Reasons for Decision:

Order # AP1516-0300

The appellant appealed that the appellant's income assistance was cancelled. The appellant also appealed that the appellant was waiting for a decision on the appellant's medical eligibility.

The Department stated that the appellant was given automatic enrolment on income assistance when the appellant entered the <reference removed> program.

The appellant had advised the intake worker that the appellant had <reference removed> and also <reference removed>. The appellant was advised that the Employment and Income Assistance Program would pay for costs while the appellant was in the <reference removed> program, but if the appellant left the program prior to completing it, the appellant would not be eligible for further benefits. The EIA program was advised by the <reference removed> program that the appellant had left. The appellant had not provided a reason for leaving. As the program had no communication with the appellant and no idea where the appellant was, the appellant's income assistance file was closed. The appellant did not make any contact with the appellant's income assistance worker until after the appellant's case was closed and the appellant had filed the appeal.

The program also received the appellant's disability assessment papers and these were forwarded to the medical panel. The medical panel found that the assessment did not provide enough information to support the appellant's eligibility for disability benefits.

At the hearing the appellant stated that the appellant had tried to apply for general assistance prior to entering <reference removed>, but the intake worker believed the appellant was living with the other parent of the appellant's child, so the appellant withdrew the application as the appellant did not want to jeopardize the other parent's income assistance benefits.

The appellant stated the appellant has been struggling with <reference removed> for a long time, and mainly they were a means of self-medicating the appellant's </reference removed> problems. The appellant stated things had gotten a lot worse when the appellant's passed away in <date removed>. The appellant's parent was in the <reference removed> program, and suggested to the appellant that it may be a good idea for the appellant to enter the program as well. The appellant stated that the appellant spent about a month in the program and was able to get <reference removed>. The appellant did not feel that the environment in the program was conducive to the appellant maintaining <reference removed>, and felt the appellant would do better on the appellant's own. Since the appellant left the program the

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appellant has been put on the proper medications and is no longer using <reference removed>.

The appellant's doctor has listed <reference removed> as the appellant's primary diagnosis, and listed <reference removed> as the appellant's secondary. The appellant has been prescribed two medications for <reference removed>, one to be taken just before bedtime, and one medication for the appellant's <reference removed>. The appellant's doctor has now referred the appellant to a <reference removed>. The appellant stated at the hearing that the appellant also has some back problems due to years of doing <reference removed>. The appellant completed a Self-Report which stated the appellant has some difficulty with sitting, standing, lifting, carrying, bending, household task. The appellant indicated a lot of difficulty with seeing, remembering , concentrating, sleeping, going into the community, and using public transpiration, At the hearing the appellant stated that being on the appellant's present medication has helped the appellant quite a bit, and the appellant is hoping to be able to more positively deal with the trauma the appellant has experienced in the appellant's life.

The appellant stated the appellant is currently living with <reference removed> family. The appellant stated the appellant has tried to look for work, but without any money or support, this is very difficult to do. The appellant indicated that once the appellant's health is stable, the appellant would be interested in retraining.

After carefully reviewing the written and verbal information the Board has determined that the Department was correct in cancelling the appellant's income assistance benefits, as the appellant was no longer at the program which was a condition of the appellant's eligibility, and had not made any contact with the program. However, the appellant is currently destitute and in need of income assistance. Therefore the Board has determined that the appellant should be enrolled on income assistance effective the date of the hearing, <date removed> in the general assistance category. The appellant will need to make an appointment with the appellant's worker to update the appellant's current circumstances and create a new action plan. The Board agrees with the Department that the medical information provided does not support that the appellant is not capable of any employment due to physical or mental ill health. Therefore the decision of the director has been varied, and the Board orders that the appellant be enrolled under the general assistance category effective <date removed>.

DISCLAIMER

These are electronic copies of the Reasons for Decision issued by the Social Services Appeal Board. These written reasons have been edited to protect the personal information of individuals be removing personal identifiers.

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