously. As a result of the failure of SSI to find him eligible, the ALJ found that K.G. was entitled to a retroactive payment to the date he initially applied for benefits. The ALJ awarded over $16,000 in retroactive benefits.
**OCRA Successfully Advocates for Restoration of Section 8 Voucher.**

C.P. lived with her husband in Section 8 housing. C.P. had been “hoarding.” Her husband did not believe that they would pass an inspection by the housing authority. He moved them out of their apartment and they became homeless.

The housing authority was unwilling to reinstate C.P.’s Section 8 voucher. OCRA met with the housing authority and explained the nature of C.P.’s disability and the need for subsidized housing. The housing authority agreed to reinstate the Section 8 voucher.

**OCRA Prevents Expulsion and Non-Public School Placement.**

J.M. is a foster child in elementary school. J.M. was not receiving any behavioral support services in his special education program. J.M. was suspended and the school district threatened expulsion for serious behaviors including inappropriate sexual behaviors, physical aggression, and emotional outbursts committed outside of the classroom.

The regional center contacted OCRA and referred J.M. for advocacy and representation. OCRA reviewed J.M.’s school records and regional center records. OCRA referred J.M. to a psychologist for assessment. OCRA then represented J.M. at the manifestation IEP meeting and argued that the manifestation determination should be changed to reflect that J.M.’s behaviors were directly due to his multiple disabilities. OCRA presented relevant regional center records that the school district originally failed to take into account. The new psychological report confirmed that J.M.’s behaviors were related to his disability.

The school district changed the manifestation determination. As a result of this change, the school district did not expel J.M. but did propose a non-public school placement (NPS). OCRA opposed the NPS placement on the basis that it was not the least restrictive placement and that the local public school could meet J.M.’s needs if he was provided appropriate behavioral supports and services. OCRA requested the district consider a public school placement and
conduct a functional analysis assessment (FAA), a behavior intervention plan, and a 1:1 aide. The district agreed.

J.L. was also provided with door-to-door transportation with a daily bus rider to accompany J.M. to and from school, an occupational therapy assessment, a mental health referral for counseling and therapy for mental health services, and 22 hours of compensatory education.

**C.C. Retains Transportation.**

C.C. requested assistance to appeal a suspension of transportation services. C.C. requires assistance from her supported Living Services provider (SLS) to schedule all of her transportation. C.C. was told by her new staff that C.C. should schedule her own transportation. Three months later, C.C. received suspension letters due to several no shows and late cancellations. The letters informed C.C. that she would be suspended for four months from receiving transportation services because she had violated the cancellation policy numerous times. The CRA represented C.C. at an appeal. The CRA presented witnesses and documentation to show that due to C.C.’s disability, C.C. is dependent on staff to schedule transportation. Evidence was also presented to show that C.C., the CRA, and the regional center service coordinator worked together to obtain appropriate support staff for C.C., so that she would not have any no shows or cancellations in the future. After the appeal, C.C. received a letter informing her that her transportation services had been reinstated.

2) **Analysis of Consumers Served.**

OCRA handled a total of 9,323 cases from July 1, 2010, through June 30, 2011. Included as Exhibit B is the complete compilation of data for the fiscal year.

The data has been compiled by:

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

The largest number of consumers served by age, 2,442 during this time period, has consistently been the 4-to-17 years-old age group. The next largest is the 23-40 age group with 1,291 people served. The ratio of males to females served also remains consistent. For those cases where gender is recorded, OCRA has traditionally served more males than females, with 63 percent of the consumers served being male and 37 percent being female. This roughly corresponds to the percentage of regional center consumers who are male versus female. As of January, 2008, approximately 60 percent of all regional center consumers were male and 39 percent female.

The percentage of consumers residing in the parental or other family home remains by far the largest number of consumers served with 7,306 consumers in the family home or 76 percent of the cases handled. The next largest group served is those living independently, with OCRA serving 1,062 people or 11 percent with this living arrangement.

OCRA’s statistics on the ethnicity of consumers served for the year show OCRA’s continuing commitment to serve underserved communities. DDS has changed the format for its reporting of the ethnicities of the consumers served by each regional center. DDS now reports four ethnicities and a category called other. Charts showing a comparison by percentage of the ethnicities served by OCRA and those served by the regional centers are attached as Exhibit B1. The ethnicities reports do not completely correspond but do show that OCRA is generally in parity statewide in its provision of services to the ethnicities identified as served by the regional centers statewide.

