

I. INTRODUCTION

Disability Rights California, formerly Protection and Advocacy, Inc., provides state-wide clients' rights advocacy services for regional center consumers pursuant to a five year contract, HD069010, with the Department of Developmental Services (DDS) through its Office of Clients' Rights Advocacy (OCRA). The current contract is effective through June 30, 2011.

OCRA takes great pride in its accomplishments. The statistics and work product for the past six months, which are discussed throughout this report, give ample evidence of continuing effective advocacy. During the past six months, OCRA resolved over 4,556 issues for consumers and participated in approximately 347 trainings presented to approximately 10,887 people.

OCRA currently operates 23 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.

Disability Rights California is concerned about the impact any future budget reductions will have on its ability to provide the same level of services to regional center consumers. Although we were able to absorb the 2008 reduction without adversely affecting our operations, any further funding reduction will likely come at the expense of client services. We look forward to meeting with DDS to discuss the budget.

II. PERFORMANCE OBJECTIVES

Disability Rights California's contract with DDS requires performance outcomes, as established in Exhibit E, Paragraph 3, of the above-

referenced 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 conjunction 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 4,556 issues for regional center consumers during the first 6 months of the fiscal year. The breadth of issues in these cases is staggering and mandates that staff know the current law that affects people with developmental disabilities in an extremely large number of areas. The statistics, attached as Exhibit B, are discussed below and show the wide variety of issues and the large number of cases handled by OCRA staff.

1) Advocacy Reports.

Each advocate provides on a quarterly basis a summary of at least one administrative hearing or other 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 Fall, 2008, and Winter, 2008, 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:

G.L. Found Eligible for Medi-Cal.

G.L. was diagnosed with cancer but did not have any medical insurance to pay for the cost of the surgery his physician was recommending. G.L. had applied for Medi-Cal but was experiencing long delays in the county processing his application. After several months of waiting, G.L. was referred to OCRA for assistance. OCRA agreed to provide direct representation. OCRA requested that the county find G.L. presumptively disabled for Medi-Cal because he was a person with mental retardation and he had cancer. The county denied presumptive disability.

OCRA filed a request for an administrative hearing. In preparation for hearing, OCRA requested that the regional center fund an updated psychological evaluation because the most recent one was 20 years old.

The county had sent G.L.'s application to the State Disability Evaluation Determination (DED) office. The updated psychological evaluation was provided to the state DED eligibility worker who found G.L. had a disability which qualified him for Medi-Cal. When the county determined that G.L. was eligible for full scope Medi-Cal with no share of cost, the hearing request was withdrawn.

S.P. Gets a Spanish Speaking 1:1 Aide in an Autism-Specific Special Day Class.

S.P. is a 6-year-old monolingual Spanish-speaking child with Autism. S.P.'s mother contacted OCRA for help because S.P. would plead not to be sent to school each morning, and because she was not making any educational progress. OCRA made a classroom observation, and found that S.P. was not able to communicate even her most basic needs to her teacher or to the classroom aide, because neither of them spoke or understood any Spanish. In addition, the curriculum and teaching methods being used in S.P.'s classroom had not been designed for children with Autism. As a result, S.P. was observed to spend most of her time crying or wandering aimlessly around the classroom.

OCRA advocacy at several IEP meetings resulted in a change in placement to an Autism-specific special day class (SDC), but there were no Spanish speakers in the new classroom.

Because the district refused to provide a Spanish-speaking classroom aide to support S.P., OCRA filed for hearing against the district. After two mediation sessions, the school district agreed to provide S.P. with a 1:1 Spanish-speaking aide from a non-public agency, trained in ABA, to support S.P. in her new classroom. The district also agreed to provide S.P. with 76 hours of 1:1 in-home ABA instruction during the 2008-2009 extended school year.

SSI Reinstated at Hearing.

T.O. has been a regional center consumer for over twenty years. He participated in a sheltered and assisted work program through a program vendored by the regional center. In 1999, T.O.'s "earnings" through the work program were improperly reported by the work program to the IRS on a 1099 Independent Contractor Earnings Form. In August, 2006, the SSA issued a Notice of Termination of Benefits and an Overpayment Notice,

based upon the contention that T.O. had been engaged in substantial gainful employment (SGA) since 1999 due to his earnings.

