# Protection and Advocacy of Beneficiaries of Social Security (PABSS)

### **Web Based Reporting System**

Please log in using your agency's assigned username and password

Username		
Password	making common service is a common service in the common service in the common service is a common service in the common service	
Constraint	Log In	

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#### Welcome to the Social Security Web Report System, (PABSS)

To begin a new report, please select the Create New Report link. To continue on a report that has been started, select the Edit Report link. To view or print submitted reports, select the View Completed Report link. To generate reports, select the Report Generator link.

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Edit Demo	Report			
Name	Demo Report			
FY 2006 1ST E	Bi-Annual Report	Reporting Perio	o <b>a</b>	
	Grant Award No	<b>Imber</b> 123456	Report Prepared By	
Matt Hayden				
		Save & Continue	Add Attachments	Cancel

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Part I - Quantitative Statistics ▶ Part II - Narrative Reporting ▶

Part I - Quantitative Statistics Section A: Information and Referral

How many individuals received Information and Referral under the PABSS program during the Report Period? (Do not count individuals more than once for this response.) **Individuals Receiving I&R** 

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during the report per	on and Referral requests were made usiod? (Include all I&R requests, even in the should equal or exceed Section in the same to	f more than one for some

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Part I - Quantitative Statistics Section B: Individuals and Issue Area Service Requests/We Individuals  a. How many individuals had open PABSS issue area service requests at the start of the reperiod?  b. How many new PABSS individuals were added during the report period?	
c. Total number of individuals with all issue area service requests that were closed during the report period under the PABSS program	he

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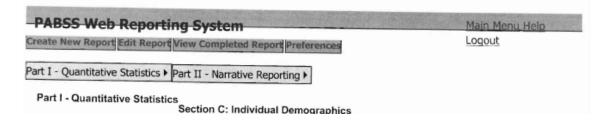
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Part I - Quan	titative Statistics Section	B: Individuals a	and Issue Area Servi	ce Requests/Workload	d Statistics
Services a. Total PABS	SS issue area service reque	ests open at the	start of the report pe	riod.	
	new PABSS issue area ser				
c. rotal numb	per of issue area service re	quests closed d	uring the report perio	)d?	
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Part I - Quantitative Statistics Section C: Individual Demographics	
1. Please provide counts of individuals served by Gender: a. Male	
b. Female	
Previous Question Save Cancel Next Question Add Atta	achments Validate Report



# 2. Please provide counts of individuals served by race (NOT ETHNICITY):

a. American Indian or Alaska Native	
b. Asian	
d. Black or African American	
e. Native Hawaiian or Other Pacific Islander	
f. White	
g. Unknown	

Add Explanati	ion					
xplanations						
There are n	o data records to displa	y.				
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Part I - Quantitative Statistics ▶ Part II - Narrative Reporting ▶

Part I - Quantitative Statistics Section C: Individual Demographics

- 3. Please provide counts of individuals receipted by Age Bracket:
- a. 14 to 18
- b. 19 to 21
- c. 22 to 40
- d. 41 to 59
- e. 60 to 64


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Part I - Quantitative Statistics Section C: Individual Demographics	
Please provide counts of individuals receipted by Beneficiary	
Status.	
a. SSI eligible b. SSDI eligible	
c. Dually eligible	
c. Dually engine	
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Part I - Quantitative Statistics ▶ Part II - Narrative Reporting ▶	
Part I - Quantitative Statistics Section C: Individual Demographics	
Please provide counts of individuals receipted by Primary Disability:  a. Absence of extremities	
b. Autism	
c. Auto-immune (lupus, thyroid, ALS, etc.)	-
d. Blindness (both eyes)	
e. Cancer	
f. Cerebral palsy	
g. Deaf-blind	
h. Deafness	
i. Diabetes	
j. Digestive disorders (chronic pancreatitis, esophageal stricture, fistulae, chronic liver, etc.)	
k. Epilepsy	
I. Genitourinary conditions (kidney, prostate, etc.)	
m. Hard of Hearing (not deaf)	
n. Heart and other circulatory problems including cardiovascular	
o. HIV/AIDS	
p. Mental illness (diagnosis according to DSM-IV)	
q. Mental retardation	
r. Multiple sclerosis	
s. Muscular dystrophy	
t. Muscular / Skeletal impairment (arthritis, fibromyalgia, osteogenesis imperfecta, osteomyelitis,	
etc.) u. Neurological disorders (brain tumors, convulsive disorders, Parkinson, etc.)	
v. Other emotional/behavioral (Provide detail)	
Add Explanation	
Explanations	
There are no data records to display.	A. Maria and Maria and A.
w. Other intellectual such as ADD/ADHD (Provide detail)	
Add Explanation	
Explanations	
There are no data records to display.	

x. Physical / orthopedic including spinal cord injuries, paraplegia, quadriplegia, back problems, etc.

