

Program Policy:	Employment Support and Income Assistance	
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Program Policy:	Employment Support and Income Assistance	
Chapter: 1	General Policy Statements	
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Departmental standards require the completion of the following template. The template is intended to provide an overall policy statement that briefly summarizes the various program components.

1.1.1 Program Statement:

The purpose of this *Act* is to provide for the assistance of persons in need and, in particular, to facilitate their movement toward independence and self-sufficiency.

1.1.2 Definitions:

Refer to [Policy 4.1.1 - \(Definitions\)](#)

1.1.3 Policy Objective:

To provide for compliance with the *ESIA Act* as it pertains to persons in need and employment support services.

1.1.4 Application:

Applies to persons who apply for assistance under the *ESIA Act*.

1.1.5 Policy Guidelines:

Policy was developed with the following guidelines that:

1. independence and self-sufficiency, including economic security through opportunities for employment, are fundamental to an acceptable quality of life in Nova Scotia;

2. individuals, government and the private sector share responsibility for economic security;
3. assistance to develop skills and abilities will be required for some Nova Scotians that will enable them to participate as fully in the economy and in their communities so far as it is reasonable for them to do;
4. the provision of assistance to and in respect of persons in need and the prevention and removal of the causes of poverty and dependence on public assistance are the concern of all Nova Scotians;
5. income assistance must be combined with other forms of assistance to provide effectively for Nova Scotians in need; and
6. employment support and income assistance must be effective, efficient, integrated, coordinated and financially and administratively accountable.

1.1.6 Policy Directives:

The *Policy* contains direction and procedures on:

Eligibility, Employment, Special Needs, Allowances & Expenses, Income, Assets, Compensation Payments, Pharmacare, Youth, Overpayments/Underpayments, Nova Scotia Child Benefit, Maintenance, Privacy, Administrative which have the *Employment Support and Income Assistance Act* and *Regulations* as their legislative authority.

1.1.7 Accountability:

The Executive Director, Director, and program staff are responsible for ensuring compliance with the *Act*, *Regulations* and *Policy*.

1.1.8 Monitoring:

The Employment Support and Income Assistance division is responsible for monitoring this policy. This will be accomplished through formal and informal program and system reviews and evaluations.

1.1.9 References:

1. *Employment Support & Income Assistance Act*
2. *Employment Support & Income Assistance Regulations*
3. *Federal Child Support Guidelines*
4. *Freedom of Information and Protection of Privacy Act & Regulations*
5. *Family Maintenance Act*
6. *Family & Children Services Act*

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Chapter: 2	Operating Principles	
Section: 1	Operating Principles	
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2.1.1 Promoting Self-Reliance and Empowerment

The Employment Support and Income Assistance (ESIA) program must be administered in a manner that enables individuals to manage and control their own lives and, where possible, make the transition to employment.

2.1.2 The Principle of Need

The principle of need must be paramount in determining eligibility for Income Assistance.

2.1.3 Adequacy

The ESIA program will strive to provide residents of Nova Scotia who are in need with a level of income assistance adequate to meet their basic needs for shelter, food, clothing, and personal care. Clients must have the knowledge that their benefits will provide the supports necessary to move towards self-sufficiency.

2.1.4 Fair and Responsive Services

The ESIA program will be administered in a fair, accessible and timely manner. A client should receive equitable treatment and access to the same core benefits across the province. Clients who feel that they have been treated unfairly have the right to appeal any decision. All services will be provided to clients in a manner that is culturally sensitive and provides advocacy and support for clients experiencing systemic barriers as a result of racism, sexism, ageism, sexual orientation and/or socio-economic disadvantages.

2.1.5 Efficient and Accountable Program Administration

The ESIA program must be efficient, open and accountable to the public for administration, expenditures made on behalf of clients, and for informing recipients of their rights and obligations.

2.1.6 Accountability of Applicants/Recipients

All persons applying for or in receipt of assistance are responsible to provide information and to pursue all other sources of support. The Department of Community Services is accountable to provide a program that does not create dependency but should support each individual's move to self-sufficiency.

2.1.7 Consistent Administration and Understandable Rules

Every effort will be made to have the ESIA program understandable to the client, and administered in a least intrusive, non-judgmental and consistent manner.

2.1.8 Compassion and Respect

All clients within Employment Support and Income Assistance (ESIA) will be treated with compassion and respect.

2.1.9 Decision Making

Authority and responsibility for client services will be delegated as close as possible to the point of client contact. Employees will be provided with the training, policy guidance and supportive work environment required to carry out their responsibilities.

2.1.10 Confidentiality

The confidentiality of the circumstances of every individual applying for or receiving assistance will be respected. Clients must have the assurance that information about them is confidential.

2.1.11 Coordination of Services

Coordination with other levels and departments of government agencies and community-based organizations must be developed and/or maintained to link recipients to needed programs and services.

Program Policy:	Employment Support and Income Assistance	
Chapter:	3	Collection, Use, Disclosure and Retention Policy
Section:	1	Collection, Use, Disclosure and Retention Policy
Effective: August 1, 2001	FOIPOP Act	Page 1 of 15
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3.1.1 Policy Statement:

This *Policy* provides guidance to staff of the Department of Community Services in relation to their responsibilities with respect to the collection, use, disclosure, retention and security of Employment Support and Income Assistance client records.

3.1.2 Policy Objectives:

To balance the individual's right to keep his/her information private with the Department's need to collect, use and disclose the client's personal information for the purpose of providing and improving Employment Support and Income Assistance services.

To ensure a consistent, fair and timely response to requests for access to information while protecting the privacy of any individual to whom the information may relate.

3.1.3 Definitions:

In this policy:

personal information means recorded information about an identifiable individual, including, but not limited to:

1. the individual's name, address or telephone number;
2. the individual's race, national or ethnic origin, colour, or religious or political beliefs or associations;
3. the individual's age, sex, sexual orientation, marital status or family status;

4. an identifying number, symbol or other particular assigned to the individual;
5. information about the individual's health-care history, including a physical or mental disability;
6. information about the individual's educational, financial, criminal or employment history;
7. anyone else's opinions about the individual; and
8. the individual's personal views or opinions, except if they are about someone else.

public body means:

a Government department or a board, commission, foundation, agency, etc.

record means:

books, documents, maps, drawings, photographs, letters, vouchers, papers and any other thing on which information is recorded or stored by graphic, electronic, mechanical or other means, but does not include a computer program or any other mechanism that produces records.

Complete definition of the above terms can be found in Sections 3 (l), (j), (k) of the *Freedom of Information and Protection of Privacy (FOIPOP) Act*.

3.1.4 Application:

This *Policy* applies to all personal information collected, used and disclosed by all staff of the Employment Support and Income Assistance program of the Department of Community Services.

3.1.5 General:

As a public body, the Department of Community Services (DCS) is bound by the [*Freedom of Information and Protection of Privacy \(FOIPOP\) Act*](#) and its [*Regulations*](#). The purpose of FOIPOP is outlined in Section 2 of the *Act* that states:

The purpose of this *Act* is:

1. to ensure that public bodies are fully accountable to the public by
 - a. giving the public a right of access to records;

- b. giving individuals a right of access to, and a right to correction of, personal information about themselves;
 - c. specifying limited exceptions to the rights of access;
 - d. preventing the unauthorized collection, use or disclosure of personal information by public bodies; and
 - e. providing for an independent review of decisions made pursuant to this *Act*, and
2. to provide for the disclosure of all government information with necessary exemptions, that are limited and specific, in order to:
 - a. facilitate informed public participation in policy formulation;
 - b. ensure fairness in government decision-making; and
 - c. permit the airing and reconciliation of divergent views; and
3. to protect the privacy of individuals with respect to personal information about themselves held by public bodies and to provide individuals with a right of access to that information.

This *Policy* focuses on the protection of privacy of our clients, the client's rights to access their file, and staff's responsibility to protect the personal information that we hold by ensuring that the collection, use, disclosure and retention of personal information is performed according to legislation and current best practices.

Of particular significance in the *FOIPOP Act* is the stated purpose of ensuring that public bodies are fully accountable to the public. In keeping with this obligation, staff have a responsibility to explain to clients:

1. why we are collecting the information such as for the purpose of determining eligibility for the program;
2. how information will be used such as for providing other social services or to confirm income or employment;
3. how their information may be disclosed to others such as the fact that it may be shared with other programs within DCS or with other government departments, as authorized by law or where necessary with their consent, thus the 'Consent to Release and Obtain Information Authorization' form;

4. their rights to have access to their personal information held by the department such as to facilitate the FOIPOP application process or facilitate prompt access to specific documents;
5. their right to request a correction of their personal information such as when a client believes that we hold erroneous information about him/her. The *FOIPOP Act* establishes the process to do this; and
6. why and how decisions about their eligibility have been made and their rights in respect to those decisions such as the appeal process.

3.1.6 Access to their Personal Information:

Except in specific circumstances, identified as exemptions in the *FOIPOP Act*, clients are entitled to full access of their personal information. Clients should be able to find out what is happening in respect to their case as well as why and how decisions are being made about them through ongoing and regular dialogue between the client and their caseworkers.

It is only when the client requests a complete or partial copy of their file that the FOIPOP process applies. Although the FOIPOP process may be seen as an obstacle to access information, the purpose is to ensure that the client receives all the information they are entitled to, in the time frame established by law. The FOIPOP process also ensures that any third party information contained in the file is duly protected.

The client or his/her legal representative can ask for:

1. a copy of complete file or part of it, including electronic case notes; and
2. a review of records contained in the file.

In these cases staff are advised to follow the departmental established process as follows:

1. Request for complete or partial copy of file

The request for a complete copy of the file or partial file must be made in writing and processed under the provisions of the *Freedom of Information and Protection of Privacy Act* (form can be accessed in the District Offices). Where possible, clients are to be encouraged to specify the type of records being requested with time frame specified. Currently, the Department has a decentralized process that facilitates the administration of the requests in the regions.

If the request is made by someone (applicant) other than the identified client, the applicant must provide a consent form (form can be accessed in the District Offices), duly signed by the identified client, prior to commencing the process.

Each region has designated individuals with the delegated authority to process and disclose ESIA case files under FOIPOP. For information regarding this process, staff are encouraged to contact the FOIPOP Administrator in Head Office or the Delegates in each region.

There is no charge to the client for access to his/her own personal information.

If staff are asked to provide client's records in response to a FOIPOP request, the file must be copied in full, unless specified differently. The copy of the records must be accurate and complete and sent to the FOIPOP Delegate charged with processing the request. Staff can not alter records that are the subject of a FOIPOP application.

The FOIPOP Delegate in the regions or the FOIPOP Administrator in Head Office will review the information contained in the file and make disclosure according to the provisions of the *FOIPOP Act*.

2. Request to review records

Some clients or law firms representing clients prefer to review the file and take only those records that are relevant to the case at hand. This is allowed under S. 6(2) of the *FOIPOP Act*. In this situation, staff should be helpful and accommodating to the client.

Because the client's file often contains third party personal information and other confidential information, the staff person receiving the request must contact the Regional FOIPOP Delegate or the FOIPOP Administrator in Head Office.

The review of the file should be conducted in the office where the Regional FOIPOP Delegate is located and we must provide a quiet space to facilitate the review. If the review cannot be conducted in the regional office, staff are advised to contact the FOIPOP Administrator who will make arrangements to review file in Head Office.

The Regional FOIPOP Delegate is responsible for ensuring that the file is reviewed for third party information, and third party information removed, prior to the client accessing the file to ensure appropriate disclosure. This review must be conducted within thirty (30) days from date of request.

Sometimes clients only want to see or have copies of certain pieces of information from their files. The following types of information can be provided to the client without the necessity of their making an application under FOIPOP:

- a. copies of letters sent to the client from department officials;
- b. copies of letters and/or documents the client has provided to the Department; and
- c. information which contains no third party information, examples include but are not limited to, budget histories, budget calculations, overpayment calculations.

3.1.7 Obligations of Staff for the Collection, Use, Disclosure and Retention of Client Information:

Where access to electronic and/or paper information is not restricted, staff are required to only access information for the purpose of conducting departmental business as a requirement of their position or as permitted by legislation.

3.1.8 Collection of Personal Information about Clients:

1. Staff are only permitted to collect information about an applicant, recipient, spouses and dependents, if the information directly relates to and is necessary under the Employment Support and Income Assistance program. It is an offence to maliciously collect personal information about a client.
2. Staff are required to make every reasonable effort to ensure that the information which is collected and which will be used to make a decisions that affects a client is objective, accurate, relevant, and complete.
3. Staff are required to protect personal information about clients by taking reasonable measures to ensure that the information is secure from:
 - a. unauthorized access;
 - b. unauthorized use;
 - c. inappropriate disclosure; and
 - d. unauthorized disposal or loss.

4. Staff are required to keep information about clients confidential unless they are authorized or required by law to disclose the information. It is an offence to maliciously access, use, or disclose personal information about a client.

3.1.9 What Information Staff Can Collect:

In order to determine if an individual is eligible to receive or continue to receive Employment Support and Income Assistance, the Department must collect their personal information. The *Employment Support and Income Assistance Act, Regulations* and *Policy* prescribe the information which must be collected in order to determine eligibility for Employment Support and Income Assistance. Relevant sections of the *Regulations* are 4, 5, 7, 8, 9, 17, 18, 19, 23(2), 24 and 60.

3.1.10 Methods of Information Collection:

1. From the client—The primary source of information about an applicant, recipient, spouse and dependents should be from the client;

When an applicant or client refuses to provide information required to determine their eligibility, Income Assistance may be refused or discontinued. See section 5(2) of the *Regulations*.

2. From other sources with consent from the client— ‘Consent to Release and Obtain Information Authorization’ form signed by the client(s) allows the Department to request information from other persons and/or organizations for the purposes identified in the form. This ‘Consent to Release and Obtain Information Authorization’ form must be signed by the client(s) every year as long as the client(s) is receiving services from the Employment Support and Income Assistance program.

Based on the understanding that the personal information the Department collects is owned by the client and the Department who keeps it under its custody or control. A duly signed ‘Consent to Release and Obtain Information Authorization’ form is a critical document that permits the Department to collect information from other parties, other than directly from the client.

With respect to the ‘Consent to Release and Obtain Information Authorization’ form, staff must:

1. take every reasonable measure to ensure that client(s) read and understand what it is they are consenting to by signing the form;
2. discuss each aspect of the form with the applicant(s) or client(s) and answer any questions they may have;

3. where necessary, read the form to the applicant(s) or client(s) who may not be able to do so themselves; and
4. inform the applicant(s) or client(s) that refusal to sign the 'Consent to Release and Obtain Information Authorization' form will result in Income Assistance being refused or discontinued. See Section 5 (2) of the *Regulations*.

3.1.11 Collection of Unsolicited Information about a Client:

When an individual provides unsolicited information about an applicant, recipient, spouse or dependents, and the information is relevant in the determination of eligibility or ongoing eligibility for Employment Support and Income Assistance, the information should be recorded in the client's file.

The caseworker should determine what is an appropriate course of action in respect to verifying the validity of the information. This information should be discussed with the client, if appropriate, or determine other appropriate ways to verify the information. The source of the referral should be confidential unless confidentiality cannot be maintained by law.

3.1.12 Use and Disclosure of Client's Personal Information:

Clients have the right to expect that their personal information will be used and disclosed only for the purposes of determining their eligibility for Employment Support and Income Assistance.

Clients must be made aware that when required or authorized by law their personal information may be disclosed to other government departments, third parties or used for another purpose.

3.1.13 Protecting Privacy when Using or Disclosing Personal Information:

The Employment Support and Income Assistance staff are responsible to take reasonable measures to protect the client's privacy. It is expected that during the course of processing an individual's application for Income Assistance or assessing their ongoing eligibility for Income Assistance that only the personal information needed to determine eligibility will be disclosed. In doing so, however, it may become apparent to the individuals from whom information is being sought, or with whom the information is shared, that the person may be receiving benefits from the Employment Support and Income Assistance program.

Applicants and clients must be made aware by staff that during the process of assessing their eligibility for Income Assistance that the documentation will indicate that the Department of Community Services is involved. As an example, the 'Consent to Release and Obtain Information Authorization' form clearly indicates that the information is being used to determine eligibility for Employment Support and Income Assistance.

3.1.14 Disclosing Information to Other Public Bodies or Third Parties: (e.g. Police, MLA's, MP's, Municipal Councillors, and Clergy)

1. Other Public Bodies

Staff are permitted by legislation to disclose personal information to another public body about a client, if the other public body needs the information for the necessary requirements of Government operations, or if the employee or the officer of the Department requires the information for the performance of their duties.

Staff are advised to take extreme care in terms of sharing information with other Departments of Government about Departmental clients. Staff should consult with a supervisor or the Freedom of Information and Protection of Privacy (FOIPOP) Administrator about the sharing of such information. Usually information will only be shared with other Departments of Government where it is pursuant to another statute or an information sharing agreement, such as with Vital Statistics, Service Nova Scotia, and Canada Revenue Agency.

2. Police

Where the Department has referred a matter to the Police for investigation, staff can share information with the investigating police force in respect to the matter that has been referred.

Where there has been no referral made and the Police contact the Department to obtain information, staff may share information with the Police "to assist them in an investigation" which is being undertaken as a result of a law enforcement proceeding or from which a law enforcement proceeding is likely to result. If there is any doubt as to whether or not the information is required to "assist in an investigation" staff should consult with a supervisor or with a FOIPOP Administrator before disclosing any information.

3. Members of the Legislative Assembly (MLA)

Pursuant to Section 27(j) of the *Freedom of Information and Protection of Privacy Act*, staff can disclose personal information about a client to an MLA

who has been requested by the client “to assist in resolving a problem.” The information staff provides to the MLA should only be as much information as is required to respond to the inquiry and should only be done when staff are confident that they are speaking with an MLA or an MLA’s staff and that it is certain that the MLA’s office has been contacted by the client. To ensure that the MLA has been contacted by the client, staff should advise that they wish to be as helpful as possible but need the MLA or the staff member to verbally confirm that they have been requested by the client “to assist in resolving a problem.”

When staff are unsure as to whether or not they are speaking with an MLA or a member of the MLA’s staff, they should ask the individual for their name, the constituency they represent, their constituency office telephone number and indicate that you will get back to them within a specified time frame. To confirm the information given, contact the appropriate Caucus Office and verify the MLA’s constituency office telephone number or staff member’s name.

While the *FOIPOP Act* does not require the request from the MLA to be in writing, the above process is recommended for verbal disclosure of personal information. If the MLA requests access to copy of records, even it is “to assist in resolving a problem”, the MLA must put the request in writing indicating:

- a. documents they are requesting access to; and
- b. confirming that they are assisting the client in resolving a problem; or
- c. consent form duly signed by our client authorizing the MLA to request access to the records (Form can be accessed in the District Offices).

