

## **Reasons for Decision:**

## Order # AP1819-0366

<name removed> appealed that their request for Employment and Income Assistance disability eligibility was denied under Section 5(1)(a) of *The Manitoba Assistance Act.* 

The Department provided a history of <name removed>'s approvals and denials of disability eligibility. In <year removed>, disability eligibility was denied due to insufficient information, and <name removed> was advised that they could apply for a reconsideration with a psychiatrist's report or more details on their symptoms and severity. In <year removed> <name removed>'s doctor, who listed the primary diagnosis as <health condition removed>, completed another disability assessment report. Secondary diagnoses were <health conditions removed>. The doctor stated they have been referred to psychiatry and to rehab for <health condition removed>. Disability eligibility was granted for nine months to work with a psychiatrist and to submit a report for continuation of benefits.

In <date removed>, approval was given for one year to treat and stabilize their <health conditions removed>; then further approvals were granted up to <date removed>. In <date removed>, <name removed> requested a new disability assessment report be sent to them to have their doctor complete. The completed report was returned in <date removed> with the primary diagnosis as <health condition removed>. No objective findings were provided. The doctor stated <name removed> does not follow through with their appointments and has <text removed> that prevent interactions with the public, and that they become self-destructive. The Medical panel found them ineligible for disability status due to insufficient information to support eligibility.

The most recent request was made in <date removed> when <name removed> requested another disability assessment package. The Department received the completed assessment on <date removed>.

The doctor listed the primary diagnosis as <health condition removed> with a prognosis likely to remain the same. The secondary diagnoses are <health conditions removed>.

On the Work Activity Section of the form, the doctor stated that <name removed> is not able to work for thirteen to eighteen months due to poor social skills.

A Self Report was included in which <name removed> states they have a lot of difficulty with personal needs, remembering, concentrating and sleeping. The appellant further stated that they have complex <health conditions removed>.

The medical panel denied this request as there were no objective findings, or symptoms, severity, and frequency of symptoms and how these would impact an ability to work. A letter was sent advising <name removed> of the decision on <date removed>.

<name removed> stated they have sent in so much medical information to the Department over the years and does not understand why the Department needs more medical information. <name removed> presented additional medical information at the hearing. The Board accepted this information as most of it pre-dated the Department's decision.

The information presented is a psychiatrist report, which confirms <name removed>'s conditions. The report states that <name removed> is a suicide risk. The appellant <text removed> and has problems with activities of daily living. The appellant has prior physical, sexual and emotional abuse issues. The appellant takes excessive amounts of medications and states they do this, hopefully, to die.

Also included is a revised section of the <date removed> Disability Assessment Report. The doctor wrote that <name removed> lashes out against others easily and can be violent. The appellant refuses to take their medications for their <health conditions removed>.

<name removed> stated that they get depressed often and thinks of killing themself every day.

When asked by the Board why they refuse treatment for their <health conditions removed>, they said they do not care; they do not want to live forever.

*The Manitoba Assistance Act* states that in order to be eligible for disability benefits, you must be a person:

(a) who, by reason of age or by reason of physical or mental ill health, or physical or mental incapacity or disorder that is likely to continue for more than 90 days
(i) is unable to earn an income sufficient to meet the basic necessities of himself and his dependants, if any

After carefully considering all the written and verbal information, the Board has determined that at the time the Department made the decision to deny <name removed>'s disability assistance, they had sufficient rationale to do so. Although the Disability Assessment form indicates their conditions, in many cases these conditions can be successfully managed and a person can participate in gainful employment. The medical information provided did not provide much detail as to what is functionally stopping them from earning a living sufficient to meet their needs.

However, the Board placed significant weight on the psychologist's report presented at the hearing, and <name removed>'s testimony and comportment at the hearing. The Board finds that this information is sufficient to demonstrate that <name removed>'s

mental health conditions place limitations on their day-to-day living and render them incapable of being in the workplace at this time. Therefore, the decision of the Director has been varied, and the Board orders the Department to enroll <name removed> under Section 5(1)(a) of *The Manitoba Assistance Act* effective <date removed> for twelve months.

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