

Part C – Decision Under Appeal

Under appeal is a decision of the Ministry of Social Development and Poverty Reduction (the "Ministry") dated September 29, 2023 (the "Reconsideration Decision") that denied the Appellant's application for a health supplement. The Ministry determined that the Appellant did not meet all the requirements to be eligible to receive a health supplement for custom carbon composite knee braces.

Part D – Relevant Legislation

Employment and Assistance for Persons with Disabilities Regulation (the "*Regulation*"):

Section 62 [General Health Supplements]

Schedule C ("*Schedule C*") [Health Supplements]:

Section 3 [Medical equipment and devices]

Section 3.10 [Medical equipment and devices — orthoses]

Interpretation Act

Section 29 [Definitions]

(See attached Appendix for text of the above)

Part E – Summary of Facts

This matter relates to Ministry denial of the Appellant's request for certain knee braces, the make and model of which are carbon composite. The following is a summary of the key dates and information in chronological order.

The Appellant is a young adult recipient of disability assistance diagnosed with a syndrome that includes symptoms described as "multi ligament laxity, bilateral knees."

In March 2023 the Appellant was assessed as non-ambulatory and approved for a health supplement, by the ministry, for a power wheelchair, bath lift, pole, and grab bars.

On June 19, 2023, the Appellant filed an application for another health supplement for the knee braces mentioned above by submitting an Orthoses Request and Justification form (the "*Request Form*"). It contained the following:

- Section 2 completed by a medical practitioner indicating:
 - *The Appellant's* medical condition.
 - The recommended type of orthoses are custom-made "bilateral custom dual hinged knee braces".
 - That the knee braces will be required at least 6 hours per day.
- Section 3 completed by an orthotist (the "Orthotist") indicating that the orthoses:
 - Will "[b]lock unwanted knee deformity, all planes" to assist with joint motion and/or support.
 - Are required to prevent surgery and to improve physical functioning that has been impaired by a neuro-musculo-skeletal condition.
 - Will "[p]revent repair, increase ambulation and confidence, increase stability."
 - Are \$1669.51 each brace (for a total of \$3339.02) and have the following specifications:
 - "Composite frame/metal hinges, Velcro closures."
 - A certain make and custom model [that is carbon composite] with specific measurements.

On July 11, 2023, the Ministry denied the Appellant's request as the Ministry was not satisfied that "custom bilateral knee braces are medically essential to achieve or maintain basic functionality." The Occupational Therapist had confirmed the Appellant was not functionally ambulatory but the Orthotist said (in *Request Form* section 3) that "the primary purpose

reported by the orthotists is to block deformity rather than for increased range of motion or support.”

On September 15, 2023, the Appellant requested reconsideration. The Appellant described:

- Being a functional ambulator using borrowed/loaned braces that have enabled walking short distances.
- Wishing to build strength to maintain ambulation and basic functionality.
- Trying multiple different styles of braces with the Orthotist before finding ones that safely supported the knees without putting strength and mobility at further risk of damage or deterioration.

On September 29, 2023, in the Reconsideration Decision the Ministry determined that the Appellant was not eligible for the chosen knee brace. The requirements not met were as follows:

- *Schedule C*, section 3(1) - The Ministry stated that insufficient information had been provided by the Appellant’s “health professional to justify why the custom carbon composite bracing is the *least expensive* appropriate available” for the Appellant’s “needs”.
- *Schedule C*, section 3.10(2) - The Ministry stated that insufficient information was provided to satisfy the Ministry that knee braces were “medically essential to achieve or maintain basic functionality” to perform “day-to-day activities in the home or the community”. The Ministry stated that while the Appellant highlighted that use of braces would provide for more independent and comfortable ambulation the Appellant, in effect, didn’t need them. This was because – referring to the Appellant:

You rely on your mobility aids (power wheelchair, forearm crutches) to perform your day-to-day activities. Therefore, the ministry is not satisfied that you require these braces are medially [sic] essential to achieve or maintain basic functionality.

Appellant Submissions

Shortly before the hearing the Appellant filed with the tribunal an October 31, 2023 prescription to the Appellant from a medical practitioner stating: “CTI Left Knee Ligament Brace Custom”.