Any information conveyed to the MLA should be documented in the client’s file along with confirmation that the MLA verified they have been requested by the client “to assist them in resolving a problem.”

4. Members of Parliament (Federal)

Unlike MLAs, Members of Parliament (MPs) do not have any special status under the *FOIPOP Act*.

MPs most often make contact by mail rather than by phone. The reply regardless of whether it is oral or written should only contain information about policy and procedures. No personal information about a client can be released to an MP without the consent of the client. The consent should be in writing or verbally confirmed with the client and should specify the

information that can be disclosed. The obtaining of verbal consent must be documented in client's file.

5. Municipal Councillors, Clergy and Others (Advocates)

Municipal councillors and clergy are to be treated the same as any person seeking information in respect of a client. Information is not to be released without the consent of the client. The consent should be in writing or verbally confirmed with the client that they have authorized a municipal councillor, a clergy member, or any other person, to obtain information about them and should specify the information that can be disclosed. The obtaining of verbal consent must be documented in the client's file.

3.1.15 Disclosing Information Pursuant to a Court Order:

1. Search Warrants

When law enforcement officials present a search warrant to staff to search premises and/or documents of the Department, the Supervisor or District Manager of the office involved should gather up the records which are the subject matter of the search warrant. A review of the records is required to determine if there are documents in the record which are not subject to the search warrant such as information in respect of other clients.

If there are questions or concerns about releasing certain documents which are the subject of the search warrant, advice should be sought from Legal Counsel.

2. Subpoenas

A subpoena is an Order of the Court and the staff person who is subject to the subpoena, is not required, nor authorized to provide information to either of the parties who are the subject of the proceedings or to their lawyers. The staff person's obligation is to appear in Court at the time and place indicated in the subpoena and to bring with them the documents cited in the subpoena.

Where a staff member of the Department is subpoenaed the staff person should, if the subpoena requires records to be produced, gather up the relevant records and review the records in consultation with their Supervisor. This is to determine if there is any information in the records that should be brought to the attention of the Court as potentially not subject to the subpoena such as documents which are subject to solicitor-client privilege or information pertaining to a third party.

It may be possible in some cases for the information which is the subject of the subpoena to be provided to the Court/parties in a manner which would not involve the staff member attending Court. This should be discussed with the Department of Justice as the information sought may be provided by way of an affidavit if both parties are prepared to consent to this, thereby alleviating the necessity for the staff member attending Court. As well, in some cases the Department may not have information to provide, or the subpoena may have been issued to the wrong person, or it is impossible for the person to whom it is issued to attend the Court hearing. These situations should be discussed with Legal Counsel.

3. Orders for Production

The Department often receives Orders from the Supreme Court known as "Orders for Production." This is an Order of the Court requiring the production of records in respect of a matter which is before the Courts.

Orders for Production are handled by the Department of Justice who sends them to the FOIPOP Administrator. There are usually tight time lines for responding to Orders for Production so staff must forward the records to the FOIPOP Administrator as soon as the Order is received to comply with this request in a timely manner.

3.1.16 Disclosing Information in Emergency Circumstances:

1. Section 27 (f) of the *Freedom of Information and Protection of Privacy Act* allows the disclosure of personal information about a client where the disclosure is necessary to protect the health or safety of an officer of a public body or an employee of a public body or the Minister (as an example, disclosing information to a staff person about a client who is known to be dangerous).

Staff should consult with a supervisor or the FOIPOP Administrator before releasing information in these circumstances unless the situation is so urgent that immediate release of the information is required.

2. Section 27 (o) of the *Freedom of Information and Protection of Privacy Act* allows the disclosure of personal information about clients if there are compelling circumstances affecting the health or safety of a member of the public. Such disclosure, however, requires the prior consent of the Head of the public body (the Deputy Minister). Staff should consult with a Supervisor and the FOIPOP Administrator to determine if the circumstances are within the scope of this provision of the *Freedom of Information and Protection of Privacy Act*.

3.1.17 Retention of Information:

1. Employment Support and Income Assistance (ESIA) records are governed by the Department of Community Services' Record Retention Schedule and must be retained according to this Schedule. Each office will have designated staff who are responsible for adherence to the Record Retention Schedule; and
2. *Freedom of Information and Protection of Privacy Act* requires that information used to make a decision about a client must be retained for at least one (1) year after this action has been taken. The Record Retention Schedule takes this into account.

3.1.18 Security of Information:

The security of client files is paramount in ensuring client confidentiality.

Staff are required to protect personal information about clients by making reasonable security arrangements against unauthorized access to personal information and unauthorized disclosure of personal information.

1. Staff must not conduct conversations about a client in public places or discuss client information outside the work environment. Interviews with clients should be held in, as much as the workplace allows, a location that maintains a client's privacy and confidentiality.
2. Client files, both computerized and paper, are to be maintained in, as much as the workplace allows, a secure location.
3. Computer access should be controlled through passwords and these passwords are to be kept secure and changed frequently. Passwords are not to be shared with others unless it is necessary to access information for job related duties.
4. Computer screens must be secured before walking away from your computer.
5. Where staff are transporting files outside of the office, they are required to take reasonable precautions to ensure the security of the file. This could be achieved by carrying them in locked cases, not leaving them unattended and ensuring that they are kept in locked vehicles.
6. When sending or transferring original files to another office, the files are to be sealed in an envelope, marked private and confidential, and addressed to the

individual and that location that it is intended to be sent. Files must be sent by courier or through interdepartmental mail. Regular mail must be avoided.

7. When responding to a FOIPOP request, only a copy of the file must be sent to the person processing the request. In exceptional circumstances where the file is very extensive it may be necessary to send the original file. In such cases arrangements will be made with the Regional FOIPOP Delegate or the FOIPOP Administrator prior to sending the original file.
8. Staff must ensure that Blue Recycle Bins are used to dispose of drafts and working materials that do not contain personal and/or confidential information. Exact copies or convenience copies of records that do not contain personal and/or confidential information may be disposed of in Blue Recycle Bins.

Any records as defined above that contain personal and/or confidential information must be sent to the shredder.

At the end of the business day, staff will:

1. tidy up and secure documents containing confidential, sensitive and/or personal information;
2. lock drawers, file cabinets and office doors;
3. ensure that documents are locked in drawers or file cabinets if they are unable to locate their office doors; and
4. secure expensive equipment (laptops, etc.).

3.1.19 Security when Sending/Receiving Faxes:

When sending faxes staff are encouraged to always use a cover sheet containing:

1. the name, title and organization of the sender and of the Recipient;
2. the number of pages being sent;
3. an area for comments; and
4. a box indicating that the fax contains personal or confidential information.

Staff should:

1. confirm that the fax number is the correct one before dialing. If you are using a master list make sure that it is up to date;
2. check the accuracy of the dialed number;
3. where possible, call the Recipient to alert him/her that a fax containing personal or confidential information is being sent;
4. check confirmation and activity reports; and
5. if you receive a fax in error that contains personal or confidential information, contact the sender immediately and shred the copy received.

For additional clarification on this policy please feel free to contact your Regional FOIPOP Delegate or the FOIPOP Administrator in Head Office.

Program Policy:	Employment Support and Income Assistance	
Chapter: 4	Definitions	
Section: 1	Definitions	
Effective: August 1, 2001	ESIA Regulations: 2 Definitions	Page 1 of 9
Revised: September 12, 2011		

4.1.1 Policy: Definitions:

1. **“Aboriginal Peoples”** shall mean “Indian Band” as defined by the federal *Indian Act*. Usually, this will refer to the thirteen (13) Mi’kmaq Indian Bands and reserve lands in Nova Scotia, but it could also refer to any of the over three hundred and twenty (320) Indian Bands in Canada. First Nations Family includes any registered dependent or member of a First Nations family;
2. **“allowable mortgage expense”** means the percentage of an applicant’s or recipient’s mortgage payment that is included as an expense;
3. **“applicant”** means a person who applies for assistance;
4. **“application”** means an application for assistance pursuant to Section 4;
5. **“approved education program”** means:
 - a. a high school, adult day school, upgrading or literacy program, or
 - b. technical or professional training of a duration of two (2) years or less
6. **“assets”** means:
 - a. **liquid** - such as, but not limited to, cash on hand, bank accounts, stocks, bonds or other securities, monetary lottery winnings, monetary inheritances, liquidation of business assets;
 - b. **personal** - such as, but not limited to, a second motor vehicle, recreational vehicles;
 - c. **real property** - other than the primary residence, such as but not limited to a cottage, building lots.

7. “**assets exclusions**” means the following items are not considered assets:
- a. a primary residence of an applicant or a recipient that is assessed at less than twice the average assessment value of single family dwellings in the municipality in which the residence is located,
 - b. a cash surrender value of under \$500 of a life insurance policy,
 - c. a motor vehicle used for basic transportation including transportation to job-search requirements, training or health and safety requirements,
 - d. tools or equipment directly related to a trade or profession,
 - e. a Registered Education Savings Plan (RESP) established for the education of a child and intended for use by that child in relation to education expenses,
 - f. any portion of a registered retirement savings plan that is part of an employment pension program at the place of employment where the applicant or recipient is employed, temporarily laid off or on sick leave
 - g. a prepaid funeral to the value of \$5,000,
 - h. savings from participation in a savings program that is designed to promote self-sufficiency and is approved by the Minister (e.g. Individual Development Accounts*);
- * “**An Individual Development Account (IDA)** is a restrictive savings account held by a low-income person whose regular savings are matched by contributions from government or other sources. The matched contributions can only be put towards specific uses.”
8. “**assistance**” means the provision of money, goods or services to a person in need for:
- a. basic needs including food, clothing, shelter, fuel, utilities, and personal requirements,
 - b. special needs,
 - c. employment services;

9. “**boarder**” means an applicant/recipient who has the use of separate and private sleeping accommodations and who has meals and other services provided;

Income from boarders will be charged at the greater of either 25% of the gross amount received per month per boarder, or \$50 per month per boarder as food is included within the monthly charge;

10. “**budget deficit**” of an applicant or recipient means the amount by which the total allowable expenses of the applicant or recipient exceed the total chargeable income of the applicant or recipient;
11. “**chargeable income**” of an applicant or recipient means income that is included for the purpose of computing the amount of assistance payable to the applicant or recipient pursuant to the *Regulations*;
12. “**child welfare agency**” agency within the meaning of the *Children and Family Services Act*;
13. “**cohabit**” means to live together with another person as a spouse and “**cohabitation**” and “**cohabiting**” have corresponding meanings;
14. “**deferred income**” includes retroactive pay, retroactive pension, including compensation paid for insufficient notice of termination of employment;
15. “**Department**” means Department of Community Services;
16. “**dependent child**” means a person residing in Nova Scotia who is dependent for support upon an applicant or a recipient and is:
- a. under the age of 19 years, or
 - b. 19 or 20 years of age and is attending an approved educational program not designated for student loan purposes;
17. “**Director**” means the Director of Income Assistance in the Department of Community Services;
18. “**employability**” means the many factors that assist a person to be more self sufficient, including but not limited to skills, education, learning experiences, work experience, life situation, health, goals, volunteer activities, resources in the community, availability of transportation and child care, and personal supports;
19. “**employability assessment**” means an assessment, which is used to determine whether a recipient or a spouse is employable at the time of the

assessment and, if not employable at the time of the assessment, includes an assessment of the measures or activities that can reasonably be undertaken by a recipient or spouse to enable a recipient or spouse to become employable;

20. “**employment plan**” means a plan that is developed in conjunction with an employability assessment and that establishes the goals of a recipient or a spouse in respect of:
 - a. participation in employment services,
 - b. participation in an approved educational program, and
 - c. employment;
21. “**Employment Support Services**” is a range of services provided by the Department of Community Services aimed at assisting employable clients of income assistance to achieve employment;
22. “**employment services**” means services and programs to assist recipients in enhancing their employability and quality of life, including programs provided by other departments, agencies or governments;
23. “**expense**” means an expense of an applicant or recipient that is included for the purpose of calculating the amount of assistance payable to the applicant or recipient pursuant to these *Regulations*, and includes an expense of a spouse and, where applicable, a dependent child;
24. “**Family Benefits**” means benefits received under the Family Benefits Schedule “B” *Regulations*;
25. “**full-time**”, with respect to employment, means paid employment for thirty (30) hours or more per week;
26. “**home**” includes a mobile home;
27. “**home improvement loans**” means loans that are granted for essential repair to the home and/or replacement or equipment considered part of the structure of the home (e.g. furnace, pump, hot water heater, etc.);
28. “**income maintenance payment**” means a payment made to a person by the Government of Canada or of Nova Scotia in respect of loss or presumed loss of income by reason of unemployment, loss of the principal family provider, illness, disability or age;

29. “**MSI**” means the Medical Services Insurance Program administered under the *Health Services and Insurance Act*;
30. “**Minister**” means the Minister of Community Services;
31. “**mobile home**” means any trailer that is:
- a. designed for or intended to be equipped with wheels, whether or not it is so equipped, and
 - b. constructed or manufactured to provide a residence for one (1) or more persons,
 - c. but does not include a travel trailer or tent trailer or trailer otherwise designed;
32. “**mortgage payment**” means the actual amount paid, calculated monthly, less any payment of taxes included in the payment for a mortgage that has been obtained for the purpose of purchasing or making necessary repairs or renovations to the primary residence of an applicant or recipient;
33. “**municipality**” means a regional municipality, incorporated town or a county or district;
34. “**net wages/salaries**” means gross income less Mandatory Employment Related Costs (MERCs) and mandatory contributions at the minimum rate including, but not limited to, the following:
- a. income tax payable,
 - b. Employment Insurance contributions,
 - c. Canada Pension Plan contributions,
 - d. mandatory company pension plan contributions,
 - e. union dues,
 - f. mandatory group health and life contributions and
 - g. long term disability contributions;
35. “**Nova Scotia Formulary**” means the publication of the Department of Health and Wellness that details which drugs and supplies are benefits under the Nova Scotia Seniors' Pharmacare Program, Family Pharmacare Program,

Diabetes Assistance Program, Community Services Pharmacare Programs and Drug Assistance for Cancer Patients.

36. “**overpayment**” means any assistance paid pursuant to the *Act* that was paid based on false or misleading information supplied by an applicant or that otherwise ought not to have been paid according to the *Act* and the *Regulations*, and includes sums paid to a person who receives deferred income with respect to any period for which assistance was provided and sums paid to a person that were agreed to be repayable, whether out of the proceeds of the deferred sale of an asset, from deferred income or otherwise;
37. “**part-time**”, with respect to employment, means paid employment for up to thirty (30) hours per week;
38. “**periodic**” reporting/payment type are for cases that meet the following criteria:
 - a. Recipients not reporting wages, and/or
 - b. Eligible for ESIA for more than six (6) months, and
 - c. No budget changes in three (3) months;
39. “**person in need**” means a person whose requirements for basic needs, special needs and employment services as prescribed in the *Regulations* exceed the income, assets and other resources available to that person as determined pursuant to the *Regulations*;
40. “**post-secondary education program**” means a program designated for student loan purposes;
41. “**primary residence**” means the housing unit ordinarily inhabited by an applicant or recipient;
42. “**recipient**” means a person who is receiving assistance;
43. “**roomer**” means an applicant/recipient who has the use of separate and private sleeping accommodation and who provides for his/her own meals and other services;

Income from roomers will be charged at the greater of 70% of the gross amount received per month per roomer, or \$50 per month per roomer as food is not included within the monthly charge;

44. “**service period**” means the calendar month of eligibility for which an ESIA payment is intended;

45. “**special needs**” means a need for any of the following items or services,

- i. dental care approved in accordance with the *ESIA Dental Fee Guide* approved by the Director;
- ii. optical care;
- iii. pharmacare coverage;
- iv. special diet;
- v. transportation;
- vi. child care;
- vii. implementation of an employment plan;
- viii. funeral arrangements;

or an item or service prescribed in policy by the Director.

The following items and services are not included:

- a. an item or service that is insured under a Provincial insured health services program or otherwise funded by government;
- b. an item or service for medical purposes for which an alternative exists under MSI;
- c. prescription medications, drugs and substances that are not listed as benefits under the pharmacare programs in the *Nova Scotia Formulary*;
- d. medical treatments and substances that are not covered as an insured service under MSI; including equipment, supplies, materials or services used in producing or administering the treatments or substances;
- e. shelter costs and personal allowances.

46. “**self-employment**” with respect to a person, means work in a business that the person directly or indirectly operates and controls, but does not include work a person carries out as a dependent contractor or in which he or she is

remunerated by commissions. Generally, you are self-employed if you control:

- a. the number of hours you work,
- b. the premises and material you use, and
- c. the way you do your duties;

47. “**spouse**” means:

- a. a husband or a wife of an applicant or recipient, or
- b. a common-law partner or a same-sex partner with whom an applicant or recipient is in a marriage-like relationship that is not a legal marriage;

48. “**common law partner**” means a person who is living with another person in a relationship of interdependence functioning as an economic and domestic unit, and at least one of the following applies to the two (2) persons in the relationship:

- a. the two (2) persons have lived together for at least twelve (12) continuous months,
- b. the two (2) persons are parents of a child or children by birth or adoption or legal custody,
- c. the two (2) persons previously lived together in a relationship of interdependence functioning as an economic and domestic unit for at least twelve (12) continuous months including any period of time the two (2) persons were separated for less than 90 days, and have resumed living together in such a relationship, or
- d. the two (2) persons declare themselves to be a common-law couple;

49. “**student family member**” means a person who resides with an applicant or recipient who is their parent or legal guardian, and who meets all of the following criteria:

- a. they are 23 years of age or younger,
- b. they have been out of high school for less than four (4) years,
- c. they are attending a post-secondary education program full time,

- d. they have not had two (2) periods of twelve (12) consecutive months when they were not a student, specifically they did not take two (2) years off school;
50. “**static**” means former Family Benefits cases that are periodic payment/reporting cycle and may be subject to specific grandparenting provisions. These cases are subject to the annual review process;
51. “**supervisor**” means a person in the employ of the Department of Community Services who is responsible for overseeing the work and decisions of a caseworker;
52. “**supported employment**” means employment of a person whose physical, mental or cognitive abilities may limit their ability to be financially self-sufficient;
53. “**taxes**” means any tax imposed by or under an enactment in respect of real or personal property;
54. “**training allowance**” means an allowance for services and expenses necessary for a person to pursue academic studies, skills training, life skills development, on-the-job training, or training in a sheltered workshop;
55. “**transient**” is a person with no fixed address;
56. “**unearned income**” includes, but is not limited to, the following:
- a. income maintenance payments such as CPP and EI,
 - b. LTD benefits,
 - c. Workers’ compensation,
 - d. insurance payments,
 - e. damage awards,
 - f. income from mortgages,
 - g. any maintenance payments,
 - h. superannuation,
 - i. income from investments such as stocks and bonds;

57. **“youth”** means a person aged 16 to 18, inclusive, who is eligible to apply for assistance.