3) Outreach/Trainings.

OCRA recognizes that outreach and training are an essential part of providing effective advocacy for regional center consumers and also recognizes that trainings are one of the best ways to maximize staff and operational resources. Therefore, OCRA offers training on a
wide variety of issues to a large variety of participants, including consumers, parents, regional center staff, vendors, and other interested people. Topics covered include, but are not limited to, consumers’ rights, abuse and neglect issues, special education, voting rights, SSI, rights in the community, and conservatorships, among other topics.

During the last fiscal year, OCRA presented at 422 trainings with a total attendance of approximately 18,172 people at the various trainings. This represents a return to OCRA’s more traditional number of outreaches and people attending. Last year, during the significant changes in the Lanterman Act, OCRA’s statistics had increased 26 percent in the number of trainings and 27 percent in the number of attendees from the previous fiscal year. The current statistics represent a tremendous amount of training and is a number that OCRA hopes to maintain or increase.

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

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

From July 1, 2010, through June 30, 2011, OCRA resolved 9,323 issues for consumers. Of those served, all but 109 were resolved informally. This means that 99 percent of all the matters that OCRA handled were resolved informally. Data showing this is attached as Exhibit E.
C. **Collaborative and harmonious working relationships are fostered.**

OCRA staff makes every attempt to foster collaborative and harmonious working relationships with the consumers and parents who OCRA serve, regional center staff, stakeholders, and members of the general community. This philosophy is not only incorporated into Disability Rights California’s contract with DDS, but is also 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, by its many successes, and by its recognition as an excellent resource for people with developmental disabilities.

1) **Memorandums of Understanding.**

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

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

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

Catherine Blakemore, Executive Director, Disability Rights California, Bob Baldo, Executive Director of the Association of Regional Center Directors, and Jeanne Molineaux, Director, OCRA, meet in July, 2010, to discuss matters of interest between the two organizations. Since then, the two organizations have discussed matters regarding a case of mutual concern. No concerns about OCRA services were
identified. Further meetings with ARCA will be convened, should concerns arise.

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

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

1) Consumer Satisfaction Survey.

OCRA measures consumer satisfaction by use of an instrument developed jointly by staff, the OCRA Consumer Advisory Committee, and DDS.

From the results of the most recent survey, it is clear that consumers remain extremely satisfied with the services provided by OCRA.

Two thousand nine hundred and ninety-four (2,994) surveys were mailed out. Five hundred and two (502) people returned the survey. This represents a 17 percent return rate of the surveys.

Of those responding to the questions, 96 percent of the responders felt they were treated well by the staff, 93 percent understood the information they were provided, 93 percent believed their CRA listened to them, 91 percent believed they were helped by the CRA, and 94 percent would ask for help from OCRA again. See Exhibit G, which discusses the results of OCRA’s survey.

2) Letters of Appreciation.

OCRA staff receive numerous letters of appreciation that confirm not only the value of the services that OCRA performs, but also the manner in which the services are provided. OCRA values these letters. Below is just a sampling of the many letters received.¹

¹ OCRA is providing the letters of appreciation with the wording from the originals unless otherwise indicated.
• Once again thank you for all you have done for me. Sorry for not sending this card earlier but know I haven't forgotten all your generosity and for helping me get hours for my daughter _____. With Lots of Love.

• In behalf of me and my uncle we want to thank you for all your help. When we found out my uncle was going to be transfer to another program we had no idea what to do. We didn’t know who to go to. When we heard about you guys we were blessed. You took care of us and guided us in the whole process. I don’t think we could have done this without you guys. All of you were very friendly and very understanding. Thank you again for lending us a hand. If we ever need help we know where to go to.

• …. Thank you so much for all your help in this Herculean effort. Your knowledge of the law, as it applied to IHSS, made the difference in crafting the arguments behind the appeal, and gathering supporting evidence…

• Dios te dio Sabiduria para proteger a los que lo necesitan eres bendecida por toda la eternidad tu vida tendera luz abundante siempre y en todo lugar.... Gracias. (God gave you Wisdom to protect to the ones that need it. You are blessed for all the eternity your life will have abundance of light always and everywhere in every place....Thank You.)