At the hearing the Appellant reiterated the submissions provided in the written record. Additionally, the Appellant described the applicable diagnosis and delays in being able to obtain appointments for therapy and to see an orthotist. The Appellant stated that the evaluation of being non-ambulatory, and the approval to receive a power wheelchair and bath lift all occurred before treatment and work with an orthotist. That treatment and work, along with being able to borrow a pair of knee braces, resulted in the Appellant being functionally ambulatory in order to

get in and out of the bathroom (perform personal hygiene and self care), tend to making meals and household needs, take walks, and to engage in social activities with the Appellant's age cohort.

The Appellant stated that use of the wheelchair is sometimes necessary because of flaring symptoms but even then, independent movement is required. The Appellant's home has halls and doorways that are not amenable to wheelchairs. Knee braces allow better and safer functioning, including access to the bathroom. The Appellant described an inability to get into the home bathroom using other mobility aids. The wheelchair doesn't fit and maneuvering with the forearm crutches is unsafe. The knee braces allow the Appellant to maneuver in the bathroom, including use of the bath lift.

The Appellant also described regaining a social life with the loaner braces enabling the Appellant "to do things a little bit more like a person my age" - a young adult. The Appellant described having to "live life like an 80-year-old just because of pain levels and how my joints work". The Appellant described social interaction and responses as much better when using braces and not in the wheelchair.

The Appellant described the trial process with the Orthotist to find knee braces that provided the best functionality. The make and model chosen were the only ones to not leave bruising.

Ministry Submissions

The Ministry confirmed that the Appellant's case is medically complex with a syndrome that required mobility aids.

Reviewing the decision from July 2023 the Ministry described the determination that the Appellant was not functionally ambulatory and that the knee braces would not help because it was not confirmed to increase range of motion or provide joint support. The Ministry acknowledged that the forearm crutches make the Appellant's shoulder condition worse and the concern that use in the Appellant's bathroom was difficult.

The Ministry described using other assessors to aid in evaluating costs to make sure that choice of braces is not supplier driven or an overcharge.

The Ministry stated that the "main denial" was that the chosen braces were not medically essential and not the least expensive most appropriate device, citing that "they would not hold up for 4 years before delamination." The Ministry described relying upon internal advice as supporting those determinations, and also referred to guidelines and experience that showed that delamination was common and unrepairable and cited that as the basis for the statement in the Reconsideration Decision that a "carbon composite brace is not funded by the ministry" was

based on Ministry. (The Ministry acknowledged that the guidelines were not submitted into the record.) Based upon this the Ministry stated that they were not medically appropriate over more durable alternatives.

The Ministry also stated that there was insufficient evidence that knee braces would be an aid to daily living without functional ambulation and also necessary where, instead, the Appellant could rely upon the mobility aids approved in March 2023.

Admissibility of New Evidence

The October 31, 2023 prescription and the statements from the Appellant and Ministry (representative) may be admitted as testimony.

Under section 22(4) of the *Employment and Assistance Act*, the panel admits both, the prescription and testimony, as evidence that is reasonably required for a full and fair disclosure of all matters related to the decision under appeal. Where a certain statement is relevant, and given weight that might affect findings, it is specifically mentioned in the panel's reasons.

Part F – Reasons for Panel Decision

The purpose of the panel in appeals, such as this, is not to redo the Reconsideration Decision. It is to assess whether the Reconsideration Decision meets a standard of reasonableness. The standard applied is whether the Reconsideration Decision reasonably applies applicable laws and is reasonably supported by the evidence available then, but the decision here also includes consideration, by the panel, of any evidence newly submitted as part of the appeal.

The general issue of the Appellant's functional ambulation arose in the Ministry's oral submissions as an apparent distinct issue. It was an issue in the July 2023 decision but did not form part of the reasons for a denial in the Reconsideration Decision. The panel finds this was not a matter in dispute in the Reconsideration Decision. Even if it was, the panel finds sufficient evidence to establish that the Appellant is functionally ambulatory as of this moment with the use of the borrowed knee braces. Accordingly, to the extent that the Ministry found that the Appellant was not functionally ambulatory with knee braces, or to benefit from knee braces, such a finding would be unreasonable.

In making that finding the panel considered the following: The Ministry accepted that a medical practitioner had prescribed knee braces. An orthotist also recommended the same with specifications and stating that braces were for "ambulation and confidence" and increased "stability". The Appellant's submissions and testimony also support being functionally ambulatory. The Appellant described the borrowed braces and being able, with them, to access the home bathroom, and to walk across a parking lot to appointments without other assistive equipment. The panel also takes comfort in making the finding above from the testimony of the Appellant's hearing representative, (professional designation: MSW, RSW) affirming to have observed the Appellant walking unaided as described.