Program Policy:	Employment Support and Income Assistance	
Chapter: 5	Basic Needs	
Section: 1	Initial and Ongoing Eligibility	
Effective: August 1, 2001	ESIA Regulations: 4 Application for assistance 5(1)(2), 7(1) Additional information required 7(2) Changes in Circumstances 9 Providing documentation 14(1)(3) Eligibility for assistance 15(4) Caseworker may change amount of assistance 17(1)(2) Employability assessment 29(1) Expenses to be considered in determining eligibility	Page 1 of 10
Revised: May 1, 2012		

5.1.1 Policy: General Eligibility Criteria

In order to be eligible for Employment Support and Income Assistance, an applicant must:

1. be 19 years of age or older or a person 16 to 18 years of age inclusive who is unable to reside within a parental home due to exceptional circumstances under [Policy 5.10.1 - \(Youth Aged 16 to 18 \(Inclusive\) Eligibility Criteria\)](#);
2. be present in the Province at the time of application;
3. be a person in need;
4. pursue all other feasible sources of income;
5. provide and complete all required documentation to substantiate need; and have a budget deficit; and
6. participate in determination of the need for a referral for an employability assessment

5.1.2 Policy: Role of Intake

The role of intake is to make a preliminary assessment of an applicant's eligibility and to inform them of their rights and responsibilities. The intake process must collect relevant information to support an applicants' request for Income Assistance

and to assess the nature of the request. The intake process may, when necessary, provide emergency Income Assistance.

There are five (5) major steps involved in the intake process. These steps include:

1. **Initial Contact:** determination of the specific nature of the request and direct appropriately. This may include a referral to other agencies and services;
2. **Record and Register;**
3. **Potential Eligibility Determination and Home Visit:** review job search efforts in the thirty (30) days prior to making the application for Income Assistance for both the applicant and/or spouse;
4. **Final Eligibility Determination;** and
5. **Cheque Production/Pharmacare Eligibility/Dental Eligibility and Assignment of Case Manager.**

5.1.3 Policy: Required Documentation

In order to determine initial and ongoing eligibility or to verify information, an applicant/recipient and spouse must provide the following at the time of application or any other time while in receipt of Income Assistance.

The following information will be maintained on file:

1. a completed and signed 'ESIA Program Application' form signed by both the applicant/recipient and spouse;
2. verification or copies of social insurance numbers for the applicant/recipient and/or the spouse and, if applicable, dependent children;
3. copies of the Nova Scotia Health Card of the applicant/recipient and/or the spouse and, if applicable, dependent children; if a Nova Scotia Health card is not available then a copy of birth certificate is acceptable pending receipt of Nova Scotia Health Card;
4. a completed and signed 'Consent to Release and Obtain Information Authorization' form by both the applicant/recipient and the spouse;
5. copies of applicant/recipient's and spouse's personal and financial information necessary to determine initial or ongoing eligibility and/or to verify information relating to eligibility;

6. a completed 'Client Personal and Financial Statement' form and signed by both the applicant/recipient and the spouse;
7. required documentation as determined by the applicant/recipient's and spouse's circumstances/situation (for immigrants and non-Canadians this includes documentation from Citizenship and Immigration Canada), if applicable;
8. a completed and signed 'Understanding of Participation in Employability Activity' form by both the applicant/recipient and spouse, if applicable;
9. verification or a copy from the Canada Revenue Agency of the most recent Income Tax Notice of Assessment (NOA) for both the applicant/recipient and the spouse;
10. updated medical information on both of the applicant/recipient and spouse as per [Policy 5.1.7 - \(Request for Medical Information Related to Employability\)](#), if applicable;
11. a completed and signed 'Student Family Member Consent' form by the applicant/recipient and the student family member of the applicant/recipient; and
12. a completed and signed 'Confirmation of Relationship of Interdependence' form signed by the applicant/recipient and the partner of the applicant/recipient. If the signature of the partner is not available, the signature of the applicant/recipient is acceptable when the required information is provided;

Refusal to Provide Required Information/Documentation

Where an applicant/recipient and spouse refuses to provide information or to provide the required documentation, as set out above or required for assessment of eligibility, Income Assistance will be refused and/or discontinued.

5.1.4 Policy: Required to Pursue all Other Feasible Sources of Income

An applicant/recipient and/or spouse is required to pursue all other feasible sources of income including, but not limited to: wages, Employment Insurance, Canada Pension Plan, Old Age Security, the Canada Child Tax Benefit, the Guaranteed Income Supplement, private insurance claims, and maintenance payments. Where an applicant/recipient and/or spouse refuse to pursue all other feasible sources of income, Income Assistance will be refused and/or discontinued.

5.1.4(a) Canada Pension Plan Benefits

An applicant/recipient and spouse who appear eligible for and are not currently receiving Canada Pension Plan (CPP) benefits must make application. Caseworkers must complete a CPP 'Consent to Deduction and Payment - 1613' form with the applicant/recipient and spouse at intake or immediately upon notification that the application for Canada Pension Plan benefits has been submitted by or on behalf of an applicant/recipient. Canada Pension Plan benefits will be charged as unearned income following the month Canada Pension was granted, where a recipient has also been in receipt of Income Assistance. The initial qualifying month of CPP is exempt.

5.1.4(b) Maintenance Income

As a condition of eligibility an applicant/recipient and/or the spouse are expected to pursue every possible source of income including maintenance income payments.

A caseworker will:

1. ensure an applicant/recipient and/or the spouse make every reasonable effort to secure maintenance;
2. make a referral to the Family Maintenance Income Support (FMIS) program when:
 - a. an applicant/recipient and the spouse does not have a maintenance order (an order is considered to be a formal written arrangement registered with the court and enforceable by the Maintenance Enforcement program);
 - b. the maintenance order is inadequate based on the ability of the non-custodial parent to pay;
 - c. additional child(ren) is born;
 - d. default in maintenance;
 - e. non-custodial parent is unknown; and/or
 - f. non-custodial parent is not able to be located.
3. ensure that referrals to the Maintenance Support program include:
 - a. 'FMIS Referral' form;

- b. 'FMIS Information Respecting Support' form ; and
- c. Any previous Orders/Agreements.

Upon receiving a referral, the Maintenance Support caseworker will work with the recipient and/or the spouse and the non-custodial parent to set up a Maintenance Agreement in accordance with the Child Support Guidelines.

5.1.4(c) Waiver of Requirement to Pursue Maintenance Income Support

When potential abuse by the absent spouse or parent poses a serious threat to the recipient, and/or other family members, the requirement to pursue maintenance may be waived.

5.1.4(d) Employment Insurance Benefits

An applicant/recipient and spouse who appears eligible for and are not currently receiving Employment Insurance (EI) benefits must make application. Caseworkers must complete an EI 'Assignment of Benefits' form with the applicant/recipient and spouse at intake or immediately upon notification that the application for Employment Insurance benefits has been submitted by or on behalf of the applicant/recipient.

5.1.5 Policy: Employability Screening at Intake

An applicant/recipient and spouse who meets the general eligibility criteria for Income Assistance must complete the Employment Services Screening Tool.

The outcome of the Employment Services Screening Tool will be used to determine the potential requirement for an applicant/recipient and spouse to participate in employability activities and sign the 'Understanding of Participation in Employability Activity' form.

Refusal to participate in the completion of the Employment Services Screening Tool at Intake

Where an applicant/recipient or spouse refuses to complete the Employment Services Screening Tool, Income Assistance will be refused and/or discontinued.

5.1.6 Policy: Understanding of Participation in Employability Activity Form

An applicant/recipient and spouse who meets the general eligibility criteria for Income Assistance and has completed the Employment Services Screening Tool which determined that they must participate in employability activities, must sign the 'Understanding of Participation in Employability Activity' form to be eligible for initial/ongoing Income Assistance.

Refusal to Complete and Sign the 'Understanding of Participation in Employability Activity' Form

Where an applicant/recipient or spouse refuses to complete and sign the 'Understanding of Participation in Employability Activity' form, Income Assistance will be refused and/or discontinued.

5.1.7 Policy: Request for Medical Information Related to Employability

In situations where an applicant/recipient and/or spouse indicate their disability/illness is a barrier to employment, relevant medical and social information may be required. If a medical report is unclear, it is the responsibility of an applicant/recipient or spouse to obtain further clarification, if requested.

Income Assistance may be provided for a reasonable period of time until a medical report is obtained.

Where there is potential for employment or involvement in employment services, an applicant/recipient and/or spouse may be required to participate in a case plan tailored to their capabilities and intended to maximize their opportunities for self-reliance.

5.1.8 Policy: Emergencies/Incomplete Documentation

When eligibility cannot be determined in a timely manner, Income Assistance may be provided in situations where the health and safety of an applicant/recipient and/or spouse and/or dependents is apparent and verified. Completion of necessary documentation is required at the earliest opportunity.

5.1.9 Policy: Reporting Change in Circumstances

An applicant/recipient and/or spouse are required to report any change in circumstances, which may affect their eligibility immediately upon the occurrence of the change or prior to, if known in advance. An applicant/recipient or spouse must

report changes in circumstances verbally and/or by the completion of the monthly 'Income Statement' form and/or provision of requested documentation.

Changes in circumstances include, but are not limited to, changes in income, assets, shelter expenses, living arrangements, or other changes such as increases/decreases in number of dependents, cohabitation, marriage, divorce, separation, and name change.

5.1.9(a) Policy: Failure to Report Change in Circumstances - Fraud

Where an applicant/recipient or spouse fails to report a change in circumstances, Income Assistance will be refused and/or discontinued and may result in an overpayment [Policy 8.1.1 - \(Overpayments\)](#).

If it appears that an applicant/recipient or spouse intentionally gave false/misleading information in order to receive Income Assistance, then a thorough review of the case will be undertaken and a referral to the police may occur.

It is an offense under the Criminal Code for anyone, by deceit, falsehood, or any other fraudulent means, to defraud the public of money, property, other valuables and/or securities.

5.1.10 Policy: Ongoing Eligibility

Recipients who are on a monthly reporting cycle must establish ongoing eligibility each month by completing a monthly income statement. This includes verification of income, expenses and efforts to obtain alternate financial support.

5.1.11 Policy: Conducting the Annual Review

In order to determine ongoing eligibility for Income Assistance, a comprehensive review of a recipient's and/or spouse's eligibility must be conducted once a year for all cases.

This comprehensive review will include the caseworker meeting with the recipient and spouse, if applicable, to complete, but not limited to, the following documentation and information:

1. a completed 'Consent to Release and Obtain Information Authorization' form signed by both the recipient and spouse;
2. a completed 'Client Personal and Financial Statement' form signed by both the recipient and the spouse;

3. verification of income/assets that have not been reported on monthly 'Income Statements' form;
4. copies of documentation regarding assets;
5. copies of bills and/or statements of expenses since the last review;
6. update living situation and complete a home visit;
7. the completion of other forms applicable to the recipient and/or spouse situation, for example, CPP 'Consent to Deduction and Payment - 1613' form, EI 'Assignment of Benefits' form;
8. where appropriate reassess the recipient and spouse employability participation profile by completing the Employment Services Screening Tool. Complete Employability Participation (EP) codes based on screening tool.

Where applicable, complete an 'Understanding of Participation in Employability Activity' form and make a referral for:

- a. Job Search or
- b. *Nova Scotia Employability Assessment (NSEA)*
- c. Referral to Department of Labour and Advanced Education (LAE) – An External Service Provider in your local area responsible for the delivery of the *Labour Market Development Agreement (LMDA)* services for Employment Insurance (EI) recipients;

or

9. complete the 'Report of Present Health Condition' form for both a recipient and spouse, where appropriate;
10. review the reporting cycle and payment history to determine if the case meets the periodic payment criteria. The reporting cycle may be changed from monthly to periodic where there are no budget changes after three (3) consecutive months of eligibility and no reporting of wages with no changes.

Program Policy:	Employment Support and Income Assistance	
Chapter: 5	Basic Needs	
Section: 2	Budget Calculations	
Effective: August 1, 2001	ESIA Regulations: 16(3) Dependent child 27(2) Supervisor may determine higher amount 29(1) (2) Expenses to be considered in determining eligibility 30 Amount Payable 37 Joint ownership of primary residence 46 Supervisor can modify calculation of budget deficit 58 Trust money	Page 1 of 6
Revised: April 30, 2010		

5.2.1 Policy: Initial Budget Calculations

In determining initial eligibility for Income Assistance, the following will be included in the budget calculations:

1. expenses prescribed in Schedule "A" of the *ESIA Regulations* for basic needs and [Policy 5.5.1 - \(Schedule: Personal Allowances and Maximum Shelter Allowance\)](#);
2. expenses prescribed in Section 29(1) of the *ESIA Regulations* with respect to the provision of transportation and child care for the purpose of employment, and health and safety; and
3. expenses prescribed for applicable special needs as defined by the special needs policy.

5.2.2 Policy: Ongoing Budget Calculations

In determining ongoing eligibility for Income Assistance, the following will be included in the budget calculations:

1. expenses prescribed in Schedule "A" of the *Regulations* for basic needs and [Policy 5.5.1 - \(Schedule: Personal Allowances and Maximum Shelter Allowance\)](#);
2. expenses for special needs as prescribed Schedule "A" of the *Regulations* and by Special Needs Policy [Chapter 6: Special Needs](#); and

3. expenses for participation in an employment plan.

5.2.3 Policy: Debts of Applicant/Recipient

The debts that an applicant/recipient and spouse may have with loan companies, merchants, individuals, etc. are not included in the determination of eligibility or level of benefits.

The only exceptions to this include mortgages or loans directly related to the purchase and/or necessary maintenance of the applicant/recipient's principle residence, subject to the approved shelter allowance rates.

The Department will not include the amount of the mortgage/loan in the budget calculation when the mortgage/loan is for non-essential repairs to the home. In situations where this would cause hardship for an applicant/recipient, a caseworker may allow this to be included as an expense, provided supervisory approval has been granted, and the amount is subject to the maximum approved shelter allowance rates.

5.2.4 Policy: Child in Applicant's Care

An applicant/recipient is eligible to apply for Income Assistance on behalf of a child in the applicant/recipient's care and custody where the child is not being maintained by his/her parent or the Provincial Child Welfare Authorities and where the applicant/recipient is the legal guardian of the child.

Legal guardianship can be determined by documents from the court or by parental written consent, in the form of a sworn statement.

A caseworker will consider the child as a dependent child in the determination of the applicant/recipient's budget deficit.

5.2.5 Policy: Joint Custody

Where a dependent child resides with more than one (1) applicant/recipient, they may be included only in the budget of an applicant/recipient where the child resides the majority of the time.

5.2.6 Policy: Non-Receipt of Maintenance Income

Recipients may be eligible to receive an ad-hoc maintenance payment provided the following criteria are met:

1. a recipient does not receive their maintenance payment;
2. the Order/Agreement has been charged against the budget;
3. a recipient has a Maintenance Agreement/Order and agree to register it with the Maintenance Enforcement Program (MEP); and
4. a recipient completes a 'Request for Maintenance Arrears' form with a caseworker, indicating they agree to repay the ad-hoc payment (if a recipient receives the related maintenance at a later date).

A recipient must agree to enroll with the Maintenance Enforcement Program (MEP) and to provide a caseworker with:

1. verification of enrolment; and
2. MEP number and Personal Identification Number (PIN) for the purpose of verifying MEP information (or an alternative means (e.g. recipient gets MEP to send original printouts).

MEP registration must be completed prior to issuing maintenance ad-hoc payments for more than one (1) service period. However, if there are extenuating circumstances that preclude a recipient from doing so before the next service period (e.g. private agreement that cannot be registered), additional ad-hoc payments may be issued, with supervisory approval (maximum of one (1) month's Order amount per service period).

In situations where a recipient has a private maintenance agreement that cannot be registered with MEP, the recipient must be referred to the Family Maintenance Income Support program [Policy 5.1.4\(b\) - \(Maintenance Income\)](#) to pursue a formal maintenance arrangement.

Maintenance ad-hoc payments may be issued for a maximum of three (3) consecutive months. After three (3) consecutive months, a recipient may enter into an Assignment of Maintenance [Policy 5.2.7 - \(Assignment of Maintenance Payments to the Minister/Department\)](#). If a recipient chooses not to enter into an Assignment of Maintenance, the maintenance amount will be included as chargeable income and no additional maintenance ad-hoc payments will be issued.

If a recipient receives maintenance for a service period for which an ad-hoc payment was issued, and does not return these funds to DCS, an overpayment will be setup for the associated funds. An overpayment should only be established when a recipient has received the funds from both the Department and the payor.

5.2.7 Policy: Assignment of Maintenance Payments to the Department

Recipients may assign their maintenance payments over to the Department. The Maintenance Enforcement Program (MEP) will forward all payments received on assigned cases directly to the Department and maintenance will not be included in a recipient's budget as chargeable income.

Recipients may be involved with the Assignment of Maintenance program when a caseworker, a recipient and/or MEP determine that maintenance payments are irregular. Irregular payments are defined as:

1. payments that are sporadic;
2. payments received late (fifteen (15) or more days) for three (3) consecutive months; and/or
3. payments that cause difficulties for a recipient (e.g. Percentage Orders, Provisional Orders, default in Orders that are greater than a recipient's budget deficit).

To be eligible to enter into the Assignment of Maintenance option, a recipient must have been in receipt of Income Assistance for three (3) consecutive months and the order must be enrolled with MEP.

Ad-hoc cheques will not be issued for maintenance for an assignment case.

When a recipient with irregular maintenance payments does not enter into the Assignment of Maintenance option with the Department after receiving three (3) consecutive months of ad-hoc payments, the amount of the maintenance order or separation agreement will continue to be included in the budget as monthly chargeable income. In this situation, a recipient will no longer be eligible to have this income replaced by the Department.

When a recipient who had previously assigned their maintenance payments over to the Department is no longer in receipt of Income Assistance, the maintenance payments will continue to be forwarded to the Department from MEP until the balance of maintenance payments, previously issued to the recipient, have been reimbursed to the Department. In such situations, the Department will forward any current maintenance payments, as per a maintenance order or separation agreement, to the former recipient and apply any additional amounts against the balance owed to the Department.

5.2.8 Policy: Cohabitation

Persons who reside together with shared financial resources such as, but not limited to, credit cards, bank accounts and loans, and who represent themselves to others to be each other's spouse will be considered as a two (2) adult family unit in determining initial eligibility or ongoing eligibility.

Cohabitation is determined to exist in these situations even though there may not be a legal marriage or conjugal relationship.