OCRA submitted a Request for Reconsideration and an Overpayment Waiver Request. The waiver was put on hold by the SSA pending the review of the Reconsideration. The matter was not favorably resolved at the Reconsideration, so an Administrative Hearing was requested. The hearing was held in August, 2008. A favorable decision was issued.

The main issue on appeal was whether T.O.'s work established an ability to perform SGA. Based upon evidence produced regarding the sheltered nature of the work setting, the relaxed job duties, and the low productivity ratings, the ALJ found that all work performed was subsidized, and that at no time had SGA been performed, nor did T.O. have the ability to perform SGA.

Based upon the foregoing, T.O. was found to be eligible for benefits at all times. The termination notice was rescinded, thereby cancelling the alleged overpayment of over \$72,000.

J.H.'s Receives More Than \$20,000 in Retroactive Payments.

J.H. is a 9-year-old with severe disabilities, whose mother is his primary care provider. After undergoing major surgery in late 2005, J.H.'s paramedical needs increased. On several occasions, beginning in January, 2006, J.H.'s mother notified IHSS about the impact of J.H.'s surgery, but the county failed to conduct a reassessment, and no adjustment was made in the number of IHSS hours.

J.H.'s mother contacted OCRA for help. OCRA filed for hearing, and then agreed to a conditional withdrawal when IHSS agreed to conduct a reassessment of J.H.'s needs. As a result of the reassessment, J.H. was awarded the maximum of 283 IHSS hours per month. Even though the county had become aware of J.H.'s increased needs in early 2006, it would only agree to pay retroactively from August, 2007. OCRA filed for hearing again.

OCRA met with the appeals worker to review the file, and pointed out several instances of clear documentation of J.H.'s additional needs, going

back to January, 2006. As a result of this meeting, the county agreed to pay the appropriate number of retroactive hours. J.H. received retroactive payments of over \$20,000.

2) Analysis of Consumers Served.

OCRA handled a total of 4,556 cases from July 1 through December 31, 2008. This represents a significant provision of advocacy service and an increase from this period last year. The complete six-month compilation of data is included as Exhibit B. 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)

DDS had funded additional advocacy staff for OCRA offices in San Diego, Central Valley, and Inland regional offices during last fiscal year. Unfortunately, the additional funds were not reauthorized due to difficulties with the state budget. Therefore, OCRA was not able to continue the increased advocacy staff.

The majority of the OCRA statistics remain consistent with OCRA's previous statistics. For example, the largest number of consumers served by age, 1,293 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 671 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 64 percent of the consumers served being male and 36 percent being female. This roughly corresponds to the percentage of regional center consumers who are female versus male. As of December 31, 2007, the most current date for which data is available from DDS, 61.30 percent of all regional center consumers were male and 38.70 percent were female.

The percentage of consumers residing in the parental or other family home remains by far the largest number of consumers served with 3,198 consumers in the family home or 70 percent of the cases handled. The

next largest group served is those living independently, with OCRA serving 581 people or 14 percent with this living arrangement.

OCRA's statistics on the ethnicity of consumers served from July 1, 2008, through December 31, 2008, show OCRA's continuing commitment to serve underserved communities.

The percentage of consumers from various ethnicities served by OCRA is:

Ethnicity	% OCRA Clients 7/1/08 - 12/31/08	% OCRA Clients 7/1/07 - 12/31/07	% RC Clients Dec. 2007
African-American	10	9	10.35
Latino	33	31	31.92
American-Indian or Alaskan Indian	1	1	.41
Asian	4	10	5.90
Pacific Islander	2	1	2.46
White	45	44	41.74
Multicultural (Self- Identify)	4	4	Not listed
Refused to State/Other	3	4	7.21

OCRA's statistics show that OCRA's service to various ethnic groups is at parity or above with the number of consumers of each ethnicity served by the regional center, except for Asian, which is only one percent below the number served by the regional centers.

The types of problems which the offices handle remain fairly consistent. OCRA handled, during the six-month period, 1,054 special education cases, 1,327 regional center matters, and over 500 cases dealing with income maintenance, which includes Social Security and In-Home Support Services, and over 100 cases each in the areas of abuse, conservatorship, consumer finance, discrimination other than employment, family law, health, housing, and personal autonomy. Taken together, the problem codes relay the broad areas of law with which OCRA staff need to be familiar.

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, Medi-Cal and Medicare issues, and conservatorships, among other topics.