The Reconsideration Decision identified only 2 issues, or requirements, as not met. All other requirements were accepted by the Ministry as met, so they need not be examined here.

The first issue is satisfaction of *Schedule C*, section 3(1), with the reasons only directed to section 3(1)(b)(iii). For that the Ministry stated that it needed more information from a "health professional to justify why the custom carbon composite bracing is the *least expensive* appropriate available" for the Appellant's "needs".

Schedule C section 3(1)(b)(iii) does not explicitly mandate justification from a "health professional" (an undefined term), but the Ministry is still required to be satisfied, and under the circumstances, it is reasonable for the Ministry to seek such justification. The circumstances include that assessment of the need and the alignment of that need with a specific device demands expertise, and it is reasonable for the Ministry to expect this expertise to come from a health professional. Although the necessity itself may not be in dispute, the Ministry was not satisfied, on the information provided, of the alignment of the need with the chosen make and model. The Ministry's experience is that the chosen model has a history of delamination, and doesn't last the 4-year time period required under section 3.10(4.2)(10) [Table 2, item 7] before a replacement can be issued. As well, the ministry added that carbon composite braces can't be repaired. That experience reasonably heightens the need for information to satisfy the Ministry that the choice is "the *least expensive* appropriate available" option.

While there was evidence that several different braces were tried before settling on the chosen set, there was no information explaining the selection provided by the Orthotist. Without specifying what information the Ministry may seek that supports the specific selection, it is clear that the information lacks the number tried, variety or types, and the reason for exclusion of others (other than the Appellant's self report that the one chosen was the only one to cause no bruising).

The panel is not required to agree with the Ministry's assessment here. It must merely find, as it does, that on this issue, it was reasonable for the Ministry to determine that there was insufficient information to support an approval. On this issue the Reconsideration Decision was reasonably supported by the evidence and a reasonable application of the applicable legislation.

That finding is determinative that the decision denying the knee braces will be confirmed. Although the following won't alter this outcome, the panel still examines the remaining reason for the Ministry's denial.

The final issue is satisfaction of *Schedule C*, section 3.10(2) with the reasons directed only to section 3.10(2)(b). The Reconsideration Decision stated that the Ministry was not satisfied, from the information provided, that the knee braces were "medically essential to achieve or maintain basic functionality" to perform "day-to-day activities in the home or the community". The latter quoted words are not apparently applicable or in section 3.10(2)(b). Therefore, the panel considered that "basic functionality" is linked to being "medically essential" without that added criterion.

The Ministry, however, considered that section 3.10(2)(b) was not satisfied by the Orthotist's statement in the *Request Form* that braces would "provide for more independent and comfortable ambulation". The other part of the reason was that the basic functionality was already provided by the prior approval of a power wheelchair, crutches, and bath lift.

The evidence indicates that a medical professional prescribed knee braces, with a recent prescription specifying the chosen make and model for the left leg only. (Per the Appellant that was the leg the prescriber had operated on when the Appellant was a youth.) The panel is not required to determine whether the prescribed make and model were mandatory versus a compatible equivalent. However, it does conclude that it was not, or would not be, reasonable for the Ministry to assert that the prescriptions were inadequate to support the medical necessity of the braces.

Furthermore, the panel determines that the use of the prescribed braces, as described by the Appellant, enables functional ambulation and achieves or maintains basic functionality for daily living activities, which the Ministry had argued was necessary. The panel deems it unreasonable to decide otherwise.

It does not matter that the panel's findings differ from those of the Ministry, however it is relevant that the panel is unable to find a reasonable basis for the Ministry's finding in the

Reconsideration Decision. The panel considers it unreasonable for the Ministry to demand additional proof of the Appellant's ability to stand and walk with knee braces because such a demand goes beyond what is necessary. Moreover, the panel sees it as self-evident that the ability to stand and walk, as opposed to relying on a wheelchair, meets the criteria outlined in *Schedule C*, section 3.10(2)(b).

Another aspect of the Ministry's reasoning was that assistance of a higher order had already been granted through the approval of the power wheelchair in March 2023, thereby satisfying the "medically essential... basic functionality" and vitiating the need for braces.