5.2.9 Policy: Joint Home Ownership

Where a primary residence is jointly owned, the allowable expense will be considered to be shared evenly (50%). Where such prorating will cause undue hardship, the full amount of the mortgage, subject to the allowable shelter maximum, may be allowed with supervisory approval. The inclusion of the full amount of the mortgage is subject to an applicant/recipient providing confirmation that action has been taken to sell the property or to have the property put solely in an applicant/recipient's name.

An applicant/recipient may be required to enter into a repayment agreement with respect to any Income Assistance granted in excess of the 50% for mortgage.

5.2.10 Policy: Mortgage Payment - Separation/Maintenance Agreement

Where a contribution to a mortgage payment is a condition of a maintenance order or separation agreement, the allowable mortgage expense will reflect the total mortgage costs, subject to the maximum shelter allowance, and the full amount of the maintenance order or separation agreement will be charged as income. A copy of the maintenance order or separation agreement will be maintained on the case file.

5.2.11 Policy: Fines

A fine is a legal obligation placed on an individual by a court of law. The amount of the fine cannot be provided for or recognized in the calculation of a budget deficit.

5.2.12 Policy: Seizure/Garnishment

Pursuant to section (9) of the *ESIA Act*, Income Assistance payments are not assignable and are not subject to seizure or garnishment except as may be

required in order to recover an overpayment by the Department of Community Services.

5.2.13 Policy: Trust Money

Where an applicant/recipient and/or any family member has access to monies set aside in trust, these monies are included in the determination of eligibility or level of benefits.

If trust money is defined for discretionary purposes only, a caseworker must contact the trust administrator to establish contributions from the trust account to be included in the budget and determination of eligibility.

Cross Reference:

[Policy 5.5.1 - \(Schedule: Personal Allowances and Maximum Shelter Allowance\)](#)

Program Policy:	Employment Support and Income Assistance	
Chapter: 5	Basic Needs	
Section: 3	Personal Allowances	
Effective: August 1, 2001	ESIA Regulations: 15(1)(4) Caseworker can change amount of assistance 16(1)(2) Dependent child 29(1)(2) Expenses to be considered in determining eligibility 33 Maternal nutritional allowance 46 Supervisor can modify calculation of budget deficit 47 (1)(2) Chargeable income 75 Nova Scotia Child Benefit	Page 1 of 5
Revised: September 27, 2007		

5.3.1 Policy: Personal Allowances

An applicant/recipient who is renting, boarding or owns his/her own home will be allowed the personal allowance rates outlined in [Policy 5.5.1 - \(Schedule: Personal Allowances and Maximum Shelter Allowance\)](#) as expenses in the calculation of the budget deficit. For the purpose of calculating entitlement, the expenses of an applicant/recipient will include the expenses of a spouse, or person living with the applicant/recipient as a spouse, and a dependent child 18 years of age or older.

5.3.2 Policy: Hospitalization - Personal Needs Allowance

A caseworker may discontinue Income Assistance where a recipient and/or the spouse has been hospitalized for more than thirty (30) consecutive days.

A personal needs allowance will be substituted for the personal allowance, which is normally included in the Income Assistance budget, for an applicant/recipient, a spouse or a dependent child over the age of 18 years who will be in the hospital for more than thirty (30) days, as per [Policy 5.5.1 - \(Schedule: Personal Allowances and Maximum Shelter Allowance\)](#).

A caseworker is required to assess eligibility for maintaining the shelter allowance while a recipient and/or spouse is hospitalized.

5.3.3 Policy: Residential Rehabilitation Program - Allowance

An applicant/recipient or the spouse involved in a residential rehabilitation program for a period of thirty (30) days or more may be eligible for:

1. an allowance of \$81 per month will be substituted for the personal allowance;
2. continued provision of an allowable shelter allowance for a single recipient up to six (6) months, which may be extended for a longer period based on economic feasibility and with supervisory approval;
3. continued provision of a shelter allowance for dependents, in accordance with the allowable shelter allowances, if a caseworker determines it is necessary to maintain the residence during the rehabilitation program period; and
4. continued provision of benefits for dependents who are in the care of a recipient, provided that satisfactory living arrangements have been made for the child(ren).

5.3.4 Policy: Dependent Child(ren) under the Age of 18 Years of an Applicant/Recipient

A personal allowance for dependent children, under the age of 18 years of age who are in the care and custody of an applicant/recipient, is not included in the ESIA budget calculation, [Policy 10.1.1 - \(Children's Benefit\)](#). Benefits for Nova Scotia children in all low-income families, including those in receipt of Income Assistance, are administered through the Federal Tax program. By filing an annual income tax return and completing a Canada Child Tax Benefit (CCTB) application, eligible families may receive these benefits. The CCTB consists of a base amount, the National Child Benefit Supplement (NCBS) plus the Nova Scotia Child Benefit (NSCB) and, if applicable; the Child Disability Benefit (CDB), [Appendix 2 - \(The Nova Scotia Child Benefit\)](#).

In circumstances where a recipient or a spouse are receiving less than \$133 per child through a combination of the NCBS and the NSCB, Income Assistance may provide temporary benefits up to three (3) months or until the family receives the NCBS/NSCB. This temporary benefit is called the Child Benefit Adjustment, [Policy 5.3.5 - \(Child Benefit Adjustment\)](#).

5.3.5 Policy: **Child Benefit Adjustment**

A recipient or the spouse with children under the age of 18, including eligible refugee claimants, may request a Child Benefit Adjustment (CBA). This payment may be issued by Income Assistance when the Recipient or spouse does not receive the National Child Benefit Supplement (NCBS) and the Nova Scotia Child Benefit (NSCB) equal to \$133 per month per child. A recipient and/or spouse may request an assessment to determine eligibility to receive CBA, [Policy 10.1.2. - \(Child Benefit Adjustment\)](#).

To receive a CBA payment the Recipient and spouse will:

1. request an assessment for CBA eligibility;
2. have a status of "IA eligible" and receive a basic Income Assistance payment for the same month(s) they are requesting CBA;
3. ensure their income tax returns are filed up to date with Canada Revenue Agency (CRA) for a recipient and spouse;
4. provide CRA with their current address;
5. notify CRA when there has been a change in marital status in excess of ninety (90) days and they have completed a CRA 'Marital Status Change' form RC65;
6. apply for the Canada Child Tax Benefit (CCTB) for all dependent children. A recipient or spouse must make application for the Canada Child Tax Benefit. In addition to filing an up to date Income Tax Return, families must apply for children's benefits. CRA 'Canada Child Tax Benefit Application' form RC66 must be submitted to CRA for application for children's benefit;
7. be recognized as the primary care giver with CRA to receive consideration for the children's benefits;
8. provide completed and correct information to CRA to advise changes in family circumstances (e.g. marriage, separation, new partner or address);
9. advise the worker if a recipient or their spouse and dependent are immigrants and provide information of action taken to secure permanent Canadian Residency;
10. advise the worker of any changes in their Social Insurance Number (SIN) or their spouse's SIN, including status of a temporary SIN number; and
11. comply with CRA's request for information (e.g. completing a questionnaire).

If a recipient or spouse has requested a CBA assessment and meet the above criteria, CBA may be issued according to the following guidelines:

1. CBA will be calculated separately for each child, based on the number of children as recorded by CRA, unless the number of children declared for Income Assistance purposes is lower. In situations where a family is receiving partial payments but receives more than \$133 per month for one (1) child and less than \$133 per month for each subsequent child, the excess for the first child will not be used to reduce the adjustment for the other children.
2. payments will be prorated from the date of the child's birth or the date the child returned home to determine the amount of CBA. CBA will be issued for a maximum period of three (3) months.
3. clients may be eligible to receive a CBA payment when a family's income for the prior tax year disqualifies the family for the NCBS and the NSCB.
4. a recipient or spouse who has a change in marital status (separation) and the family is receiving the NSCB totaling less than \$133 per month per child may receive a CBA payment. This payment may be issued for a maximum period of nine (9) months from the date of the initial CBA payment.
5. a family who is not receiving the equivalent of \$133 per month, per child, due to the birth of a child(ren) or a child(ren) returning to the family from an agency/foster parent or from another family situation may receive CBA.

5.3.6 Policy: Child Benefit Adjustment (CBA) Repayment

When a recipient and spouse, as a result of a Canada Revenue Agency (CRA) assessment is issued a retroactive payment for National Child Benefit Supplement (NCBS)/Nova Scotia Child Benefit (NSCB) for the same period a Child Benefit Adjustment (CBA) is issued from Income Assistance, an overpayment will be assessed and there will be a requirement for repayment.

When a recipient and spouse receive Income Assistance and are later found ineligible to receive Income Assistance and are assessed with an overpayment, the amount of CBA issued will also be included as an overpayment.

5.3.7 Policy: Dependent Children Included/Not Included in the Budget

A personal allowance for dependent children in the care and custody of an applicant, under the age of 18, is not included in the budget calculation.

Unearned income being received by or on behalf of the dependent(s) will be charged as income in the budget.

Income from part-time employment received directly by a dependent child who is attending an approved educational program will not be considered in determining the family's entitlement.

If a dependent child is working full time, the child will then cease to be a dependent child and will be removed from their parent/guardian's Income Assistance budget on the last day of the month that the child ceases to be a dependent child. A review of the situation will determine if board income should be included in the budget.

Where a dependent child is attending, on a regular basis, an approved educational program, which is not designed for student loan purposes, Income Assistance may be provided after the dependent child becomes 19 years of age. Under these circumstances the child may continue to be included in an applicant/recipient's budget up to 21 years of age.

5.3.8 Policy: Maternal Nutritional Allowance

Recipients will receive a nutritional allowance of \$29 per month included in a recipient's monthly entitlement from the date a caseworker is notified of the pregnancy or birth of a child up to and including twelve (12) full months after the birth of the child.

In situations where a caseworker is notified of a subsequent pregnancy or birth, the nutritional allowance will continue up to and including twelve (12) full months after the birth of the subsequent child(ren). The maximum amount payable to a recipient is \$29 per month.

Program Policy:	Employment Support and Income Assistance	
Chapter: 5	Basic Needs	
Section: 4	Shelter Allowances	
Effective: August 1, 2001	ESIA Regulations: 2 Definitions 31(1)(2) Shelter Allowances 32 Personal and shelter allowances 35 Combined expenses 36 (1)(2) Mortgage payments 38 Property tax 39 Rent 40 Heating costs 41 Electricity costs 42 Water costs 45 Shelter allowance under certain circumstances 46 Supervisor can modify calculation of budget deficit	Page 1 of 4
Revised: January 1, 2011		

5.4.1 Policy: Shelter Allowances

For the purpose of calculating shelter allowance, the expenses of an applicant/recipient will include the expenses of a spouse, dependent child and/or student family member up to the maximum allowed under [Policy 5.5.1 - \(Schedule: Personal Allowances and Maximum Shelter Allowance\)](#).

5.4.1 (a) Policy: Shelter Allowance Under Certain Circumstance

Under the following criteria, a shelter allowance for rent/own of up to \$535 will be allowed for a single person who:

1. is disabled;
2. is fleeing an abusive situation until the issues related to the abuse have been addressed. These include, but are not limited to, court processes, and/or counseling related to the abuse;
3. has a chronic mental, cognitive or physical condition that limits participation in employment services;
4. is 55 years of age or over; or

5. is a youth aged 16 – 18.

5.4.2 Policy: Special Shelter Requirements

With the approval of a supervisor, the shelter allowance may be increased in excess of the maximum allowable rates established in [Policy 5.5.1 - \(Schedule: Personal Allowances and Maximum Shelter Allowance\)](#), if an applicant/recipient or spouse or dependent of an applicant/recipient has special needs with respect to barrier-free access to, from, or within their accommodations as a result of a terminal illness or permanent physical disability. A supervisor can approve the most economical option that provides barrier-free access.

Barrier-free access refers to housing that has been modified/adapted for individuals with mobility disabilities and visual impairments. Such modifications include, but are not limited to, ramps instead of stairs, handrails/grab bars, doors wide enough for wheelchairs, lowered counter tops, lever type handles for doors and water taps, lowered electrical switches and sockets, rounded corners to prevent injury, and no curbs on the property.

5.4.3 Policy: Single Expectant Mother's Shelter Allowance

A single expectant mother, over the age of 19, in her seventh (7th) month of pregnancy may qualify for a shelter allowance up to the maximum allowable for two (2) persons to assist in acquiring shelter accommodations for two (2) people. A single expectant mother, over the age of 19, in her seventh (7th) month of pregnancy with one (1) dependent may qualify for a shelter allowance up to the maximum allowable for three (3) persons to assist in acquiring shelter accommodations for three (3) people.

5.4.4 Policy: Couple Expecting First Child

A couple expecting their first child, and the mother being in her seventh (7th) month of pregnancy, may qualify for a shelter allowance up to the maximum allowable for three (3) persons to assist in acquiring shelter accommodations for three (3) people.

5.4.5 Policy: Renting or Boarding

Living arrangements will be considered renting when an applicant/recipient meets all of the following criteria; otherwise the applicant/recipient shall be considered to be boarding.

Rental accommodation must meet all of the following:

1. applicant/recipient purchases own food;
2. applicant/recipient prepares own food; and
3. applicant/recipient responsible for maintenance of own premises.

An applicant/recipient residing in a private residence, who has self contained premises which includes housekeeping facilities, such as a stove, refrigerator, kitchen sink, as well as bathroom and living arrangements will be considered renting.

5.4.6 Policy: Renters and Home Owners

An applicant/recipient who owns his/her home or is renting will be allowed actual expenses for rent, mortgage payments, home improvement loan payments, heating costs, electricity, property tax, water supply or service up to the maximum shelter rates noted in [Policy 5.5.1 - \(Schedule: Personal Allowances and Maximum Shelter Allowance\)](#) in the calculation of the budget deficit.

An applicant/recipient who shares accommodations with an individual(s) who is not included as a family member(s) for the purpose of budget calculations will be allowed the appropriate percentage (%) in the calculation of the budget deficit up to the maximum shelter rates noted in [Policy 5.5.1 - \(Schedule: Personal Allowances and Maximum Shelter Allowance\)](#). An applicant/recipient must be listed as one of the renters/lease holders/owners on the lease/rental agreement or mortgage document to have approved expenditures included in the budget calculation. These include heating costs, electricity, property tax, and water supply/service.

If a mortgage is paid by an outside source, such as an insurance company or other source, the mortgage payment will not be included in the calculations of the allowable shelter allowance.

Where a recipient has fluctuations in shelter costs because of fuel or electricity, they will be encouraged to use budget billing with a fuel and/or electricity service provider.

Where a recipient has shelter costs in excess of the maximum allowable shelter because of rent/mortgage, fuel, wood or electricity, they will be encouraged to relocate in order to be within the maximum shelter allowances.

5.4.7 Policy: Pro-rated Mortgage Expense

Where only a portion of a mortgage or re-mortgage of a property has been used for the purpose of purchasing, repairing or renovating the residence of an applicant or recipient, the mortgage payments will be prorated and only that portion which relates to the purchase, repairing or renovating will be included in the calculation of a budget deficit, [Policy 5.5.1 - \(Schedule: Personal Allowances and Maximum Shelter Allowance\)](#).

5.4.8 Policy: Shelter Allowance - Economic and Domestic Unit

For the purposes of calculating the shelter allowance, the amount payable to an applicant/recipient who is living with another individual, other than a spouse, in a relationship of interdependence functioning as an economic and domestic unit shall not exceed the lesser of:

1. 50% of the actual total of any combination of allowable shelter expenses;
and
2. 50% of the amount prescribed in Appendix "A" in *Employment Support and Income Assistance (ESIA) Regulations* and [Policy 5.5.1 - \(Schedule: Personal Allowances and Maximum Shelter Allowance\)](#) for the size of an applicant/recipient's family.

Program Policy:	Employment Support and Income Assistance	
Chapter: 5	Basic Needs	
Section: 5	Rates of Income Assistance Schedule	
Effective: August 1, 2001	ESIA Regulations: 31(1) (2) Personal and shelter allowances 45 Shelter under certain circumstances	Page 1 of 2
Revised: July 1, 2011		

5.5.1 Policy: Schedule: Personal Allowances and Maximum Shelter Allowance

Personal Allowance			
Shelter Situation	Adult	Dependent Child (Up to age 18)	Dependent Child (Age 18 to 20 inclusive)
renting, own home, boarding	\$229	\$133*	\$229
in hospital 30 days or more	\$105	Not applicable	\$105
in a residential rehabilitation program	\$81	Not applicable	\$81

* Child Benefit Adjustment - Per [Policy 5.3.5 - \(Child Benefit Adjustment\)](#)

Shelter Allowance		
Family Size	Rent/Own Home	Board
1	\$300	\$223
2	\$570	\$242
3+	\$620	\$282

Under Certain Circumstances – Per Policy 5.4.1(a) - (Shelter Allowance Under Certain Circumstances)	
Family Size	Rent/Own Home
1	\$535

Program Policy:	Employment Support and Income Assistance	
Chapter: 5	Basic Needs	
Section: 6	Documentation and Verification	
Effective: August 1, 2001	ESIA Regulations: 5(1) Additional information required 47 Chargeable income 48 Percentage of net wages 49 Training allowance 50 Net profit from business 51 Income tax refunds 52 Not chargeable income 53 Wages of dependent child	Page 1 of 5
Revised: December 31, 2010		

5.6.1 Policy: Documentation

Information is required to support the Income Assistance application as follows:
(photocopies of documentation will be maintained on file)

1. General Requirements/Vital Statistics

- a. A valid Nova Scotia Health Card is mandatory for all applicants/ recipients, spouse and dependant(s).
- b. A valid Social Insurance Number (SIN) is mandatory for all applicants/ recipients and spouse. SINs for dependent children are to be provided, if available, but is not mandatory.
- c. Other documentation such as birth certificates, driver's license, marriage license, divorce order, adoption papers, school documents, verification or a copy of income tax Canada Revenue Agency 'Notice of Assessment (NOA)' form(s) are required depending on the individual circumstances of an applicant/recipient and family composition.

2. Accommodation Documentation

Home Owner:

Verification of homeowner costs including the latest property tax bill or assessment and utility costs with supporting documentation is required. If an outstanding mortgage or loan exists, the mortgage payments must be supported by a copy of the mortgage/loan agreement and/or cancelled cheques/receipt of payment.

Renter:

- a. the most recent rental receipt showing the monthly rental cost and the name, address and telephone number of the landlord must be provided;
- b. documentation for utility costs not included in rent; and
- c. a lease showing an applicant and/or recipient's name in the case of subletting, the landlord must provide acknowledgment of the sublet in writing.

Roomer/Boarder:

The most recent receipt showing the monthly cost of room/board and the name, address and telephone number of the landlord must be provided.