During the past six months, OCRA presented at 347 trainings with a total attendance of approximately 10,887 people at the various trainings. This is an outstanding performance by OCRA staff.

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

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

From July 1, 2008, through December 31, 2008, OCRA resolved 4,556 issues for consumers. Of those served, all but 56 were resolved informally. This means that 99 percent of all the matters that OCRA handled were resolved informally. Only 56 cases involved direct representation at hearing. Data showing this is attached as Exhibit E.

Collaborative and harmonious working relationships are fostered.

If at all possible, OCRA staff attempts 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 also represents an internalized recognition that some of the most effective advocacy takes place at the level of interpersonal relationships and informal advocacy. The success of this philosophy is demonstrated by the number of calls we receive, by OCRA's many successes, and by its recognition as an excellent resource for people with developmental disabilities. Specific examples of collaboration, in addition to those discussed in sections above, are discussed below.

1) Memorandums of Understanding.

OCRA has established Memorandums of Understanding (MOUs) with each regional center that address 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 with each of the regional center 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. All but 2 of the MOUs have been complete and of those, one remains outstanding and the other has been agreed to and needs signing by the regional center director.

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).

Jeanne Molineaux, Director, OCRA, and Bob Baldo, Executive Director of the Association of Regional Center Directors, met on July 17, 2008. At that time, there were no outstanding issues. Further meetings with ARCA will be convened, should concerns arise.

Consumers and families are satisfied with the services provided.

PAI 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 Consumer Advisory Committee, and DDS. From the results of the most recent survey, it is clear that OCRA consumers remain extremely satisfied with the services provided by OCRA.

Three hundred and seventy-six surveys were mailed out. 96 people returned the survey. This represents a 26 percent return rate of the surveys. Such a large return rate to a survey is unusual. Of those responding to the questions, 89 percent of the responders felt they were treated well by the staff, 90 percent understood the information they were provided, 86 percent believed their CRA listened to them, 89 percent believed they were helped by the CRA, and 89 percent would ask for help from OCRA again. See Exhibit G which discusses the results of OCRA's survey. These are excellent survey results, for which OCRA is justly proud.

2) Letters of Appreciation.

OCRA staff receive many letters of appreciation from consumers and others. Below are quotes from a few of the letters¹:

If no one has told you lately, you are truly a prince among gentlemen!... (W)e are hoping ___ will soon have an opportunity to attend the ___ Day Program. However, no matter what transpires...I know you used your very best effort. Your commitment, dedication and expertise is sincerely appreciated.

Thanks! Danke! Gracias! Merci! Arigato! Grazie! Thank you for your support, keeping the van means a lot to our family.

¹ Quotations are repeated as stated in the letters, except for the deletion of names.

Had it not been for Clients Rights Advocacy I don't think I would have won the case. I assumed since IHSS said she was not eligible for the services they must be rights. When I called your office I was treated with respect and my concerns were immediately addressed....As you know my husband is also disabled and we could never have afforded to fight this if we had to pay. The fact that your services are at no cost to the client is wonderful. There are many programs and services I have sought for ____, but none have been as helpful or easy to access as yours. I thank you once again, for assisting us. I will be sure to refer your agency to other parents in similar situations.

Without your help this would not have been possible as prior to Clients' Rights involvement we had already been through a lengthy and difficult process.

As our appeal process has continued, Katie continues to be an invaluable resource. She is a pleasure to deal with, and she is very knowledgeable about.... She represents your organization well. Thank you very much.

Thank you! So very, very, much for the way you dealt with my matter.....

...Anyway, my point is, **thank you all** for your wonderful support. You have really changed ____'s life and ours, as well. It is so wonderful to know that...No matter what happens to me or ____, there will be guidance and support for ____. Please know how appreciated you are and that you have brightened many days for ____. I'm not sure where I fall on the issue of angels walking the earth, but if they do, you all qualify.

I could not imagine having a better advocate for my son. You are very much appreciated!!

Forgive me for sounding redundant but words cannot express the profound sense of appreciation and admiration that I have for you. On behalf of my son and entire family I thank you from the bottom of my heart.

Thank you so much for all of your help and advice with ____'s placement situation. I was feeling a big lost & not knowing how to proceed. Your help really invigorated me and encouraged me to keep up the push. I was really happy when you told me to call anytime with questions. I know you are really very busy & I appreciated your support! Thank you!