The implication of that stance is that individuals regaining or maintaining higher functionality through standing and walking may be denied assistance due to availability of a wheelchair. The panel contends that such an interpretation contradicts the spirit and intent of the legislation and even before application of other canons of statutory interpretation affecting "social policy". The panel considers that finding is reinforced by the Appellant's evidence that the use of braces for bathroom access is more functional and safer, while use of forearm crutches worsens symptoms in the Appellant's shoulders and poses challenges and safety risks in the bathroom.

Conclusion

The panel found that it was, or would be, unreasonable for the Ministry:

- to find that the Appellant was not functionally ambulatory with knee braces, or to benefit from knee braces, and
- to deny knee braces for the Appellant to functionally walk because a wheelchair could be relied upon.

However, and this is sufficient to uphold the Ministry decision, the panel found it reasonable (as discussed as the "first issue" above) for the Ministry to require more information in order to be satisfied that the custom carbon composite knee braces were the least expensive appropriate knee braces.

Decision

The panel **confirms** the Reconsideration Decision on the one ground identified in the paragraph immediately above, having found that it is:

1. reasonably supported by the evidence, and
2. a reasonable application of the applicable enactment in the circumstances of the person appealing the decision.

Accordingly, the Panel confirms the Reconsideration Decision.

Appendix – Relevant Legislation

EMPLOYMENT AND ASSISTANCE FOR PERSONS WITH DISABILITIES REGULATION

General health supplements

62 The minister may provide any health supplement set out in section 2 [general health supplements] or 3 [medical equipment and devices] of Schedule C to or for

- (a) a family unit in receipt of disability assistance,
- (b) a family unit in receipt of hardship assistance, if the health supplement is provided to or for a person in the family unit who is under 19 years of age, or
- (c) a family unit, if the health supplement is provided to or for a person in the family unit who is a continued person.

SCHEDULE C

Health Supplements

Definitions

1 In this Schedule:

"orthotist" means a person who is certified by and in good standing with the Canadian Board for

Certification of Prosthetists and Orthotists; (B.C. Reg. 9/2004)

"pedorthist" means a person who is certified by and in good standing with the College of Pedorthics of Canada; (B.C. Reg. 61/2010)

"physical therapist" means a physical therapist registered with the College of Physical Therapists of British Columbia established under the Health Professions Act; (B.C. Reg. 85/2012)

Medical equipment and devices

3 (1) Subject to subsections (2) to (5) of this section, the medical equipment and devices described in sections 3.1 to 3.12 of this Schedule are the health supplements that may be provided by the minister if (B.C. Reg. 197/2012)

- (a) the supplements are provided to a family unit that is eligible under section 62 [general health supplements] of this regulation, and
- (b) all of the following requirements are met:
 - (i) the family unit has received the pre-authorization of the minister for the medical equipment or device requested;

- (ii) there are no resources available to the family unit to pay the cost of or obtain the medical equipment or device;
 - (iii) the medical equipment or device is the least expensive appropriate medical equipment or device.
- (2) For medical equipment or devices referred to in sections 3.1 to 3.8 or section 3.12, in addition to the requirements in those sections and subsection (1) of this section, the family unit must provide to the minister one or both of the following, as requested by the minister: (B.C. Reg. 197/2012)
- (a) a prescription of a medical practitioner or nurse practitioner for the medical equipment or device;
 - (b) an assessment by an occupational therapist or physical therapist confirming the medical need for the medical equipment or device.
- (2.1) For medical equipment or devices referred to in section 3.9 (1) (b) to (g), in addition to the requirements in that section and subsection (1) of this section, the family unit must provide to the minister one or both of the following, as requested by the minister:
- (a) a prescription of a medical practitioner or nurse practitioner for the medical equipment or device;
 - (b) an assessment by a respiratory therapist, occupational therapist or physical therapist confirming the medical need for the medical equipment or device. (B.C. Reg. 197/2012)
- (3) Subject to subsection (6), the minister may provide as a health supplement a replacement of medical equipment or medical device, previously provided by the minister under this section, that is damaged, worn out or not functioning if
- (a) it is more economical to replace than to repair the medical equipment or device previously provided by the minister, and
 - (b) the period of time, if any, set out in sections 3.1 to 3.12 of this Schedule, as applicable, for the purposes of this paragraph, has passed. (B.C. Reg. 197/2012)
- (4) Subject to subsection (6), the minister may provide as a health supplement repairs of medical equipment or a medical device that was previously provided by the minister if it is more economical to repair the medical equipment or device than to replace it.
- (5) Subject to subsection (6), the minister may provide as a health supplement repairs of medical equipment or a medical device that was not previously provided by the minister if
- (a) at the time of the repairs the requirements in this section and sections 3.1 to 3.12 of this Schedule, as applicable, are met in respect of the medical equipment or device being repaired, and (B.C. Reg. 197/2012)

(b) it is more economical to repair the medical equipment or device than to replace it.