3. Potential/Pending Income Verification

Determine if an applicant/recipient has applied for or may be eligible for income as a result of present or past sources of income. Typically, this will include, but is not limited to, Employment Insurance benefits, Canada Pension Plan, Workers' Compensation Board, private pension, private disability benefits. In the absence of an online inquiry, the source of potential income must be contacted by a caseworker, or cheque stubs provided.

4. Wages Verification

The most recent cheque stub, pay envelope or a written confirmation of employment earnings and mandatory deductions completed by the employer must be provided.

5. Self-Employment Verification

A copy of the current financial statement for the business and a copy of the most recent income tax return for the business must be provided. A copy of both an applicant/recipient and spouse's income tax assessment forms must be provided.

6. Employment Insurance Verification

In the absence of confirmation through an on-line inquiry, the most recent cheque stub or confirmation of Employment Insurance from Service Canada must be provided.

7. Workers' Compensation Income Verification

The most recent cheque stub or confirmation of Workers' Compensation Income from the Workers' Compensation Board must be provided.

8. Old Age Security/Guaranteed Income Supplement

Senior citizens usually receive the Old Age Security (OAS)/Guaranteed Income Supplement (GIS) or an income equivalent to or greater than OAS/GIS. This should be verified by a copy of the most recent cheque stub or confirmation of OAS/GIS income from Human Resources and Social Development Canada - Income Security Programs. The reason for any reduction in GIS is to be established and recorded.

9. Income Tax Assessment Form

Verification or a copy from the Canada Revenue Agency of the most recent income tax assessment form is required at initial eligibility for an applicant and spouse and yearly for a recipient and spouse.

10. Canada Pension Plan or Quebec Pension Plan

The most recent cheque stub or confirmation from the Canada/Quebec Pension Plan must be provided. Applicants between 60-64 years of age will be required to apply for Canada Pension Plan, regardless of whether they will receive a lesser amount than if they waited to receive CPP at age 65.

11. Veteran's Allowance

The most recent cheque stub or confirmation from Department of Veterans Affairs must be provided.

12. Private Pension or Disability Plan

The most recent cheque stub or confirmation from the company that is administering the pension or disability plan must be provided.

13. Income from Boarders

A copy of the most recent receipt given to a boarder(s) or written confirmation from the boarder stating the amount paid must be provided.

14. Rental Income

A copy of the most recent receipt given to the tenant must be provided.

15. Maintenance Support Payments

A copy of the separation agreement, receipt or confirmation from the court must be provided.

16. Social Security/USA

Cheque stubs or confirmation from the USA Social Security Bureau must be provided.

17. Recent Lump Sum Payment/Deferred Income

Cheque stubs or confirmation from applicable sources must be provided.

A caseworker may provide Income Assistance pending submission of required documentation in accordance with [Policy 5.1.8 - \(Emergencies/Incomplete Documentation\)](#).

Program Policy:	Employment Support and Income Assistance	
Chapter: 5	Basic Needs	
Section: 7	Chargeable Income and Assets	
Effective: August 1, 2001	ESIA Regulations: 4 Application for assistance 5(1) (2), 7 (1) Additional information required 7 (2), 15 (4) Changes in circumstances 9 Providing documentation 14 (1) (3) Eligibility for assistance 29 (1) Expenses to be considered in determining eligibility.	Page 1 of 10
Revised: January 14, 2011		

5.7.1 Policy: Chargeable Income - Initial Eligibility

For the purpose of determining initial eligibility, all sources of income received by an applicant, spouse and/or income paid to or on behalf of a dependent child(ren) of an applicant and/or spouse within thirty (30) days of application will be applied as chargeable income unless otherwise exempt. Where income has been used for expenses related to shelter, food, and other items of personal necessity, a caseworker may determine the income is exempt.

5.7.2 Policy: Chargeable Income - Ongoing Eligibility

For the purpose of determining ongoing eligibility, all sources of income received by a recipient, the spouse of a recipient, and income paid to or on behalf of a dependent child(ren) of a recipient and/or a recipient's spouse will be applied as chargeable income unless otherwise exempt. See [Policy 5.9.1 - \(Exempt Income\)](#), [Policy 5.8 - \(Incentive Chapter\)](#) or [Policy 5.7.10 - \(Assets - Liquid, Real and Personal\)](#) and [Policy 5.7.11 - \(Allowable Asset - Liquid, Real, Personal\)](#).

All income other than wages is calculated at the gross amount in most situations. Caseworkers will advise those recipients and/or spouses of recipients who have income tax deductions being made from their income source to complete a Revenue Canada 'TD1' form. Completion of this form can ensure that the income tax will not be deducted or deducted at the minimal rate based on household size and estimated yearly income. Deductions made for debts owed/garnishee orders are not exempt and will be included as income received.

5.7.3 Policy: Wills/Estate/Trust Monies

Income from an estate or trust will be charged at 100% against entitlement.

The amount received by an applicant/recipient and/or spouse, including any interest in the estate by dependent child(ren), will be considered an asset.

Where the applicant/recipient and/or any family member has access to monies set aside in trust, these monies are included in the determination of eligibility or level of benefits.

If trust money is defined for discretionary purposes only, a caseworker must contact the trust administrator to establish contributions from the trust account to be included in the budget and determination of eligibility.

5.7.4 Policy: No Access to a Principle Amount from Trusts or an Investment

Monthly income received from trusts or investments where there is no access to the principal amount will be charged at 100% as unearned income.

5.7.5 Policy: Property

Real property, other than the principal residence, will be considered an asset.

5.7.6 Policy: Joint Ownership

Where cash, stocks, bonds, etc., are held in joint names, the applicant/recipient and spouse's portion is considered an asset.

5.7.7 Policy: Lump Sum Payment

Where an applicant/recipient and/or spouse or dependent receives a lump sum payment, a caseworker will confirm the source of the payment to determine whether the lump sum payment is to be treated as deferred income, unearned income or an asset.

5.7.8 Policy: Deferred Income

Deferred income from an income source, which is based on accrued monthly entitlement, may require that an overpayment be established and/or may affect the eligibility of an applicant/recipient.

5.7.9 Policy: Unearned Income

For the purposes of determining initial and ongoing eligibility, all sources of unearned income received by the applicant/recipient and/or spouse or on behalf of a dependent child(ren) of an applicant/recipient or spouse will be applied as chargeable income unless otherwise exempt.

Unearned income includes, but is not limited to, the following:

1. income maintenance payments (such, as but not limited to, Canada Pension Plan, Employment Insurance),
2. Long-Term Disability benefits,
3. Workers' Compensation,
4. regular periodic insurance payments,
5. income from mortgages,
6. any maintenance payments,
7. superannuation, and
8. income from investments such as stocks and bonds.

5.7.10 Policy: Asset - Liquid, Real and Personal

All assets of the applicant/recipient, spouse, and/or dependent children will be considered in determining initial and ongoing eligibility, unless specifically exempted by regulation ([Policy 5.7.13 – \(Asset Exclusions\)](#)).

There are three (3) types of assets:

1. **liquid** - such as, but not limited to, cash on hand, bank accounts, stocks, bonds or other securities, monetary lottery winnings, monetary inheritances, liquidation of business assets, damage awards and family contributions;

2. **personal** - such as, but not limited to, a second motor vehicle, recreational vehicles, and
3. **real property** - other than the primary residence, such as but not limited to a cottage or building lot.

5.7.11 Policy: Allowable Asset Level - Liquid, Real and Personal

All assets will be considered in determining eligibility unless specifically exempted by Regulation. The following allowable asset levels:

ESIA Regulations 55 (1):

Family size of one (1)	\$1,000
Family size of two (2)	\$2,000

A person who was in receipt of Family Benefits on July 31, 2001, is entitled to retain assets in the amount prescribed under the *Family Benefits Act* and *Family Benefits Schedule "B" Regulations* provided they had continuous service from the ESIA program.

FB Regulations 45(3):

Single Disabled	\$3,000
Married Disabled	\$5,500

FB Regulations 46(1)

Single Parent	\$2,500
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Refer to [Policy 5.7.16 – \(Reasonable Disposal of Assets\)](#), for applicants/recipients with assets in excess of the allowable asset levels.

5.7.12 Policy: Assets - No Access to a Principal Amount

Where it is determined an applicant/recipient, spouse and/or dependent has no access to a principal amount, but receives monthly income from the asset, this income will be charged at 100% as unearned income. Where it is determined an applicant/recipient, spouse and/or dependent has access to the principal, then the principal will be treated as an asset.

5.7.13 Policy: Assets Exclusions

The following items are not considered assets:

1. a primary residence of an applicant or a recipient that is assessed at less than twice the average assessed value of single family dwellings in the municipality in which the residence is located;
2. a cash surrender value of under \$500 of a life insurance policy;
3. a motor vehicle used for basic transportation including transportation to job-search requirements, training or health and safety requirements;
4. tools or equipment directly related to a trade or profession;
5. a registered education savings plan established for the education of a child and intended for use by that child in relation to education expenses;
6. any portion of a registered retirement savings plan that is part of an employment pension program at the place of employment where the applicant or recipient is employed, temporarily laid off or on sick leave;
7. a prepaid funeral to the value of \$5,000;
8. insurance paid for damages to primary residence and the contents contained within (examples include but are not limited to fire/flood insurance), and for damage to motor vehicle used for basic transportation;
9. a Registered Disability Savings Plan (RDSP) and any income withdrawn from the RDSP shall not be considered chargeable income or an asset; and
10. savings from participation in a savings program that is designed to promote self-sufficiency and is approved by the Minister (e.g. Individual Development Accounts [Policy 4.1.1.7.h - \(Definitions\)](#)).

5.7.14 Policy: Assets Not Readily Converted

Assets, including property that is not the principal residence, second motor vehicles, and/or recreation vehicles, will be considered when determining eligibility. Applicants/recipients must be provided a reasonable time period to convert such assets and may be entitled to Income Assistance conditional upon actively pursuing sale of the asset.

5.7.15 Policy: Treatment of Damage Awards/Insurance Settlements

Where an applicant/recipient and/or spouse and/or dependent has been awarded compensation, other than compensation payments exempted by *Regulations*, the

amount shall be considered either deferred income with respect to any period for which Income Assistance was provided, or unearned income and therefore 100% chargeable income.

Where an applicant/recipient and/or spouse or dependent will or may be awarded compensation at a future date, the amount of assistance granted from the date of application for assistance to the receipt of the award must be reimbursed to the Department of Community Services. Clients must agree to this and sign the appropriate repayment document prior to income assistance being granted.

5.7.16 Policy: Reasonable Disposal of Assets

An applicant/recipient, spouse and/or dependent child who has access to assets (family inheritance, cash on hand, etc.) or has disposed of assets within one (1) year prior to the date of application will provide documentation of expenditures to determine potential eligibility for Income Assistance.

Reasonable disposal of assets includes:

1. personal and family shelter including the purchase of a home or the payment of a mortgage or debts and purchases related to the home;
2. basic needs (includes food, clothing, fuel, utilities, and personal requirements);
3. necessary repairs of the home occupied; and/or
4. replacement of necessary household items

as approved by a casework supervisor.

If it is determined that assets were not disposed of in a reasonable manner, the applicant/recipient may be determined to be:

1. ineligible (up to a maximum of twelve (12) months before the individual can reapply, as per Regulation 55(2)); and/or
2. eligible with an overpayment.

The maximum allowable asset levels are outlined in [Policy 5.7.11 - \(Allowable Asset Level - Liquid, Real and Personal\)](#) and exempt assets are listed in [Policy 5.7.13 - \(Assets Exclusions\)](#).

5.7.17 Policy: Wages/Salaries

At initial eligibility, net wages/salaries will be charged at 100% as earned income. Once eligibility is established, wages will be subject to [Policy 5.8 - \(Incentives\)](#).

Net wages/salaries means gross income less Mandatory Employment Related Costs (MERCs) and mandatory contributions at the minimum rate including, but not limited to, the following:

1. income tax payable;
2. Employment Insurance contributions;
3. Canada Pension Plan contributions;
4. mandatory company pension plan contributions;
5. union dues;
6. mandatory group health and life contributions; and
7. long-term disability contributions.

5.7.18 Policy: Benefits in Lieu of Wages

Benefits received in lieu of wages will be charged against the entitlement. This would include, for example, an applicant/recipient and/or spouse receiving reduced rent for janitorial or supervisory maintenance in an apartment building.

Where the actual rent is \$500 per month and the rent is reduced to \$150, the chargeable income for purpose of calculation of eligibility is \$350. The amount included in the calculation of the shelter allowance is \$500 plus other allowable shelter expenses such as fuel and electricity, up to the allowable maximums.

For an applicant and/or spouse the \$350 will be charged at 100% and for recipients and/or spouses of recipients, the \$350 will be subject to the wage incentive [Policy 5.8.1 - \(Wages from Employment\)](#). An applicant/recipient and/or spouse may be required to engage in employability enhancement activities or employment.

5.7.19 Policy: Wages of Persons 16 to 20 (Inclusive)

At initial eligibility, net wages of persons age 16 to 20 inclusive will be charged at 100% as earned income. Once eligibility is established, wages will be subject to [Policy 5.8.4 - \(Wages of Persons 16 - 20 \(Inclusive\)\)](#).

5.7.20 Policy: Wages from Supported Employment

At initial eligibility, net wages from supported employment will be charged at 100% as earned income. Once eligibility is established, wages will be subject to [Policy 5.8.2 - \(Wages from Supportive Employment\)](#).

5.7.21 Policy: Net Profit and Income of a Business

For the purpose of determining initial eligibility, net profits of a business are charged against entitlement. An applicant and/or spouse is required to provide a copy of the current financial statement for the business and a copy of the most recent income tax return for the business. Verification or a copy from the Canada Revenue Agency of both an applicant and spouse's income tax CRA 'Notice of Assessment (NOA)' forms must be provided.

Once eligibility has been established, a recipient and/or spouse are required to provide an income statement (revenue and expenditures) for the business on a monthly basis and submit a copy of their income tax returns on an annual basis.

For recipients and/or spouses operating a business as part of an approved employment plan, please refer to [Policy 7.4.1 - \(Self-Employment and Entrepreneur\)](#) for policy direction.

5.7.22 Policy: Boarders

Income from boarders will be charged at the greater of either 25% of the gross amount charged to the boarder(s) per month per boarder, or \$50 per month per boarder. If a boarder is the adult child of an applicant/recipient and/or spouse, the board rate may not be charged if it would cause undue hardship, subject to supervisory approval.

5.7.23 Policy: Roomers

Income from roomers will be charged at the greater of 70% of the gross amount charged to the roomer(s) per month per roomer, or \$50 per month per roomer.

5.7.24 Policy: Rental Income

Rental income will be charged at 70% of the gross amount charged to the tenant(s) per month. If the rental property is registered as a business, then rental income is to be treated as business income.

5.7.25 Policy: Gratuities/Tips

At initial eligibility, gratuities/tips will be charged at 100% against entitlement. Once eligibility is established, 70% of income earned from gratuities is charged. Where gratuities vary from month to month, an average amount will be added to net wages.

5.7.26 Policy: Commissions

At initial eligibility, commissions are to be charged at 100% against entitlement. Once eligibility is established, 70% of net income earned from commissions is charged. Where commissions vary considerably from month to month, and are often sporadic, the amount of the commission will be averaged to determine monthly eligibility.

5.7.27 Policy: Training Allowances

At initial eligibility, 100% of income received from training allowances will be charged. Once eligibility is established, training allowances will be subject to the training allowance incentive [Policy 5.8.3 - \(Training Allowances\)](#).

5.7.28 Policy: Canada Pension Plan Benefits

Canada Pension Plan (CPP) benefits received by an applicant/recipient, spouse or paid directly to or on behalf of a dependent child of an applicant/recipient will be charged at 100% against monthly entitlement.

5.7.29 Policy: Income Tax Refund

Income Tax Refunds are considered exempt income, [Policy 5.9.1- \(Exempt Income\)](#).

Program Policy:	Employment Support and Income Assistance	
Chapter:	5	Basic Needs
Section:	8	Incentives
Effective: August 1, 2001	ESIA Regulations: 2(w),(ab)(i)(E)(F),(ae) Definitions 28 Educational-related needs 44(C)Employment expenses 48(1)(2) Percentage of net wages 49 Training allowance 50(1)(2) Net profit from business 52 (a)Harvest Income	Page 1 of 3
Revised: July 1, 2011		

5.8.1 Policy: **Wages from Employment**

A recipient and/or spouse who is employed will retain the first \$150 plus 30% of the net wages earned from employment.

5.8.2 Policy: **Wages from Supported Employment**

Supported employment is paid employment (i.e. not for a stipend or training allowance) which is part of a vocational or employment plan supported by staff of the Department and/or community partners working with persons whose physical, mental or cognitive abilities may limit their ability to be financially self-sufficient.

A recipient and/or the spouse who is engaged in supported employment will retain the first \$300 plus 30% of the remaining net wages.

The recipient and/or spouse is considered an individual with a disability (e.g. mental health; cognitive impairment; physical disability) for purposes of eligibility for the supported employment wage incentive, if they meet one or more of the following conditions:

1. ability to be totally self-supporting in the long term is limited due to needs related to their disability;
2. has been a participant of a sheltered workshop or other vocational service that provides employment activity, and issues a stipend that is less than minimum wage, and has now progressed to salaried employment as a result of a vocational plan with that workshop or vocational service;
3. may utilize the services of a job coach;

4. may have a history of hospitalizations and upon release from hospital, is able to return to the same employment situation due to the supportive nature of the employer and/or the employment situation;
5. has a history of sporadic employment and the breaks in employment are directly related to their disability;
6. has extensive Pharmacare and/or housing support needs; and/or
7. has had no formal involvement with Employment Support Services (ESS) in the Department, but is involved with employment activity through a community agency.

5.8.3 Policy: Training Allowances

A recipient and/or the spouse who is participating in an employability-related training program that provides a training allowance will retain the first \$150 per month of that training allowance.

5.8.4 Policy: Wages of Persons 16 – 20 (Inclusive)

Recipients and dependents of recipients between the age of 16-18 (inclusive), who are attending an approved educational program and are employed on a part-time basis, will have 100% of the net wages exempted from their or their parent/guardian's entitlement.

Recipients and dependents of recipients between the ages of 16-18 (inclusive) who receive income from full-time employment will have the income exempted for up to three (3) calendar months per year provided that the youth attends an approved educational program following the completion of full-time employment.

Recipients and dependents of recipients, 19 and 20 years of age, attending a non-student assistance eligible program who are employed on a part-time basis, will have 100% of the net wages exempted from their or their parent's entitlement. Income from full-time employment will have the income exempted for up to three (3) calendar months per year provided that the person attends an approved educational program following the completion of full-time employment.