y. Respiratory disorders (emphysema, asthma, pulmonary hypertension, cystic fibrosis, etc.)	Same a management of the second of the secon
z. Specific learning disabilities (SLD)	
aa. Speech impairment	
bb. Spina bifida	
cc. Substance abuse (alcohol or drugs)	
dd. Tourette syndrome	
ee. Traumatic brain injury (TBI)	
ff. Visual Impairment (not blind)	
gg. Disability not known/Other than Above (Specify)  Add Explanation	<u></u>
Explanations	
There are no data records to display.	
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## Enter Report Data **PABSS Web Reporting System** Main Menu Help Create New Report Edit Report View Completed Report Preferences Logout Part I - Quantitative Statistics ▶ Part II - Narrative Reporting ▶ Part I - Quantitative Statistics Section D: Major Source of Concern Please Provide counts of all PABSS issue are service request receipts by major source of individual's concern for the current report period: 1. State Vocational Rehab Agency (public VR program) 2. Employment Networks (SSA contractor) 3. Agencies other than 1. or 2. above 4. Employment discrimination – hire, fire, promotion 5. Employment wages and benefits 6. Housing 7. Healthcare (not 5 above) 8. Insufficient/improper benefits planning 9. Transition services (Student beneficiary between 14-18 (or under age 22) engaging/needing a transition plan) 10. Post Secondary accommodation 11. Transportation 12. Social Security benefits cessation based on SGA (including CDR's) - not Overpayment 13. Benefits Questions/Work Incentives - Not 12 or 14 14. Work Related Overpayment 15. Other (IF SELECTED MUST SPECIFY) Add Explanation **Explanations** There are no data records to display.

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Part I - Quantitative Statistics Section E: Closed Issue Area Service Requests	
What was the problem/sub-problem area? a. [AT] Assistive Technology	
b. [Education] Transition school to work	
c. [Employment] Discrimination in employment benefits	
d. [Employment] Discrimination in hiring	
e. [Employment] Unlawful termination / firing	
f. [Employment] Other employment discrimination	
g. [Employment] Reasonable accommodation — not d, e, or f from above	
h. [Employment] Service provider issues – not c-g above	
i. [Employment] Wage and hour issues	
j. [Financial Entitlements] SSI: Overpayments based on work issues	
k. [Financial Entitlements] SSDI: Overpayments based on work issues	
I. [Financial Entitlements] (other) - Specify	Sucaceu a Lees Marie and
Add Explanation	
Explanations	
There are no data records to display.	
m. [Healthcare] Medicaid only issues	
n. [Healthcare] Medicare/Medicaid issues	
o. [Healthcare] Medicare only issues	
p. [Healthcare] Private Insurance Issues	
q. [Housing] Accommodations in housing	
r. [Housing] Subsidized housing/Section 8	
s. [Housing] Rental termination – not q .	
t. [Housing] Other - Specify	-64
Add Explanation	
Explanations	
Explanations  There are no data records to display.	
There are no data records to display.	
There are no data records to display.  u. [Childcare]	

Enter Report Data	
y. [Post-Secondary Ed] Accessibility	
z. [Post-Secondary Ed] Funding issues	
aa. [Post-Secondary Ed] Grievance Against College - Not y or z above	
bb. [Post-Secondary Ed] Other – Specify	
Add Explanation	
Explanations	
There are no data records to display.	
cc. [Services] Personal assistance – not Employment	NAME OF THE OWNER OWNER OF THE OWNER O
dd. [Transportation]	200000000000000000000000000000000000000
ee. [Benefits Planning] referral / access to BPAO services	
ff. [Other] (IF SELECTED MUST SPECIFY)	
Add Explanation	
Explanations	
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There are no data records to display.	
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Part I - Quantitative Statistics ▶ Part II - Narrative Reporting ▶

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Part I - Quantitative Statistics Section E: Closed Issue Area Service Requests

a. Issue Resolved in Individual's Favor	t?
b. Issue Partially Resolved in Individual's Favor	
c. Issue Lacked Legal Merit	
d. Individual decided not to pursue resolution or Individual Withdrew Complaint (Not e-g below)	
e. Other Representation Obtained (Individual found other representation)	
f. Individual Not Responsive to Agency / Individual refused to cooperate with P&A	
g. Services Not Needed Due to lost contact, Death, Relocation, etc.	
h. Advocacy efforts/appeals were unsuccessful (Issue not resolved in Individual's Favor)	
i. Other (IF SELECTED MUST SPECIFY)	<u> </u>
Add Explanation	
Explanations	
There are no data records to display.	