(6) The minister may not provide a replacement of medical equipment or a medical device under subsection (3) or repairs of medical equipment or a medical device under subsection (4) or (5) if the minister considers that the medical equipment or device was damaged through misuse.

Medical equipment and devices - orthoses

3.10 (1) In this section,

“off-the-shelf”, in relation to an orthosis, means a prefabricated, mass-produced orthosis that is not unique to a particular person;

“orthosis” means;

- (a) a custom-made or off-the-shelf foot orthotic;
- (b) custom-made footwear;
- (c) a permanent modification to footwear;
- (d) off-the-shelf footwear required for the purpose set out in subsection (4.1) (a);
- (e) off-the-shelf orthopaedic footwear;
- (f) an ankle brace;
- (g) an ankle-foot orthosis;
- (h) a knee-ankle-foot orthosis;
- (i) a knee brace;
- (j) a hip brace;
- (k) an upper extremity brace;
- (l) a cranial helmet used for the purposes set out in subsection (7);
- (m) a torso or spine brace;
- (n) a foot abduction orthosis; (B.C. Reg. 197/2012)
- (o) a toe orthosis. (B.C. Reg. 197/2012)
- (p) a walking boot.

(2) Subject to subsections (3) to (11) of this section, an orthosis is a health supplement for the purposes of section 3 of this Schedule if

- (a) the orthosis is prescribed by a medical practitioner or a nurse practitioner,

- (b) the minister is satisfied that the orthosis is medically essential to achieve or maintain basic functionality,
 - (c) the minister is satisfied that the orthosis is required for one or more of the following purposes:
 - (i) to prevent surgery;
 - (ii) for post-surgical care;
 - (iii) to assist in physical healing from surgery, injury or disease;
 - (iv) to improve physical functioning that has been impaired by a neuro-musculo-skeletal condition, and
 - (d) the orthosis is off-the-shelf unless; (B.C. Reg. 144/2011)
 - (i) a medical practitioner or nurse practitioner confirms that a custom-made orthosis is medically required, and
 - (ii) the custom-made orthosis is fitted by an orthotist, pedorthist, occupational therapist, physical therapist or podiatrist.
- (3) For an orthosis that is a custom-made foot orthotic, in addition to the requirements in subsection (2) of this section, all of the following requirements must be met:
- (a) a medical practitioner or nurse practitioner confirms that a custom-made foot orthotic is medically required;
 - (b) the custom-made foot orthotic is fitted by an orthotist, pedorthist, occupational therapist, physical therapist or podiatrist;
 - (c) Repealed (B.C. Reg. 144/2011)
 - (d) the custom-made foot orthotic must be made from a hand-cast mold;
 - (e) the cost of one pair of custom-made foot orthotics, including the assessment fee, must not exceed \$450. (B.C. Reg. 144/2011)
- (4) For an orthosis that is custom-made footwear, in addition to the requirements in subsection (2) of this section, the cost of the custom-made footwear, including the assessment fee, must not exceed \$1 650.
- (4.1) For an orthosis that is off-the-shelf footwear, in addition to the requirements in subsection (2) of this section,
- (a) the footwear is required to accommodate a custom-made orthosis, and
 - (b) the cost of the footwear must not exceed \$125.

- (4.2) For an orthosis that is off-the-shelf orthopaedic footwear, in addition to the requirements in subsection (2) of this section, the cost of the footwear must not exceed \$250. (B.C. Reg. 144/2011)
- (5) For an orthosis that is a knee brace, in addition to the requirements in subsection (2) of this section, the medical practitioner or nurse practitioner who prescribed the knee brace must have recommended that the knee brace be worn at least 6 hours per day.
- (6) For an orthosis that is an upper extremity brace, in addition to the requirements in subsection (2) of this section, the upper extremity brace must be intended to provide hand, finger, wrist, elbow or shoulder support.
- (7) For an orthosis that is a cranial helmet, in addition to the requirements in subsection (2) of this section, the cranial helmet must be a helmet prescribed by a medical practitioner or nurse practitioner and recommended for daily use in cases of self-abusive behaviour, seizure disorder, or to protect or facilitate healing of chronic wounds or cranial defects.
- (8) For an orthosis that is a torso or spine brace, in addition to the requirements in subsection (2) of this section, the brace must be intended to provide pelvic, lumbar, lumbar-sacral, thoracic-lumbar-sacral, cervical-thoracic-lumbar-sacral, or cervical spine support.
- (9) Subject to section 3 of this Schedule, the limit on the number of orthoses that may be provided for the use of a person as a health supplement for the purposes of section 3 of this Schedule is the number set out in Column 2 of Table 1 opposite the description of the applicable orthosis in Column 1.