The identified recipients who receive this wage exemption will not receive assistance for school supplies or other educational-related special needs designated for dependent child(ren).

Program Policy:	Employment Support and Income Assistance	
Chapter: 5	Basic Needs	
Section: 9	Exempt Income	
Effective: August 1, 2001	ESIA Regulations: 52, 53 Not chargeable income 61 (1)(2)(3) Compensation Payments	Page 1 of 3
Revised: December 31, 2010		

5.9.1 Policy: Exempt Income

The income of an applicant/recipient, spouse, or income paid to or on behalf of the dependent child(ren) of an applicant/recipient and/or spouse received from the following sources will be exempt and not considered as chargeable income:

1. wages of a dependent child(ren) as long as the dependent child(ren) is attending an approved educational program not designated for student loan purposes, [Policy 5.8.4 - \(Wages from Persons 16 - 20 \(Inclusive\)\)](#);
2. the National Child Benefit (NCB);
3. the Child Tax Benefit (CTB) component of the Canada Child Tax Benefit (CCTB);
4. the Nova Scotia Child Benefit (NSCB);
5. the Universal Child Care Benefit (UCCB);
6. the federal Child Disability Benefit (CDB);
7. adoption subsidy payments;
8. payments in support of a foster child;
9. Foster Child(ren) Allowance(s) (The foster child will be included within the calculation of the allowable shelter allowance);
10. the Goods and Services Tax Credit (GST);
11. the Working Income Tax Benefit (WITB);
12. the Nova Scotia Affordable Living Tax Credit (ALTC);

13. the Nova Scotia Poverty Reduction Credit (PRC);
14. income tax refunds;
15. bursaries, scholarships and stipends received for the purpose of assisting with the costs associated with attending an approved educational program or persons to whom Section 67 of the *Regulations* apply;
16. Provincial low-income fuel assistance program and Federal Relief for Heating Expenses program;
17. payments under a victim's compensation program of a federal or provincial government payments to a victim of abuse by a church organization in compliance with a court order or under a victim's compensation program;
18. the Caregiver Benefit;
19. honorariums provided to persons serving on a board of an agency or commission; or
20. up to \$3,000 per fiscal year of the combined wages of a recipient and/or spouse as per [Policy 5.9.2 - \(Wages from Harvesting Income\)](#). (This exemption is not available to an applicant and/or spouse.)

5.9.2 Policy: Wages from Harvesting Income

A recipient and/or spouse may be able to retain up to a maximum of \$3,000 combined income per fiscal year (April 1 - March 31) by participating in the following;

1. seasonal harvesting of field-produced horticulture;
2. harvesting of Christmas trees; and/or
3. the making of Christmas wreaths.

5.9.3 Policy: Exempt Compensation Awards/Payments

The following compensation awards will not be considered chargeable income or an asset in determining initial and ongoing eligibility. Any income generated monthly from the compensation will be considered income in the month in which it is received.

1. 1986 - 1990 Hepatitis C Settlement Agreement.
2. Pre-1986/Post-1990 Hepatitis C Settlement Agreement.
3. The Federal/Provincial/Territorial Assistance Program for HIV Secondarily Infected Persons.
4. Indian Residential Schools Settlement Agreement.
5. Merchant Navy Veteran Agreements-Payments received by a Merchant Navy Veteran or a surviving spouse of a Merchant Navy Veteran for post-war benefits.
6. Compensation as a result of any abuse that occurred in an institution that was or is the responsibility of the Province of Nova Scotia and/or the Government of Canada.

<u>Program Policy:</u>	Employment Support and Income Assistance	
Chapter: 5	Basic Needs	
Section: 10	Youth	
Effective: August 1, 2001	<u>ESIA Regulations:</u> 14(2) Eligibility for assistance 23(4) Obligation to commence proceedings 66(1) Youths	Page 1 of 1
Revised: March 12, 2007		

5.10.1 Policy: Youth Aged 16 to 18 (Inclusive) Eligibility Criteria

Applicants for Income Assistance (IA) aged 16 to 18 (inclusive) are the legal responsibility of their parents/guardian and therefore are not eligible for Income Assistance, in their own right.

In the circumstances outlined below, IA may be granted if the youth is:

1. exposed to an alleged unsafe home environment or an unresolvable youth/parent conflict and is unable to return and/or remain in the parental/guardian home;
2. residing in circumstances where it has been established that parents/guardians are unwilling and/or unable to provide an appropriate home environment for the applicant;
3. enrolled and attending an approved educational program not designated for student loan purposes and/or an approved learning activity/program;
4. willing to access counseling or mediation services as required;
5. willing to access medical services, which are required to preserve their physical and mental health; and/or
6. willing to live in a setting, which provides a degree of supervision, accountability and guidance in accordance with their age and needs. Independent living may be considered in circumstances where the youth demonstrates the life skills and maturity necessary to live independently.

Where appropriate, the Minister will pursue support for the child from the parents/guardian.

Program Policy:	Employment Support and Income Assistance	
Chapter: 5	Basic Needs	
Section: 11	Immigrants and Non-Canadians	
Effective: August 1, 2001	ESIA Regulations:	Page 1 of 3
Revised: July 1, 2011		

5.11.1 Policy: Immigrants and Non-Canadians

An applicant and/or spouse who is verified as a permanent resident, a refugee claimant, or a Temporary Resident Permit (TRP) holder may be eligible for Income Assistance provided all other sources of assistance have been exhausted.

A TRP is a document that authorizes a person who is inadmissible or does not meet the requirements of the Immigration and Refugee Protection Act or Regulations either as a temporary resident or as a permanent resident to enter or remain in Canada. A TRP is not the same as a Temporary Resident Visa (student, work, or visitor permit).

An applicant or spouse who is in Canada due to a study, work, or visitor permit are most often not eligible for income assistance based on the program entry requirements established by Citizenship and Immigration Canada (CIC).

5.11.2 Policy: Applicants Determined at Intake to be a Permanent Resident

Immigrants under the Economic Class categories are admitted to Canada from selection criteria under the *Immigration and Refugee Protection Act*. Income Assistance can be provided when all other sources have been exhausted.

5.11.3 Policy: Applicants Determined at Intake to be a Family Class Immigrant

Sponsored immigrants are admitted after a relative in Canada agrees to undertake their support for periods set by the Federal Government of up to ten (10) years.

Family Relationship	Financial Sponsor Requirements
Spouse or Common Law Partner	3 year from the date on which permanent resident status is granted
Dependent child of spouse or common-law partners, who is less than 22 years of age on the date permanent resident status is granted	10 years from the date on which permanent residence status is granted OR until the age of 25, whichever comes first.
Dependent child of spouses or common-law partners who is 22 years of age or older on the date permanent residence status is granted	3 years from the date on which permanent residence status is granted
Parents, Grandparents	10 years from the date on which permanent residence status is granted

Applicant and/or spouse sponsored under the Family Class, remain the responsibility of the sponsors for that period agreed to at the time of their admission to Canada.

If the sponsoring family/individual can no longer, or refuses to support the applicant and/or spouse, then the applicant and/or spouse of an applicant may be considered for Income Assistance. The provision of Income Assistance requires supervisory approval. Where a sponsor is able but refuses to provide support, the applicant and/or spouse is required to take appropriate action to secure ongoing sponsorship.

5.11.4 Policy: Applicants Determined at Intake to be a Resettled Refugee

Immigrants in this class may be granted permanent resident status for humanitarian reasons of international obligation by the Government of Canada. They must either be a privately sponsored or sponsored by government (Government Assisted Refugee).

Government Assisted Refugees (GARs) are provided with financial assistance through the Refugee Assistance Program, administered through Immigrant Settlement and Integration Services (ISIS). Private Assisted Refugees (PARs) are provided sponsorship and integration assistance by an approved sponsoring group. Immigrants who no longer qualify for the above program may qualify for Income Assistance.

5.11.5 Policy: Applicants Determined at Intake to be a Refugee Claimant

A refugee claimant is a person who has made a formal refugee claim (request for asylum) upon entering Canada at a port of entry.

Refugee claimants are able to apply for a work permit while they are in Canada awaiting a final determination on their claim to Citizenship and Immigration Canada.

Individuals (applicants) who have passed their refugee hearing, and have been in Canada less than one (1) year, may be eligible for financial support through the Refugee Assistance program.

5.11.6 Policy: Employment Support Services and Immigrants and Refugees

Eligible immigrants and refugees should only be referred to Employment Support Services (ESS) if they have a hearing date scheduled and an open work permit.

5.11.7 Policy: Medical Expenses and Immigrants and Refugees

Medical expenses for items such as, but not limited to tests, medications, dental, essential health treatments for preventative health conditions-dentists, doctors and ophthalmologists will be provided by the Federal Government. Applicants/recipients and/or spouse will be required to contact federal authorities for further information.

Program Policy:	Employment Support and Income Assistance	
Chapter: 5	Basic Needs	
Section: 12	Aboriginal	
Effective: August 1, 2001	ESIA Regulations: 5(1) Additional information required 19(1) Medical examination	Page 1 of 1
Revised: March 12, 2007		

5.12.1 Policy: Aboriginal Peoples Eligibility Criteria

Aboriginal peoples living on reserve in Nova Scotia are the responsibility of the band and are not eligible for Income Assistance.

Aboriginal peoples living off reserve may be eligible for Income Assistance in accordance with the provisions of the *Employment Support and Income Assistance Policy*. If an Aboriginal person returns to live on a reserve, They are no longer eligible for Income Assistance.

5.12.2 Policy: Non-Aboriginal Peoples Living on a Reserve

Non-Aboriginal applicants living on reserve may be eligible to receive Income Assistance, unless they are a registered dependent or member of a First Nations Family.

5.12.3 Policy: Aboriginal Peoples - Prescriptions Drugs

As Aboriginal Persons are eligible to receive prescription drug coverage from the Federal Government, they and their dependents are not eligible for Pharmacare benefits in accordance with the *Employment Support and Income Assistance Policy*, Department of Community Services.

Program Policy:	Employment Support and Income Assistance	
Chapter: 5	Basic Needs	
Section: 13	Transients	
Effective: August 1, 2001	ESIA Regulations: 5(1) Additional information required	Page 1 of 1
Revised: March 12, 2007		

5.13.1 Policy: Transients

A person or persons with no fixed address are to be considered transient.

When Income Assistance is requested, a determination of eligibility must be conducted by a caseworker. Referrals will be made to available emergency housing/shelter and other appropriate services where they exist when the applicant does not have available shelter.

When making referrals for emergency housing/shelter, a caseworker will, if possible, ensure that family members are not separated.

A case plan will be developed by a caseworker with an applicant, spouse and dependents, and shelter staff (if applicable) to facilitate movement from this temporary shelter arrangement to permanent living arrangements.

Transient individuals and families who have received income assistance from another source for the same service period will not normally have this assistance duplicated.

Program Policy:	Employment Support and Income Assistance	
Chapter: 5	Basic Needs	
Section: 14	Issuing Income Assistance	
Effective: August 1, 2001	ESIA Regulations: 3 Money Payments of Assistance 60 Trust Money	Page 1 of 6
Revised: December 1, 2008		

5.14.1 Policy: Issuing Income Assistance

Income Assistance payments will be issued by a caseworker using the following methods:

1. Payments of Income Assistance in the form of money will be made by cheque or electronic bank transfer (direct deposit) in the name of a recipient.

If Income Assistance is provided through electronic bank transfer (direct deposit), a recipient will be responsible for payment of any applicable bank charge and/or fees associated with overdrawn accounts or completion of applicable authorization forms.

Income Assistance will normally be issued on a monthly basis, in advance of an entitlement month. However, depending on the requirements of a recipient, Income Assistance may be issued weekly and/or bi-weekly.

2. When there is a demonstrated history of financial mismanagement or inability to manage finances, joint cheques may be used for payments to landlords and/or utilities. Joint cheques are not to be used where the landlord is bankrupt or a recipient's budget is less than the required payment for rent and/or utilities.
3. Third-party payments may be used to make direct payments to trustees, vendors and/or suppliers. These include:
 - a. Cheques are used for ongoing monthly payments after it has been established that a recipient is unable to manage his/her funds or there is a trustee.
 - b. Requisitions/Purchase Orders are used in situations such as, but not limited to, an emergency cheque cannot be issued, the issuance of special needs, and direct payment of rent/utilities, property taxes. Payments are made on the basis of a pre-authorized

requisition/purchase order by a caseworker and approved by a Supervisor when necessary.

- c. Invoices are used when a caseworker authorizes a vendor to provide goods/services to a recipient. A bill is submitted and a caseworker authorizes payment through the invoice/purchase order system. Funds can be provided directly to recipients when they receive the bill.
- d. Multiple Billing - Payment may be made for several recipients on one billing for services rendered by a vendor following authorization by a recipient's caseworker.

5.14.2 Policy: Administration of Recipient's Funds by a Caseworker

When a recipient is incapable or unwilling to manage their finances and is unable or unwilling to identify a trustee, the management and disbursement of a recipient's Income Assistance entitlement may be managed by a caseworker. This may be issued through the use of third party, joint cheques and/or purchase orders. This will only be authorized in exceptional situations and must be approved by a supervisor.

5.14.3 Policy: Non-Receipt of Income Assistance Payment via Cheque

When a recipient reports they did not receive their Income Assistance cheque, or the cheque has been lost or stolen, Income Assistance may be provided in an emergency situation to provide food or shelter.

5.14.4 Policy: Non-Receipt of Income Assistance Payment via Direct Deposit - Funds Returned to Department

When a recipient reports that they have not received their monthly entitlement via direct deposit, Income Assistance may be provided in the form of a cheque to replace the funds once it has been verified the funds were returned to the Department.

5.14.5 Policy: Non-Receipt of Income Assistance Payment via Direct Deposit - Funds Deposited into the Recipient's Bank Account

When a recipient reports that they have not received their monthly entitlement via direct deposit, and it has been determined that the funds were deposited and received in a recipient's bank account, the Income Assistance funds will not be

replaced.

5.14.6 Policy: Lost or Stolen Cash

When a recipient reports that the cash received from his/her cashed Income Assistance cheque or direct deposit has been lost or stolen, the cash amount lost or stolen will not be replaced.

5.14.7 Policy: Direct Payment of Rent to Provincial Housing Authorities

A recipient of Income Assistance (“the recipient”) living in housing provided by a provincial Housing (“the Authority”) and receives the full rent amount may request direct payment of rent. Those who demonstrate a pattern of nonpayment of rent will have their monthly rent payment paid directly by Income Assistance to the Housing Authority.

1. Request by Recipient

A recipient may at any time request that their monthly rental amount be paid directly to the Authority, and such a request will be documented using ‘ESIA-310, Direct Payment of Rent Agreement’.

2. Recipient in Arrears of Rent

When a recipient defaults full or partial payment of their monthly rent to an Authority and the default constitutes two (2) full months of rent (either cumulative or consecutive), the Authority will send a letter, Form 01 – ‘Advice to Tenant - Rental Arrears’, to the recipient with a copy to the Income Assistance (IA) caseworker.

A caseworker will inform the recipient and discuss the following options:

- a. immediate full payment of arrears by recipient;
- b. completion of Form ‘ESIA-310 Direct Payment of Rent Agreement’; or
- c. application by the Authority to the Director of Residential Tenancies for an order of payment of money owed under the lease, termination of tenancy and vacant possession.

Rental arrears or other debts or charges which a recipient owes to the Authority, beyond the above specifically identified amounts, will remain the obligation of the recipient and Income Assistance will not pay any such rent arrears or related charges.

The Authority may pursue collection from the recipient in accordance with the Authority's normal practices.

3. Recipient Pays Arrears

If the recipient pays the full arrears, the Authority will advise a caseworker that the matter has been resolved and that no further action is required.

4. Recipient has Existing Agreement with Housing Authority

If a recipient has an existing agreement to pay arrears with the Housing Authority, a recipient will not be required to enter into a direct pay agreement. If the recipient does default in full or partial payment of their monthly rent for two (2) full months to the Authority a recipient will be requested to enter into the direct rent agreement.

5. Recipient Agrees to Direct Payment

If the Income Assistance recipient agrees to direct pay, a caseworker will explain the conditions of direct payment to the recipient as follows:

- a. direct payment of the rent portion of Income Assistance to the Authority for twenty-four (24) months;
- b. repayment of arrears in accordance with a schedule negotiated with the Authority;
- c. agreement that if after twenty-four (24) months the recipient goes into arrears again the recipient will be placed in direct payment again and will remain on direct pay while in receipt of Income Assistance.

A caseworker will prepare form 'ESIA-310- Direct Payment of Rent Agreement' in triplicate for the recipient and the caseworker to sign. The form will then be sent to the Authority for signature with two (2) copies returned to the caseworker to be retained in the file and one (1) given to the recipient.

Income Assistance will only remit to the Authority the approved eligible Income Assistance rent amount at the beginning of each month while direct payment is being made.

6. Recipient Refuses Direct Payment

Where the recipient refuses to agree to the direct payment of rent, the Authority will review the matter and, if the Authority concludes that the tenant is in arrears of rent, the Authority will advise the recipient and the caseworker that it will immediately file a complaint in accordance with the *Residential Tenancies Act*.

Income Assistance will hold all eligible monthly rental payments until advised that the complaint and any appeals have been completed.

Income Assistance will disburse the monthly rental payments which have been held in accordance with the final disposition of the dispute.

If the final conclusion of all hearings and appeals of the dispute recommends payment of the monthly payments which have been held to the Authority, the monies will be forwarded to the Authority.

If the recipient moves out of the Authority property and into a rental unit with a private landlord before the dispute with the Authority has been resolved, Income Assistance will retain the eligible rental payments related to the disputed tenancy until the dispute is concluded. Income Assistance will provide the recipient with the eligible rent amount to which they are entitled, commencing the first (1st) month at their new location.

7. Ending Direct Rent

Direct payment will stop when:

- a. the recipient is no longer receiving Income Assistance;
- b. the recipient's Income Assistance shelter entitlement is less than the monthly rent; or
- c. recipient no longer resides in a property operated by the Authority.

If direct payment has been in place for twenty-four (24) consecutive months and all arrears, including any damages or other charges owed to the Authority have been paid, the recipient may make a written request to the Authority to stop direct payment. The Authority will notify the caseworker that direct payment may be discontinued effective the beginning of the month following the date of the notification.

8. Reinstatement of Direct Payment

If a recipient who has completed a period of direct payment of rent fails to make a subsequent rental payment within thirty (30) days from the date the rent was due, the Authority will request the caseworker to reinstate direct payment the month following the date of the request.

In such cases, direct payment will continue while the recipient is eligible for the full rent portion of Income Assistance and is living in housing provided by the Authority.