Thank you for the presentation. I learned that I have the right to get married and have kids. I have the right to live in my own place. Thank you for the folder.

Thanks and I quote "My rights." Need I say more—wow! I was floored. Thank you so much for helping my students become more aware of their rights.

With your very talented and whole-hearted help, ___ gets \$870/per month for his SSI benefit. God richly bless you.

Thank you for helping ____. These children would be silent without you.

We couldn't have done it without you, thank you very much, for your patience, time, energy, knowledge and taking up this case. I'm still hopeful that, one day, ___ will be able to come to you and thank you personally.

There is no way to thank you enough for all you have done to help ____. You went out of your way to assist him and I am ever grateful. Through your advocacy, he is becoming even more of a self advocate.

On behalf of the members of the Supported Employment/Transition Committee, I wanted to express my sincere appreciation to you for your presentation on transition services issues and other topics, which arise when our clients are involved in the transition process from public school to the adult world. Our group was quite impressed with your presentation and found your information quite useful, based on the numerous questions they asked of you. We at Harbor are so fortunate to have individuals like you, who take time out of their busy schedule to assist us in building our interagency relationships. I look forward to working with you again in future events. I truly appreciate your commitment, whenever I ask you to speak to one of my groups, you always come through.

Thank you so much for all your hard work and sound advice. Your supervisor must be very pleased to have found you.

Thank you for all that you do, have done, and will continue doing for my son.

___ used his Section 8 voucher to move into his own apartment yesterday. He is so very happy, and wanted me to tell you that he finally moved. Thank you for your assistance! It made a very real difference in ___ 's life.

On behalf of ___ I'd like to extend our sincerest thanks for taking the time to come and present to our clinical staff. It was an honor to meet you and wonderful to hear about ways to further empower our clients and their families. Thank you for all of the great work that you do!

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 show that 79 percent of all callers to OCRA received a call back within two days during the first half of this 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.

B. 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. Effective December 13, 2008, the Disability Rights California Board of Directors made a decision to move the OCRA Advisory Committee to be a board committee, instead of a stand-alone committee. The change was made for both effectiveness and fiscal reasons. Attached as Exhibit H is a list of the members of the OCRA Advisory Board Committee effective December 31, 2008.

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

The Board OCRA Advisory Committee is a knowledgeable, constructive, and helpful group of volunteers who continue to provide valuable guidance to the OCRA staff. The meetings are lively and informative and provide a forum for exchange of ideas and information. Minutes for the meeting held on August 28, 2008, are attached as Exhibit H.

DDS staff is invited and encouraged to participate in any of the meetings set for 2009. They are:

March 6, 2009 Sacramento
September 11, 2009 Bay Area

C. 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. Many offices provide more than one training.

To date, OCRA has developed five separate packets of information for OCRA staff to use in the mandated trainings. Samples of the packets were previously provided to DDS and are contained in OCRA's Annual Report provided to DDS on September 1, 2007. In December, 2008, DDS sponsored on consumer emergency preparedness for OCRA staff. Staff is now developing a training from that material to use as an additional self-advocacy training. Self-Advocacy Trainings held to date this year are listed in Exhibit I.

III. DENIAL OF CLIENTS' RIGHTS

CCR, Title 17, sec. 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 of each January, April, July, and October. OCRA is including the reports concurrently with the contractual date to provide OCRA's semi-annual report. If this is not acceptable to DDS, OCRA will submit duplicate reports as requested. Attached as Exhibit J is the current log of Denials of Rights from the OCRA Offices.

IV. 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.

Four grievances were filed by consumers or their families against OCRA during the last two quarters. Findings by Disability Rights California and DDS upheld the actions of OCRA. Information concerning the grievances has previously been submitted to DDS. Attached as Exhibit K is a chart detailing the grievances filed against OCRA during this time period.

VII. CONCLUSION

OCRA's statistics show its staff's continuing commitment to the protection of the rights of people with developmental disabilities. OCRA handled over 4,556 cases the last six months, provided 347 trainings to over 10,887 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.

Disability Rights California remains greatly concerned about the impact any future budget reductions will have on OCRA's ability to provide the appropriate levels of service to regional center consumers. Although Disability Rights California was able to meet the 2008 reduction without strongly affecting its operations, any further funding reduction will likely come at a diminution of client services. We look forward to meeting with DDS to discuss the budget.

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