

Reasons for Decision:

Order # AP1718-0411

The appellant and the appellant's spouse appealed that the amount of child care subsidy was insufficient.

The program received a child care subsidy application on <date removed>. The reason for care for the appellant was self-employed. The spouse's medical form and employer verification for the spouse's casual position was received on <date removed> and the spouse's casual work schedule was received on <date removed>. The medical form stated that the spouse cannot work due to back pain and needs full time child care. However, the spouse submitted a work schedule and paystubs showing the spouse worked one shift each weekend and one Thursday evening shift every three weeks. The work schedule and the medical form contradicted each other so the program determined that the spouse was not eligible for medical coverage Monday to Friday when the spouse is able to work.

The application received on <date removed> was assessed based on the spouse's Record of Employment and employment letter stating the spouse is no longer working. The spouse's medical form was received on <date removed> which indicated that the spouse had lower back pain but was still able to provide 0-4 hours of care to the children daily. The family is responsible for the other 4 hours of care if they choose to bring their children for more than the 4 hours approved. This decision is effective <date removed> to <date removed>. The program received another medical letter from the spouse's doctor and the family is currently assessed at full time coverage.

The appellant requests that their subsidy be assessed at full time back to <date removed> when they applied based on the spouse's medical information at the time. The appellant said the appellant's spouse only worked one half day a week and it doesn't seem fair to assess the reason as employment based on such little hours. The spouse stated that the spouse's doctor advised the spouse to stop working but the spouse took a risk and worked a couple shifts to pay some bills.

After carefully considering the written and verbal information the Board has determined that the subsidy program should have assessed the spouse's reason for care on the medical reason first, which supported full time care. As the reason for care would be primarily medical, the information from the spouse's employment would only be considered in the financial eligibility calculations. The Board finds that the very limited hours of the spouse's employment should not have been the primary reason for care when supported by a medical reason for care. Therefore the decision of the Director has been varied and orders the program to assess subsidy on a full-time basis with the spouse's reason for care as medical, effective <date removed>.

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