To arrange direct payment to an Authority the caseworker will:

- a. receive a request for direct payment from the recipient, or written request from the Authority indicating that the recipient has missed two (2) full months of rent payments;
- b. discuss the options with the recipient and document the discussion;
- c. where appropriate, complete a 'Direct Payment of Rent Agreement' form to be signed by the recipient and forwarded to the Housing Authority for signature; and
- d. where direct payment of rent is commenced, pay the Recipient's rent by issuing a supplier payment to the Housing Authority.

If a caseworker is advised that there is a dispute regarding arrears of rent between a recipient and the Authority, the caseworker will:

- a. document the dispute and hold the eligible rental payments for the recipient until advised of the outcome; and
- b. disburse the held funds in accordance with the determination by the Director of Residential Tenancies, or the Courts.

Program Policy:	Employment Support and Income Assistance	
Chapter: 5	Basic Needs	
Section: 15	Trusteeship	
Effective: August 1, 2001	ESIA Regulations:	Page 1 of 2
Revised: March 12, 2007	ESIA Act: Section 10	

5.15.1 Policy: Appointment of Trustee

With the exception of Departmental staff and a recipient's landlord (or an immediate member of the landlord's family), any person or agency approved by a supervisor may be appointed trustee for an Income Assistance recipient.

A trustee is only appointed where a recipient is incapacitated or otherwise incapable of managing financial affairs or funds have been, or are likely to be, mismanaged.

Agreement to act as a trustee on behalf of the recipient is voluntary. Trustees must sign a trustee declaration before becoming a trustee. A trustee relationship should be considered an interim rather than permanent solution.

A trustee is not responsible to honour debts:

1. incurred by the purchase of items not provided for in the payment;
2. that exceed the Income Assistance maximum allowances or payment;
3. not approved by the trustee unless the trustee has given an undertaking, actual or implied, to the creditor that they would be responsible for the debt.

The caseworker will advise the trustee, in writing, of their responsibilities which include:

1. the prudent administration of the recipient's Income Assistance benefits. They must act on the recipient's behalf without deriving any financial benefit. The trustee must ensure that Income Assistance benefits are made available on a reasonable basis and used solely for the welfare of the recipient. A separate bank account must be established.
2. the provision of information, as requested by a caseworker, regarding the administration of the trust money;

3. advising the caseworker of any change in recipient's circumstance which they are aware of and which might affect the Income Assistance entitlement; and
4. keeping accurate records accounting for monies held "in trust". Acceptance of a trusteeship implies responsibility for financial management of the Income Assistance payment(s) only.

A recipient and spouse must have an Annual Review completed as per [Policy 5.1.11 - \(Conducting the Annual Review\)](#).

Program Policy:	Employment Support and Income Assistance	
Chapter: 5	Basic Needs	
Section: 16	Transferring Cases	
Effective: August 1, 2001	ESIA Regulations:	Page 1 of 1
Revised: March 12, 2007		

5.16.1 Policy: Recipient Moves - Transfer of ESIA Case Files - Region to Region

Recipients who move from region to region are required to advise their caseworker of their plan to move.

The following definitions apply when transferring ESIA cases between regions:

1. **sending office/originating office/caseworker:** The office (caseworker) that assisted the recipient prior to the move; and
2. **receiving office/caseworker:** The office (caseworker) to which the recipient is applying after his/her move.

Program Policy:	Employment Support and Income Assistance	
Chapter: 5	Basic Needs	
Section: 17	Ineligibility	
Effective: August 1, 2001	ESIA Regulations: 10,11,12,13 Not eligible for assistance 14(1)(2)(3) Eligibility for assistance 15(1)(a)(b)(2)(3)(4) Caseworker can change amount of assistance 16(1)(2)(3)(4)(5) Dependent child 17(2) Employability assessment 18(1) Employment plan 19(1) (2) Medical examination 20(1)(2) Refusal to accept employment 21(1) Quitting a job 23(1)(2) Obligation to commence proceedings 46 Supervisor can modify calculation of budget deficit 58, 59 Trust money ESIA Act: 3(b) Deferred income	Page 1 of 6
Revised: May 1, 2012		

5.17.1 Policy: No Budget Deficit

An applicant/recipient is not eligible to receive or continue to receive Income Assistance when the applicant/recipient does not have a budget deficit.

5.17.2 Policy: Supervisor Can Modify Calculation of Budget Deficit

A supervisor may approve Income Assistance in situations where a budget deficit does not exist provided all other available resources have been exhausted. The decision to modify the calculation of a budget deficit will be reviewed monthly or at such intervals as is considered appropriate in the circumstances. Under the following circumstances, a supervisor may determine it is necessary to modify the calculation of the budget deficit:

1. to protect the health and safety of an applicant/recipient, spouse or dependent child; and/or
2. to preserve the dwelling of the applicant/recipient.

5.17.3 Policy: Separation for Convenience

An applicant/recipient is not eligible to receive or continue to receive Income Assistance when the couple separate to qualify for Income Assistance.

5.17.4 Policy: Refusal of Participation in Employability Activity

An applicant/recipient and spouse are not eligible to receive or continue to receive Income Assistance when an applicant/recipient and/or spouse refuse to:

1. participate in the employability screening at intake;
2. participate in an employability assessment, when required;
3. participate in the development and undertaking of an employment plan;
4. participate in an approved upgrading, training or job readiness program to which an applicant/recipient and/or spouse has been accepted; and or
5. provide medical verification/ documentation required to determine whether an employment plan is appropriate for the applicant/recipient and/or spouse;

In cases where the applicant/recipient and/or spouse have legitimate barriers, their refusal to participate is considered reasonable.

An applicant/recipient and/or spouse is/are required to provide a reasonable explanation for their refusal to participate and if unable to do so, will be ineligible for Income Assistance for a period of six (6) week, beginning with the next service period.

5.17.5 Policy: Refusal to Participate in the Nova Scotia Employability Assessment (NSEA) or an Employment Plan

A recipient and/or a recipient's spouse who is required to participate in a Nova Scotia Employability Assessment (NSEA) and/or the development of an employment plan and refuses to participate, will be required to contact a caseworker with a reason or explanation why they did not participate.

A recipient and/or a recipient's spouse is required to provide a reasonable explanation for their refusal to participate and if unable to do so, will be ineligible for Income Assistance for a period of six (6) weeks, beginning with the next period.

A caseworker will:

1. review the Employment Services Screening Tool and/or the NSEA and employment plan to determine if there are barriers to employment that would provide reasons for non-participation; and/or
2. notify the recipient and/or spouse by letter of any instance of failure to participate and set out in writing the conditions that must be met for the recipient and/or spouse to meet the requirements for participation.

In the case where the recipient and/or the spouse demonstrate a second instance of refusal to participate with employment services/employment activity, the caseworker will:

1. place the Income Assistance case in withheld status, and send a letter to recipient indicating that the recipient must contact the caseworker to provide an explanation for the second (2nd) instance;
2. consult with caseworkers involved in the case to make a decision regarding a third opportunity for participation with the employment plan;
3. determine whether or not to issue the Income Assistance payment based on the explanation from the recipient and/or spouse and a review of the employability participation questions and/or the NSEA and employment plan to determine if there are barriers to employment that would provide reasons for non-participation; and/or
4. issue the Income Assistance payment or if a decision is made to not issue the Income Assistance payment then send a letter to the recipient and/or the spouse advising that Income Assistance will be discontinued for a period of six (6) weeks beginning from the next service period and advise of the right to appeal this decision.

If the recipient and/or spouse demonstrates a third (3rd) instance of refusal to participate with employment services/employment activity without a valid reason, the caseworker will:

1. place the Income Assistance case ineligible status;
2. enter an ICM case note to record actions and reasons for refusal to participate; and
3. send a letter to the recipient and/or the spouse advising that Income Assistance will be discontinued for a period of six (6) weeks beginning from the next service period and advise of the right to appeal this decision.

5.17.6 Policy: Quit or Fired From Employment

An applicant and/or the spouse is not eligible to receive Income Assistance for a period of six (6) weeks from the date of application when the applicant and/or the spouse has quit a job without just cause, was fired with just cause, or quit a job for the purpose of qualifying for Income Assistance within four (4) months prior to the application for Income Assistance.

A recipient and/or spouse is not eligible to receive Income Assistance for a period of six (6) week beginning with the next service period when a recipient and/or spouse has quit a job without just cause, was fired with just cause, or quit a job for the purposes of qualifying for Income Assistance.

Where an applicant/recipient and/or spouse has quit or been fired from an employment situation and the circumstances for leaving are justifiable, (such as, but not limited to, the health and safety of the individual was in jeopardy if the employment relationship was to continue), Income Assistance may be provided.

5.17.7 Policy: Strike or Lockout

An applicant/recipient and/or spouse is not eligible to receive or continue to receive Income Assistance if they are an individual on strike or lockout.

5.17.8 Policy: Lawful Confinement

An applicant/recipient is not eligible for Income Assistance while the applicant/recipient is detained in a lawful place of confinement.

Income Assistance will be discontinued where an applicant/recipient is imprisoned for more than thirty (30) consecutive days in any penitentiary to which the *Prisons and Reformatories Act (Canada)* applies, in a jail, lockup or adult reformatory institution.

Applicants/recipients who are under House Arrest, may be eligible to receive Income Assistance based on an assessment of determination for eligibility.

5.17.9 Policy: Under Age 19 Residing with Parents

An applicant who is under the age of 19 and residing with their parent(s)/guardian(s) is not eligible to receive Income Assistance as the *Nova Scotia Maintenance and Custody Act* defines a dependent child as being under the age of majority (age 19 years old).

An individual under the age of 19 who is a single parent and is residing with his/her parent(s)/guardian(s) is not eligible for Income Assistance in their own right or on behalf of his/her dependent child.

The parent(s)/guardian(s) of an applicant under the age of 19 must be eligible if Income Assistance is to be provided.

5.17.10 Policy: Age 19 to 21 Residing with Parents and Attending an Educational Program

An applicant who is under the age of 21, residing with their parent(s)/guardian(s) and attending an educational program may not be eligible to receive Income Assistance as *the Nova Scotia Maintenance and Custody Act* may include a young person under the age of 21 who is still pursuing their education as a dependent.

An individual under the age of 21 who is a single parent, residing with his/her parent(s)/guardian(s) and attending an educational program is not eligible for Income Assistance in their own right or on behalf of his/her dependent child.

The parent(s)/guardian(s) of an applicant under the age of 21 must be eligible if Income Assistance is to be provided.

5.17.11 Policy: Hospitalization

A caseworker may discontinue Income Assistance where a recipient and/or the spouse has been hospitalized for more than thirty (30) consecutive days. A personal needs allowance may be paid to a recipient or the spouse in the hospital, as [Policy 5.3.2- \(Hospitalization - Personal Needs Allowance\)](#) and [Policy 5.5.1 - \(Schedule: Personal Allowances and Maximum Shelter Allowance\)](#)

A caseworker is required to assess eligibility for maintaining the shelter allowance and/or eligibility for special needs while a recipient and/or spouse is hospitalized.

5.17.12 Policy: Absent from the Province - Non-Work Related

A caseworker may discontinue Income Assistance where a recipient, spouse or dependent child(ren) has been absent from the province for more than thirty (30) consecutive days.

5.17.13 Policy: Fraud

Income Assistance provided to a recipient will be reduced, discontinued or suspended where there has been fraud, misrepresentation, non-disclosure of facts or other cause that has resulted in Income Assistance being improperly provided to the Recipient. [Policy 5.1.9- \(Reporting Change in Circumstances\)](#)

5.17.14 Policy: Child Support/Maintenance

An applicant/recipient is not eligible to receive Income Assistance when they have not fulfilled their requirement to seek support/maintenance for themselves, a dependent child or other person on whose behalf Income Assistance is payable. This may involve seeking court action, or working with the Family Maintenance Income Support program to address maintenance. If a recipient/applicant fails to obtain information required to pursue child support/maintenance, a caseworker may refuse Income Assistance until such time as the information is provided.

The requirements to seek child support/maintenance may be waived when potential abuse by absent spouse or parent poses a serious threat to a recipient, and/or other family members.

The requirement to seek child support may be waived if it is determined by a caseworker/Family Maintenance Support Worker that to pursue maintenance would be futile or unreasonable.

5.17.15 Policy: Monies in Trust

Income Assistance will not be provided where an applicant/recipient or a spouse or dependent child of an applicant/recipient has access to monies held in a trust.

Program Policy:	Employment Support and Income Assistance	
Chapter: 6	Special Needs	
Section: 1	Special Needs	
Effective: August 1, 2001	ESIA Regulations: 12 Not eligible for assistance 24 Information to be provided 25 Health or medical need 26 Determination of eligibility 27(1)(2)Supervisor may determine higher amount 29(1) Expenses to be considered in determining eligibility 30 Amount payable 46 Supervisor can modify calculation of budget deficit	Page 1 of 4
Revised: September 12, 2011		

6.1.1 Policy: Provision of Special Needs

An applicant/recipient and/or spouse may request assistance for an item/service of special need in accordance with the special needs schedule of approved items/services [Policy 6.3.1- \(Special Needs Schedule\)](#).

An applicant/recipient and/or spouse must demonstrate that they have exhausted all possibilities for full or partial coverage of the cost of the special need item/service from all available resources, private/publicly funded or community organizations.

Items/services required for medical purposes for which an alternative exists under the provincial insured health services program (MSI), or otherwise funded by government, will not be approved as an item of special need. MSI is a program of the Department of Health and Wellness.

Pharmacare benefits are provided in accordance with the contracted service only. Request for assistance with prescription drug coverage that is not included in the approved Nova Scotia Formulary will not be approved as a special needs item. Only those medications/supplies in the Nova Scotia Formulary can be considered. [Policy 9.1- \(Pharmacare\)](#).

The provision of special need items/services may not be approved regardless of recommendations regarding their medical necessity. Assistance will not be provided for the following:

1. physician services that are not recognized as insured health services by MSI or otherwise funded by government;

2. services provided by other health care workers, which are not insured under MSI such as, but not limited to, chiropractors, physiotherapists, podiatrists, massage therapists, naturopathic or homeopathic practitioners will not be approved as an item/service of special need;
3. prescription medications, drugs and substances that are not listed as benefits under the pharmacare programs in the *Nova Scotia Formulary*;
4. medical treatments and substances that are not covered as an insured service under MSI; including equipment, supplies, materials or services used in producing or administering the treatments or substances; and/or
5. shelter costs and personal allowances.

Special Needs Benefits Granted before August 8, 2011

A recipient, spouse or dependent receiving special need items or services prior to August 8, 2011 will continue to be eligible if the following conditions apply:

1. there has been no break in eligibility for the item or service since the last time assistance was determined for the special need; and
2. the reasons why the special need is required have not changed.

6.1.2 Policy: Process for Special Needs Requests

An applicant/recipient and/or spouse will provide the following information, where applicable, when requesting a special needs item/service:

1. the reason for the request;
2. a description of the special need;
3. any professional documentation supporting the special need (examples include, but not limited to, medical physician, dietician, dentists, social worker, psychiatrist, police);
4. the monthly and/or total cost of the special need item/service;
5. information regarding the resources/alternatives that have been investigated with respect to obtaining the special need item/service from other sources;
6. requested estimates; and
7. invoice or receipt for the special need item/service.

Prior approval is required for special needs items/services. Only in emergency situations, can a special need item/service be approved after the purchase and/or utilization of a service. If the special need item/service has already been acquired, and is an approved item/service under ESIA Policy, an invoice or receipt for the special need is required.

In determining eligibility in cases where the special need items/service being requested is related to the health or medical needs of the individual, the caseworker may obtain further information as required and/or consult with a person qualified to provide advice regarding appropriateness, necessity and effectiveness of the requested special needs item/service. This may include, but not limited to, a request for a second opinion from a person who specializes in the area related to the special need item/service.

6.1.3 Policy: Overpayments Related to Special Needs

When a special need item/service has been previously issued, or included in the determination of eligibility by being calculated in the budget deficit, up to the allowable maximums prescribed in *Regulations*, the amount issued for the requested special need item/service (such as, but not limited to, fuel, electricity, water, etc.), will result in the establishment of an overpayment.

Special need items/services are approved based on allowable maximum rates. Assistance with a special need item/service in excess of the approved Income Assistance rate(s), will result in the establishment of an overpayment, unless the Supervisor approves a higher amount based on specific criteria [Policy 6.1.5 - \(Supervisory Determination of Higher Amount for a Special Need Item/Service\)](#).

6.1.4 Policy: Special Needs Purchase Guidelines

The purchase of goods and services is the responsibility of an applicant/recipient and/or spouse. Applicant/recipient and/or spouse purchasing special need items/services are required to purchase the most economical item available. A caseworker will refer to the expenditure guidelines as per [Policy 6.3.1- \(Special Needs Schedule\)](#).

Where there are no approved amounts within *Policy* for a special need item/service in excess of \$200, two (2) estimates are required.

Supervisory approval is required for all special needs items or services over \$200 where no approved amount exists within policy. All special needs items or services not listed in *Policy* require supervisory approval.

6.1.5 Policy: Supervisory Determination of Higher Amount for a Special Need Item/Service

A supervisor may determine a higher amount for a special need item/service when:

1. all other available resources, private/publicly funded or community organizations are exhausted, and the option of monthly payments for the rental/purchase of the special need items has been explored and is unavailable, and;
2. a. there is documentation to support that the maximum amount allowed for any item/service of special need, as prescribed in *Regulations* and/or Special Needs Schedule [Policy 6.3.1- \(Special Needs Schedule\)](#), is insufficient to pay for the cost of the item due to the distinctive need of an applicant/recipient or the spouse or dependent child of an applicant/recipient, the higher amount, as documented, may be included in the calculation of an applicant/recipient's budget deficit;

b. in urgent circumstances pertaining to the health or safety of an applicant/recipient, spouse or dependent child of an applicant/recipient when there is only a budget deficit for a portion of the cost of the special need items/service, the payment of the total cost may be approved.

6.1.6 Policy: Individuals not in Receipt of Income Assistance

When an individual (applicant), not in receipt of Income Assistance, makes a request for a special need item/service only, eligibility for special needs will be assessed in the same manner and under the same policy criteria and rate structure as is applied to all applicants for Income Assistance.

There are certain special needs that can only be provided to recipients who have been in receipt of Income Assistance for a specified period of time (as an example, the house repairs policy only applies to those in receipt of Income Assistance for six (6) months or longer).

Program Policy:	Employment Support and Income Assistance	
Chapter: 6	Special Needs	
Section: 2	Special Needs	
Effective: August 1, 2001	ESIA Regulations: 2(ab)(i)(E)(F) Definitions 12 Not eligibility for assistance 24 Information to be provided 25 Health or Medical Need 26 Determination of eligibility 29(1) Expenses to be considered in determining eligibility 30 Amount payable 32 Personal and Shelter Allowances 34 School supplies 43 Employment plan expenses 44 (a)(b)(c) Employment expenses 46 Supervisor can modify calculation of budget deficit	Page 1 of 23
Revised: May 1, 2012		

6.2.1 Policy: **Ambulance**

An applicant/recipient, spouse or dependent child who requires ambulance services may be eligible for assistance when the ambulance service was for emergency use only. Assistance will not be approved for non-emergency transportation. Prior approval is required, if possible. Assistance will be provided at the approved rate set by the Department of Health and Wellness for emergency transportation.