Table 1

Item	Column 1 Orthosis	Column 2 Limit
1	custom-made foot orthotic	1 or 1 pair
2	custom-made footwear	1 or 1 pair
3	modification to footwear	1 or 1 pair
4	ankle brace	1 per ankle
5	ankle-foot orthosis	1 per ankle
6	knee-ankle-foot orthosis	1 per leg
7	knee brace	1 per knee
8	hip brace	1
9	upper extremity brace	1 per hand, finger, wrist, elbow or shoulder
10	cranial helmet	1

11	torso or spine brace	1
12	off-the-shelf footwear	1 or 1 pair (B.C. Reg. 144/2011)
13	off-the-shelf orthopaedic footwear	1 or 1 pair (B.C. Reg. 144/2011)
14	foot abduction orthosis	1 or 1 pair (B.C. Reg.197/2012)
15	toe orthosis	1 (B.C. Reg.197/2012)

(10) The period of time referred to in section 3 (3) (b) of this Schedule with respect to replacement of an orthosis is the number of years from the date on which the minister provided the orthosis being replaced that is set out in Column 2 of Table 2 opposite the description of the applicable orthosis in Column 1. (B.C. Reg. 61/2010)

Table 2

Item	Column 1 Orthosis	Column 2 Time Period
1	custom-made foot orthotic	3 years (B.C. Reg. 144/2011)
2	custom-made footwear	1 year
3	modification to footwear	1 year
4	ankle brace	2 years
5	ankle-foot orthosis	2 years
6	knee-ankle-foot orthosis	2 years
7	knee brace	4 years
8	hip brace	2 years
9	upper extremity brace	2 years
10	cranial helmet	2 years
11	torso or spine brace	2 years
12	off-the-shelf footwear	1 year (B.C. Reg. 144/2011)
13	off-the-shelf orthopaedic footwear	1 year (B.C. Reg. 144/2011)
14	toe orthosis	1 year (B.C. Reg.197/2012)

(11) The following items are not health supplements for the purposes of section 3 of this Schedule:

- (a) a prosthetic and related supplies;
- (b) a plaster or fiberglass cast;

- (c) a hernia support;
- (d) an abdominal support;
- (e) Repealed. [B.C. Reg. 94/2018];
- (f) Repealed (B.C. Reg. 144/2011) (B.C. Reg. 61/2010)

(12) An accessory or supply that is medically essential to use an orthosis that is a health supplement under subsection (2) is a health supplement for the purposes of section 3 of this Schedule. (B.C. Reg. 197/2012)

INTERPRETATION ACT [RSBC 1996] CHAPTER 238

Expressions defined

29 In an enactment:

...

"medical practitioner" means a registrant of the College of Physicians and Surgeons of British Columbia entitled under the *Health Professions Act* to practise medicine and to use the title "medical practitioner";

...

"nurse practitioner" means a person who is authorized under the bylaws of the British Columbia College of Nurses and Midwives to practise nursing as a nurse practitioner and to use the title "nurse practitioner";

APPEAL NUMBER 2023-0321

Part G – Order

The panel decision is: (Check one) Unanimous By Majority

The Panel Confirms the Ministry Decision Rescinds the Ministry Decision

If the ministry decision is rescinded, is the panel decision referred back
to the Minister for a decision as to amount? Yes No

Legislative Authority for the Decision:

Employment and Assistance Act

Section 24(1)(a) or Section 24(1)(b)

Section 24(2)(a) or Section 24(2)(b)

Part H – Signatures

Print Name

Kent Ashby

Signature of Chair

Date (Year/Month/Day)

2023/11/10

Print Name

Robert Kelly

Signature of Member

Date (Year/Month/Day)

2023/11/12

Print Name

Connie Simonsen

Signature of Member

Date (Year

2023/11/10