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Part I - Quantitative Statistics Section E: Closed Issue Area Service Requests

#### What was the highest intervention strategy used?

- a. Short Term/Technical assistance
- b. Informal Resolution
- c. Investigation/Monitoring
- d. Negotiation
- e. Mediation / Alternative Dispute Resolution
- f. Administrative Remedies
- g. Legal remedy / Litigation
- h. Class Action Suits
- i. Systemic / Policy activities


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Part I - Quantitative Statistics

Section E: Closed Issue Area Service Requests

#### As a result of P&A intervention, the following major outcome was achieved:

- a. Individual gained / maintained access to services including those of VR, EN or other agency
- b. Individual obtained employment
- c. Individual regained employment
- d. Individual maintained employment
- e. Individual advanced in employment
- f. Individual's employment opportunities increased
- g. Individual obtained an increase in salary and/or benefits
- h. Validity of discrimination complaint was upheld
- i. Overpayment situation addressed (it doesn't matter if it was waived or the efforts weren't successful)
- j. Individual acquired knowledge concerning his/her rights
- k. Outcome information is not available
- I. Other outcome (IF SELECTED MUST SPECIFY)

Add Explanation

Explanations

There are no data records to display.

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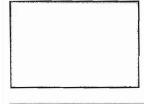
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Part I - Quantitative Statistics ▶ Part II - Narrative Reporting ▶

Part II - Narrative Reporting Section A: Description of Progress and Status Update

Please provide a brief overview of overall project status, staff changes, staff training or other major developments with regard to the PABSS program. This could include information about boards and committees where decisions are made concerning disability service delivery and local policy.

**Progress and Status Update** 



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Section B: Detail of Actions Taken on the Project

Issue Area Service Requests Summaries: [Please provide summaries of three Issues/ Service Requests undertaken as part of the PABSS project. Indicate clearly the issue or problem, the PABSS intervention, and the results if known]

Issue Area Service Requests Summaries

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Part II - Narrati	ve Reporting	Detail o	of Actions	Taken on the Proj	ect	
	Section B.	Detail	Actions	raken on the rioj	Outreach Stat	istics:
Total Number of	of Outreach/Presentation	ns				
Total Number of	of Persons Reached by O	utreach/	Presentat	tion Events		
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Part II - Narrative Reporting Section B: Detail of Actions Taken on the Pro	iect	
Other Information Dissemination Activities: (Number of In 1. Radio/TV appearances by PABSS staff	nstances)	
2. Newspaper/Magazine/Journal articles prepared by staff		
3. PSAs/videos/films aired by the Agency		
4. Reports disseminated		
5. Publications/Booklets/Brochures disseminated		
6. Number of Website hits		
7. Other media activities (IF SELECTED MUST SPECIFY)		Allegadis spirits at the same of
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Explanations		
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Part II - Narrative Reporting Section B: Detail of Actions Taken on the Project

Outreach Narrative: [Describe the agency's outreach efforts. Describe the trainings presented by the staff including information about the topics covered, the purpose of the training, and a description of the attendees. Describe media events, informational materials developed or other activities undertaken as part of the PABSS project.] **Outreach Narrative** 

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Part II - Narrative Reporting
Section C: Problems Encountered and Steps Taken to Resolve Problems

Problems encountered and steps taken to resolve problems: [Please provide detail information about problems encountered in implementing or administering the PABSS program and actions you have taken to resolve the problems you encountered.]

Problems encountered and steps taken to resolve problems

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Part II - Narrative Reporting Section D: Planned Future Activities	
Planned activities: [Please provide activities you plan to under objectives of the PABSS project.]	take to further the

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Part II - Narrative Reporting Section E: Diversification Activities	
Diversification activities: [Please provide a description of a	ctivities undertaken to
biversification activities. [Flease provide a description of a	ctivities undertaken to
address the needs of individuals with disabilities from dive	
address the needs of individuals with disabilities from dive communities.]	
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#### **Privacy Act Statement**

SSA is required to collect this information under section 1150 of the Social Security Act (the Act). We use the information to manage the Protection and Advocacy for Beneficiaries of Social Security programs, with particular emphasis on contract administration, budgeting, and training.

There are certain situations authorized by Federal law in which SSA may release the information you give us through this Project. For example, we release the information to a congressional office in response to an inquiry that office may make at your request.

Explanations about these and other reasons why information you provide us may be used or given out are available in Social Security Offices. If you want to learn more about this, contact any Social Security Office.

#### **Paperwork Reduction Act Statement**

Paperwork Reduction Act Statement - This information collection meets the requirements of 44 U.S.C. § 3507, as amended by section 2 of the <u>Paperwork Reduction</u> Act of 1995. You do not need to answer these questions unless we display a valid Office of Management and Budget control number. We estimate that it will take about 60 minutes to read the instructions, gather the facts, and answer the questions. You may send comments on our time estimate above to: SSA, 6401 Security Blvd, Baltimore, MD 21235-6401. Send only comments relating to our time estimate to this address, not the completed form.

See Revised Paperwork Reduction Act Statement

# SSA will insert the following revised PRA Statement into the form at its next scheduled reprinting:

Paperwork Reduction Act Statement - This information collection meets the requirements of 44 U.S.C. § 3507, as amended by section 2 of the <u>Paperwork Reduction Act of 1995</u>. You do not need to answer these questions unless we display a valid Office of Management and Budget control number. We estimate that it will take about 60 minutes to read the instructions, gather the facts, and answer the questions. Send <u>only</u> comments relating to our time estimate above to: SSA, 6401 Security Blvd, Baltimore, MD 21235-6401.