• …. We greatly appreciate you for advocating for my son and every special needs family. As you know when you have a special needs family member every day life is a much bigger challenge than normal. Your organizations mission makes a huge difference in our lives and I hope you guys are around a very long time and continue to advocate for families like mine. Thank you for being there.

• …. Ms. Meyer demonstrated a tremendous amount of persistent and consistent diligence for resolving ____ case of a “Wrongful Eviction.” Ms. Meyer's level of tenacity and efficient manner is greatly appreciated. The level of collaboration
between Westside Regional Center and Protection and Advocacy generated a positive outcome as well as stellar advocacy. Both ____ and myself both agree that Ms. Meyer’s professionalism and passion for what she does is absolutely awesome.

- Thank you so much for being instrumental in ____ current placement. Your calm tenacity is very effective and has helped maintain a good working relationship with the district. I don’t now what I would have done without your help…
- Thank you for participating on the “Advocacy Panel” at our Winter 2011 conference last weekend….Your panel was very well received and it was very important part of the conference.
- Thank you so much for giving up your time to share such great info with us.
- You ladies have an amazing impact on so many families. I am blessed by the work that God is using you to do in the life of numerous kids. The reward that is in store for you is beyond anything you can imagine. No dollar figure can properly repay for the differences you have made in those that have been touched by your work and guidance.
- … “Thanks” to you & the other’s involved in the writing of the Brief … and the consideration of our other people & how it could affect them. As a lay person, I am still able to recognize the hard work & hours that went into that document. Please convey our thanks to all that were a part of it. What a team this young man has!
- I really appreciate all of your help and I am glad I met you and that I attended your class on IHSS and I am hoping that I will continue to attend other training sections from your organization. I really believed in what my son’s doctors told me that I will have to educate and take of myself in order to take care of my son.
- THANK YOU so much for all your help. You guys really make a big difference, specially in this hard time that disable, and elderly people are under attack, that’s the way it feels,you guys
are a little light at the end of the tunnel. Thank god that we still have u guys around. You guys are a great support. Thank you again and god bless you.

- The news that I received bring tears to my eyes because after so much suffering my family has went through a lot and especially my son. God Bless you for all the help that you have provided for all the families that needed the support.

3) Cases will be handled in a timely manner.

It is important that advocacy services be provided in a timely manner. Consumers and families are frequently in emergency situations, in danger of losing their placement in the least restrictive environment, losing their source of income, unable to get their medical needs met and a myriad of other dangerous or difficult situations. For this reason, OCRA has, since its establishment, had a policy that all calls will be returned as soon as possible, but not later than closing of the next business day. OCRA measures its performance in this area by use of its consumer satisfaction survey, see Exhibit G, discussed more fully above. OCRA statistics shows that 86 percent of all callers to OCRA received a call back within two days during the last fiscal year. This level of performance provides verification that cases are resolved in a timely manner. OCRA will continue to train on this requirement to ensure that it provides exceptional services for all callers.

E. 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 June 30, 2011.
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 is a knowledgeable, constructive, and helpful group of volunteers who continue to provide valuable guidance to the OCRA staff. The meetings are lively and informative and provide a forum for exchange of ideas and information. Minutes for the meeting held on September 24, 2010, were provided with the Semi Annual Report. The minutes for the February 25, 2011, meeting are included as Exhibit H.

DDS staff is invited and encouraged to participate in the next meeting, which is set for September 23, 2011, in the Bay Area.

F. 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 has been proactive in this matter and requires each of its offices to provide at least one self-advocacy training for consumers a year, so OCRA far exceeds the two mandated trainings. Many offices provide more than one training and an advocate may use information from any of OCRA’s self-advocacy packets in presenting his or her self-advocacy trainings to consumers.

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

Clients’ Rights Information (Several versions of basic materials are used.)
Voting Rights
Clients’ Rights Bingo
Hands off My $$$
Being Your Own Boss
Additionally, OCRA agreed to work with DDS on a self-advocacy training developed by DDS for consumers on consumer safety which may be used for the self-advocacy trainings.

Last fiscal year, OCRA also provided self-advocacy trainings mandated from the court-approved settlement of *Capital People First*, a law suit brought by Disability Rights California to encourage the movement of consumers from developmental centers and large facilities to the community. OCRA utilized materials developed by DDS in the self-advocacy trainings which are to be given to residents of large facilities. In addition to a DVD developed by DDS, which shows four separate consumers discussing their living arrangements, DDS developed a sticker book called *My Own Choice*. A copy of the book will be given to almost every participant in the training. The sticker book is a tool used to help individuals express their personal decisions about preferred living options.

