

Applicants should note that they may use cooperative agreement funds, as noted in Section I, Section E.1.B, to improve their capacity to operate in an electronic environment.

- *Attend training designed to improve the quality of core activities.* Required training is described in Section I.E.2.

- *Plan for project continuation when cooperative agreement funding ends.* SSA is interested in funding projects which focus on developing their organizational capacity to serve disability benefit claimants, and which make use of partnerships with other community service providers, and which leverage existing funding and resources to achieve outcomes.

B. Optional Activities—Cooperative agreement funds may also be used to perform other functions, particularly those that will help homeless individuals with disabling impairments to attain stable supportive housing, recover, attain employment, and use benefits to meet basic needs. Funds may be used to:

- *Develop and improve representative payee services.* Grantees may assume the responsibilities of a representative payee (payee), or may recruit and train volunteer payees. Examples of how funding may be used include setting up an accounting system; working with a local bank to establish a group and/or individual accounts; and training grantee staff, family members of clients, or community volunteers to provide payee services. Applicants may wish to refer to information for organizational payees available at <http://www.ssa.gov/payee/organ.htm> in order to get ideas about how to use funds to improve representative payment.

- *Screen claimants for “presumptive disability (PD).”* Under SSA program rules, an SSI claimant may receive payments, for up to six months, based on a presumption of disability (PD). SSA or the DDS must have enough evidence that the claimant will meet SSA’s strict definition of disability in order to make a PD determination. Federal regulations require SSA to make a final medical determination within six months following application. Applicants that propose to conduct PD screenings for SSA must include a description of the activities they will undertake to ensure the quality of the screening mechanism, including a description of the clinical qualifications of the screener. SSA is interested in achieving a low “reversal rate” for PD decisions. A PD reversal occurs when an individual is allowed PD payments, and then is formally denied SSI disability benefits after final medical development. Within these projects,

SSA will actually make the PD determination; a grantee can do no more than make a PD recommendation. SSA will provide training in current agency PD rules to all grantees. Prior to implementing any additional presumptive disability procedures in cooperative agreement projects, SSA will establish guidelines to protect the integrity of the PD process. Grantees that choose to exercise the option to include a PD element in their project will work with SSA program staff, and local field office and DDS representatives, after award, to establish and implement any project-specific procedures that may be deemed necessary by SSA.

- *Establish and implement pre-release procedures.* Individuals who leave institutions, particularly state mental hospitals, prison, and institutions for the care of persons with mental retardation, are at high risk of becoming homeless. Projects may use cooperative agreement funds to establish and conduct discharge planning activities that include making arrangements to establish eligibility prior to discharge. Note that such arrangements are possible under current SSA rules, but that program rules do not allow for benefits to be paid prior to release or discharge. Individuals who had received SSI benefits that were suspended require a redetermination of eligibility prior to release or discharge so that SSA can determine current living arrangements and any other changes that might affect eligibility. If an applicant chooses to use project funds to conduct such activities, they may serve those who have never received disability benefits, as well as those whose benefits are in suspense, and those whose benefits have terminated.

- *Improve electronic services and information sharing.* As noted in the bulleted items under “Core Activities” (Section I.E.1.A), SSA is moving to an electronic disability application and case processing environment. All grantees will be required to make attempts to cooperate with the roll-out of this initiative, to the extent possible. But SSA encourages applicants to consider ways to work more effectively with SSA as the agency develops its electronic case processing initiatives. Grantees may use cooperative agreement funds to strengthen their ability to operate in this new environment, including purchasing scanners, fax machines, and laptop computers to be used by outreach workers in the field to complete forms with applicants. Grantees may also use cooperative agreement funding to establish internet

service that will allow for the transfer of medical records to a secure Web site, when this option becomes available.

- *Develop a work entry/return-to-work program.* Disability benefits can provide income support that can help an individual obtain housing, and begin a recovery process. But many individuals with disabilities want the opportunity to work, and improve their quality of life. Grantees may choose to focus on helping homeless individuals to make a transition to independence, by focusing on rehabilitative, vocational, and other activities that help them work. The Ticket to Work and Work Incentives Improvement Act of 1999 directed SSA to establish the Ticket Program. Under the Ticket program, beneficiaries may receive employment services, vocational services, or other services from Employment Networks (ENs). ENs are public or private providers, or consortiums of providers, of such services. Grantees may become ENs, either on their own, or in cooperation with other organizations. For more information about the Ticket to Work program, and ENs, visit: <http://www.yourtickettowork.com/>. This Web site is maintained by Maximus, Inc., a private company that is helping SSA to manage the Ticket Program.

2. Training and Technical Assistance

Grantees must identify project staff to participate in training provided by SSA, DDS, and/or SSA training contractors. The training is designed to improve the ability of grantee organizations to assist claimants. Grantees will pay for all costs associated with attending training sessions, and may use cooperative agreement funds to pay these costs.

SSA will develop a standardized training curriculum, which will be delivered initially in group training sessions. SSA and DDS staff will deliver the training, which will be coordinated and supported through contractor assistance. While grantees are encouraged to send all project staff to training, they must identify one person who will attend all SSA training, and who will be responsible for training other grantee agency personnel. SSA believes this is necessary, because:

- Some grantees may find it impossible for all staff involved in the project to attend training, without interrupting critically important services;

- some grantee organizations may organize services in such a way that it is impractical to provide in-depth training to all staff who may assist project enrollees; and