Disability Rights California also entered into a contract with People First of California to hire consumer trainers to help conduct the trainings with OCRA staff. A list of the Capital People First trainings is included here as part of Exhibit I.

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

OCRA is required to report in its Annual Report an evaluation of the self-advocacy trainings. This year, OCRA has randomly selected consumer training satisfaction evaluations from its Capital People First Self-Advocacy Training for inclusion in the first half of the OCRA Self-Advocacy Trainings’ Evaluation binder, which is under separate cover. The second part of the Evaluation binder contains sample evaluations from other OCRA trainings. Almost without exception, consumers are pleased with OCRA trainings.

Self-Advocacy Trainings held last year are listed in Exhibit I.
III. TITLE 17 COMPLAINTS

CCR, Title 17, Section 50540, sets forth a complaint procedure whereby a regional center consumer, or his or her authorized representative, who believes a right has been abused, punitively withheld or improperly or unreasonably denied, may file a complaint with the Clients’ Rights Advocate. The Complaint process is similar to that established by Welfare & Institution Code, Section 4731. However, the later law offers more consumer protections. There was one Title 17 Complaint filed during the last fiscal year. Please see Exhibit J for a chart showing the Title 17 Complaints.

IV. DENIAL OF CLIENTS’ RIGHTS

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

V. CONSUMER GRIEVANCES

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

Nine grievances were filed by consumers or their families during the past year. Of the nine grievances, OCRA was able to take further action in three, in order to meet some of the consumers’ concerns.
Information concerning each grievance has previously been submitted to DDS. Attached as Exhibit L is a chart detailing the grievances filed against OCRA during this period.

**VI. COLLECTION OF ATTORNEYS FEES**

OCRA does not charge consumers, their families or advocates fees for services nor does OCRA seek to recover costs from these individuals. Clients’ Rights Advocates who are licensed to practice law in California, or Assistant or Associate Clients’ Rights Advocates working under the supervision of an attorney, can collect attorney’s fees and costs similar to those collected by private attorneys or advocates for special education cases or other cases where there are statutory attorney’s fees. OCRA collects fees only in special education cases or Writs of Mandamus. Fees and costs may be negotiated at mediation or can be received in those cases where an Administrative Law Judge has made a determination that the petitioner is the prevailing party. Fees are collected from the opposing party, which is normally a school district. Costs include any expenses to the Petitioner or OCRA for suing, such as filing fees or costs of expert evaluations. Neither Disability Rights California nor OCRA ever collect attorney’s fees from consumers.

The amount collected for any individual case depends upon several factors such as the geographical location where the consumer lives, and the years of experience of the attorney who handled the case. Attached as Exhibit M is a chart showing the amount and source of any attorney’s fees collected by OCRA during the past fiscal year.

**VII. RECOMMENDATIONS FOR ENHANCEMENT OF SERVICES**

The contract between DDS and Disability Rights California requires that on an annual basis Disability Rights California make recommendations to DDS as to potential methods of enhancing the services that OCRA provides for regional center consumers.

As reflected in the case load statistics, the number of consumers and their families requesting assistance was five percent higher than
2008-2009. This increase challenged OCRA staff’s ability to provide quality, timely advocacy. We are proud of the fact that OCRA staff were able to respond to the increased need for services. Although we believe the large number of requests for assistance at some regional centers justifies the need for additional staff, we understand this is not feasible given the state’s fiscal climate. We are extremely appreciative of DDS’ support of the OCRA program during these difficult economic times.

We also appreciate the opportunity presented by the Capitol People First settlement which targeted a portion of OCRA training and outreach efforts to individuals residing in nursing and other large congregate facilities. This training provided an opportunity to work collaborative with People First of California and reach consumers who may have a more difficult time accessing Disability Rights California services through other means. We look forward to other opportunities to work with DDS and regional centers to serve individuals with developmental disabilities.

**VIII. CONCLUSION**

OCRA’s statistics show its staff’s continuing commitment to the protection of the rights of people with developmental disabilities. OCRA handled over 9,323 cases the last year, provided 422 trainings to over 18,172 people, and met each of its performance objectives. OCRA remains dedicated to ensuring that the rights of all of California’s citizens with developmental disabilities are enforced.