6.2.2 Policy: **Car Seats and Booster Seats**

An applicant/recipient or spouse who requires assistance with the purchase of car seats/booster seats may be eligible for assistance for the most economical option that is Canadian Standards Association (CSA) approved.

6.2.3 Policy: **Child Care**

An applicant/recipient or the spouse may be eligible for assistance with child care of up to a maximum of \$400 per month per family based on actual costs to have child care provided for dependents, 13 years of age and under, when:

1. the care is required for a recipient to participate in employment, training, upgrading, volunteer activity, job search, attendance at Employment

Services and any other activity deemed appropriate as part of the employment plan; or

2. the parent(s) are physically unable to care for the child(ren) due to medical reasons; or
3. child care assistance is required in the best interest of the family.

Allowable child care expenses will include, but are not limited to:

1. the parental contribution to a subsidized child care seat;
2. early morning, lunch and after school program costs;
3. private licensed care; and/or
4. private unlicensed care in a recipient's or caregiver's home.

Costs for child care will not be provided to the non-custodial parent or legal guardian of the child, or an individual who is included in the budget calculation when determining a budget deficit. Child care costs may be provided for children of single parents residing with their parent(s), when that parent(s) (grandparent) is a recipient of Income Assistance, and is providing care to the single parent's child for the purpose of the single parent's return to an approved educational program or employment.

Verification of the child care cost must be provided and, where appropriate, supporting documentation from appropriate physician.

Exceptions to provide child care costs for children over the age of 13 can be made if the care is required for a person with a disability or if it is determined that the provision of child care is in the health and/or safety interest of the child.

6.2.4 Policy: Dental

An applicant/recipient, spouse or dependent child may be eligible to receive emergency dental coverage as per the approved contracted service (the approved dental rates are included in [Policy 6.3.4 - \(Dental Fee Guide\)](#)).

Coverage may be provided in accordance with the approved contracted service under the following circumstances:

1. for the relief of pain;
2. for control of prolonged bleeding;

3. for treatment of swollen tissue;
4. for provision or repair of broken dentures; and/or
5. for dental problems identified as barriers to employment by Employment Support staff.

An applicant/recipient, or the spouse or dependent child who has access to dental coverage under another dental plan, public or private, will be required to use that plan and they will not be eligible for dental coverage from the Employment Support and Income Assistance program. The Nova Scotia Health Card number for clients and/or their dependents will be used as the mechanism to access dental coverage.

When an applicant/recipient, or the spouse or dependent child requires dental work to be completed over a period of time and the client is deemed ineligible for a portion of that time, the work shall be completed within thirty (30) days from the date of ineligibility.

Recipients of Extended Pharmacare benefits may be assessed for dental coverage. In these cases, the average monthly drug cost is not included in the budget calculation when assessing eligibility for dental coverage.

Recipients of Transitional Pharmacare benefits who request emergency dental assistance, will be assessed in accordance with [Policy 6.3.4 - \(Dental Fee Guide\)](#).

6.2.5 Policy: Emergency Shelter Expenses

An applicant/recipient or spouse or dependent child of an applicant/recipient may be eligible to receive assistance with shelter and associated costs for homeless/emergency shelter, emergency heat or utility arrears under certain circumstances.

6.2.5(a) Policy: Homeless Shelter

An applicant/recipient or spouse and/or dependent child of an applicant/recipient may be eligible for assistance with emergency accommodations when there is confirmation of homelessness.

In such situations, a caseworker will refer single persons to local emergency shelters and families to local motels/hotels. A caseworker will authorize the approved per diem or most economical accommodations available and can only authorize payment for prior approved shelter and associated costs.

The Department is not responsible for damage or stolen items or any additional cost incurred by an applicant/recipient or spouse or dependent child of an applicant/recipient.

6.2.5(b) Policy: Emergency Heat

In an emergency situation, when there is no heat in an applicant/recipient's home, the minimum payment amount to address the immediate need for emergency heat may be provided. During the winter months (December to March), payment for emergency heat may be established as an overpayment. All payments for emergency heat issued during the non-winter months (April to the end of November) will be established as an overpayment when the monthly amount had previously been issued or it exceeds the shelter maximum.

6.2.5(c) Policy: Utility Arrears

In a situation where an applicant/recipient requests assistance with utility arrears (electricity, gas, water) the minimum payment amount to address the immediate need may be provided when the following are met:

1. there is confirmation that service will be or has been terminated;
2. an applicant/recipient has demonstrated that they have not been successful in negotiating a repayment arrangement; and
3. the supporting documentation has been provided.

All payments for utility arrears will be established as an overpayment when the monthly amount had previously been issued or it exceeds the shelter maximum. If heat costs are included with the utility arrears request, the heat costs will be assisted under [Policy 6.2.5 \(b\) - \(Emergency Heat\)](#).

An applicant/recipient will be encouraged to negotiate with the utility company to enter into a regular repayment schedule.

6.2.6 Policy: Employability Related Special Needs

A recipient and/or spouse may be eligible for Income Assistance to cover employability related expenses, that are directly related to and necessary to facilitate employment or participation in an employment plan when they are:

1. employed on a full-time or part-time basis;

2. participating in employment services; or
3. implementing an approved employment plan.

Actual costs may be provided for the following related expenses up to the allowable maximums:

1. **Approved Personal Development Supports** (up to a maximum \$300 per activity to a maximum total of \$600 for a twelve (12) month period)—such as, but not limited to; assertiveness training, self-esteem programs, anger management, career development, individual counseling not available through MSI;
2. **Association/Professional/Licensing Dues** (up to a maximum total of \$500 per twelve (12) month period - where not already covered through mandatory employment related costs, such as union dues, professional membership fees, professional license application and renewal;
3. **Books, Supplies, and Deposits**, including seat confirmation deposits (up to a maximum total of \$700 per twelve (12) month period) examples include books and supplies required to participate in an approved educational program which is non-student assistance eligible, such as, but not limited to, academic upgrading, high school, short term course;
4. **Equipment and Supports** related to a disability required to return to employment, where not available through other programs, such as, but not limited to, job coaching, tutoring, ergonomic supports, obus formes, special chairs, technical aids (up to a maximum total of \$1,000 per twelve (12) month period);
5. **Other Employment Related Costs** (up to a maximum total of \$500 per twelve (12) month period) for other costs associated with participation in employability related activities that are not covered in this list or by other policies and/or programs;
6. **Payment of Fees** (up to a maximum total of \$200 per twelve (12) month period) for fees that are directly related to a return to employment, such as but not limited to drivers licenses, criminal record check, drivers abstract, child abuse registry check, medicals, and fines. (Criminal record pardon applications may exceed this amount);
7. **Personal Hygiene and Grooming Supplies** (up to a maximum total of \$50 every four (4) months);
8. **Professional Assessments** (up to a maximum \$1,000 per twelve (12) month period)—professional assessments that may be required develop an

appropriate employment plan and that cannot be provided directly by the Department of Community Services;

9. **Safety Equipment and Gear** (up to a maximum total of \$300 per twelve (12) month period) for items such as hard hat, work boots, ear protectors, eye protectors, safety harnesses, safety gloves, masks, helmets face shields required for employment purposes;
10. **Specific Short Term Skills Training** (up to a maximum total of \$500 per course) such as, but not limited to, computer literacy, GED, upgrading, professional refresher programs, continuing education programs;
11. **Tools** (up to a maximum total of \$500 per twenty-four (24) month period) for such items as mechanics tools, carpentry tools, electronic tools, ladders, tool belts required for employment purposes;
12. **Training Related Clothing** (up to a maximum of total of \$200 per twelve (12) month period) such as, but not limited to, uniforms or specialized clothing required for the program;
13. **Work Related Clothing** (up to a maximum total of \$200 per twelve (12) month period) such as, but not limited to uniforms, rain gear, coveralls, office appropriate attire;
14. **Work Related Courses** (up to a maximum total of \$200 per course) such as First Aid, WHMIS, CPR, traffic control, non-violent crisis intervention.

6.2.7 Policy: Extermination Services

Applicants/recipients may be eligible for extermination service when it has been determined there is a definite need for the service and, where possible, confirmed in writing by a Public Health Inspector or Public Health Nurse; and only after confirmation is received that the landlord is not responsible for purchasing this service.

6.2.8 Policy: Fire/Liability Insurance for Homeowners

Applicants/recipients who own and occupy their own home may be eligible for fire/liability insurance as an item of special need. As an item of special need to be calculated at 1/12 for each month of eligibility. In situations where applicants/recipients are unable to access monthly payment options, a casework supervisor may approve the full premium.

6.2.9 Policy: Food, Shelter and/or Transportation for Medical Attention

An applicant/recipient, spouse, and/or dependent child may be eligible for food, shelter and/or transportation for medical attention required outside of the local community when:

1. a critical situation for which no other options are available;
2. scheduled medical attention is documented by a physician; and
3. scheduled medical attention is not available in the local community.

In these situations, only the most economical option for food, shelter and transportation for required medical attention will be approved. The maximum amount for transportation is \$150 [Policy 6.2.33 - \(Transportation\)](#) excluding exceptional circumstances where a supervisor may approve a higher amount.

Where other sources of assistance such as, but not limited to, the provincial insured health services (MSI), private insurances and/or privately or publicly funded organizations is not available, Income Assistance for shelter will be provided only in situations where an applicant cannot stay with family or friends. No shelter costs will be paid to family or friends.

When the specialist is outside their local community, proof of the visit (i.e. documentation from the specialist) must be provided. In extraordinary circumstances, and when the required service is not available within the Province of Nova Scotia, an applicant/recipient, spouse or dependent child may be eligible for out of province travel.

6.2.10 Policy: Foot Care

An applicant/recipient, spouse, and/or dependent child may be eligible for assistance with the costs associated with foot care clinic services provided by Registered or Licensed Practical Nurses, up to a maximum of \$180 per year, and subject to supervisory approval when:

1. the treatment has been prescribed by a physician;
2. it is medically necessary and no other options are available; and
3. treatment is not available through the provincial insured health services (MSI), private insurances and/or privately/publicly funded organizations.

6.2.11 Policy: Funeral and Burial

In the event of a death of a resident of the Province, where no provision for burial has been made, either by the deceased or his/her family, the Department may pay for funeral expenses and the cost of the burial subject to the approved funeral rate schedule.

The Department may assist with the cost of all funeral services (traditional or cremation). The cost of professional services and merchandise may be paid to the maximum allowable defined in the funeral rate schedule.

Third-party contributions to a funeral service provider may be applied against actual costs to enable the funeral home to receive full reimbursement for goods and services provided. Third-party contributions will be permitted from any person who is not a surviving spouse/dependent child.

The family or representative of the deceased must make application and demonstrate financial eligibility on behalf of the deceased for all or part of the allowable funeral costs.

Funeral arrangements and payment of funeral costs are the responsibility of the individual representing the deceased and the funeral home.

Funeral Rates Schedule

Allowable Expenses	Maximum Approved Amounts
Professional Services and Merchandise – i.e. cremation urn or casket.	up to a maximum total of \$2,700 + taxes
Cash Disbursements for the following: <ol style="list-style-type: none"> 1. Cemetery Charges (open, close, clean up grave, burial permits, etc.); 2. Grave Liner (wooden); 3. Cemetery equipment & set up; 4. Radio notices; 5. Newspaper notices; 6. Clothing for the deceased; 7. Honorariums (Clergy, Music,); and 8. Grave Lot 	up to a maximum total of \$1,100 + taxes
Mileage over 25 kilometers	may be paid on a per kilometer basis at a rate of 60 cents per kilometer
Any exceptions requested in addition to the approved funeral cost such as, but not limited to, oversized casket, special-embalming preparations, out-of-province transfer.	approval of the Supervisor required

6.2.12 Policy: Furniture

Where no other alternative is available an applicant/recipient may be eligible for the following basic household and furniture items in accordance with the approved rate.

Item	Approved Rate
Bed	up to maximum of \$100
Crib	new cribs that are the most economical and are Canadian Standards Approved (CSA) approved
Mattress (including box spring)	up to maximum of \$100
Refrigerator	up to a maximum of \$200
Stove	up to a maximum of \$150
Table/Chairs	up to a maximum of \$125
Washers	up to a maximum of \$200

1. plus tax when applicable.
2. when all other options for delivery have been exhausted, the Supervisor may approve most economical delivery fees.

6.2.13 Policy: Guide Dog Allowance

A recipient, spouse, and/or dependent child may be eligible for an allowance of \$90 per month for a guide dog allowance and up to \$300 a year for routine veterinary costs, when all other available resources have been exhausted, if the dog is:

1. received through the support of a certified guide dog organization/school with documentation outlining provision of supports; and
2. used by a recipient, spouse or dependent child.

The monthly guide dog allowance is for food and routine care costs such as, but not limited to, grooming, teeth cleaning, toenail clipping, leashes, and incidentals. Routine veterinary costs include checkups, vaccinations, and flea and heartworm treatments.

Expenses for non-routine care for a guide dog are not funded by Income Assistance. Non-routine expenses include, but are not limited to, surgical procedures, treatment for fractures, and infections, special diets, euthanasia, and travel, room and board to acquire a dog.

Retired guide dogs maintained by a recipient, spouse or dependent child are not eligible for the guide dog allowance.

6.2.14 Policy: Hearing Aids

An applicant/recipient, spouse, and/or dependent child may be eligible for assistance with the purchase of a hearing aid when:

1. an audiologist has prescribed a hearing aid(s);
2. it has been confirmed there are no other options available to assist with the cost, such as, but not limited to, the provincial insured health services (MSI), private insurances and/or privately/publicly funded organizations; and
3. supervisory approval has been provided for the most economical option.

6.2.15 Policy: House Repairs

Recipients who own and occupy their own home may be eligible to receive assistance with housing repairs. This policy only applies to those in receipt of Income Assistance for six (6) months or longer. Assistance will only be provided when repairs are essential to the health and safety of a recipient and dependents, and where alternative funding or commercial financing is not available. Recipients must provide documentation of health or safety hazard(s) to a caseworker.

All requests for housing repairs will be referred to Housing Services for an assessment prior to determining eligibility for assistance.

When assistance is granted for essential household items, (such as, but not limited to a furnace, water boiler) it will be provided on a monthly lease/or lease to purchase basis, wherever possible.

6.2.16 Policy: Medical Equipment

An applicant/recipient, spouse, and/or dependent child may be eligible for assistance with the purchase/rent of medical equipment, such as, but not limited to, prosthetics, CPAP machines, wheelchairs, crutches that are not covered by through Pharmacare benefits when:

1. the need for the requested item has been verified through documentation provided by a qualified medical doctor or medical practitioner;
2. the requested item is not covered by the provincial insured health services (MSI), private insurances and/or privately/publicly funded organizations;
3. it is confirmed it is the most economical option (including monthly rental/purchase); and
4. supervisory approval has been obtained.

Prior to determination of eligibility, a caseworker may refer to a second medical professional/practitioner to determine if:

1. the item/service is required;
2. considered effective; and/or
3. if an equally effective, more economical device, piece of equipment or treatment, is available.

The Medical Equipment Policy does not include dental equipment/prosthesis (for dental refer to [Policy 6.3.4 - \(Dental Schedule\)](#)).

The actual amount of any assistance provided is dependent on whether a budget deficit exists when the cost of the item of special need is included on the Income Assistance application.

6.2.17 Policy: Medical Supplies

An applicant/recipient, spouse, and/or dependent child may be eligible for assistance with the purchase of medical supplies, such as, but not limited to, incontinent supplies, ostomy supplies, dressings that are not covered by through Pharmacare benefits when:

1. the need for the requested item has been verified through documentation provided by a qualified medical doctor or medical practitioner;
2. the requested item is not covered by the provincial insured health services (MSI), private insurances and/or privately/publicly funded organizations; and
3. it is confirmed it is the most economical option.

Prior to determination of eligibility, a caseworker may refer to a second medical professional/practitioner to determine if:

1. the item/service is required;
2. considered effective; and/or
3. if an equally effective, more economical treatment, is available.

Soaps and cleaning supplies are not funded as an item of special need.

6.2.18 Policy: Mortgage/Rental Arrears

Applicants/recipients may be eligible for mortgage/rental arrears when there is confirmation of foreclosure or eviction. The assistance may be provided based on the minimum amount required to avoid foreclosure or eviction on a one (1) time only basis and subject to supervisory approval.

The overpayment provisions of [Policy 6.1.3 - \(Overpayments Related to Special Needs\)](#) may apply. In such cases, the overpayment amount will be recovered by a monthly deduction from a recipient's entitlement.

6.2.19 Policy: Moving Expenses - Within Region

Applicants/recipients may be eligible for moving expenses up to a maximum of \$200 when:

1. an applicant/recipient is forced out of present accommodations by fire, flood, or abusive situations; or
2. an applicant/recipient's health or safety is threatened; or
3. the new accommodations are more affordable than the present accommodations.

Assistance with moving expenses will only be provided up to a maximum of once (1) per twelve (12) month period.

6.2.20 Policy: Optical Care

An applicant/recipient, spouse or dependents may be eligible for the assistance with the costs associated with optical care. Specifically, assistance with the cost of a routine eye examination for those 10 - 64 years of age who use, or believe they

need, corrective eyeglasses may be provided once every two (2) years. The maximum payment for this service will be \$55.

When eyeglasses are prescribed by an optometrist or physician, assistance may be provided subject to the following maximum rates:

1. \$90 for single vision orders with regular glass or CR39 plastic lenses complete with frame once every two (2) years; or
2. \$110 for bifocal orders with Kryptoc (round segment) or flat-top glass or CR39 plastic complete with frame once every two (2) years.

Special lenses, at additional cost, may be covered, when prescribed by an optometrist or physician subject to the following restrictions:

1. no coverage will be provided under any circumstances for any cosmetic purpose. This includes, without limiting the generality of the previous statement, progressive (invisible) bifocals and anti-reflective coatings, except on high index lenses.
2. high index lenses will only be provided if the prescription equals or exceeds +/-5.0 diopter.

Assistance with the costs associated with eye exams and the purchase of eyeglasses will be provided a maximum of once every two (2) years, unless there is a medically substantiated reason for new eye wear by the optometrist or physician.

6.2.21 Policy: Orthotics

An applicant/recipient, spouse, and/or dependent child may be eligible for assistance with the purchase of orthotics and/or orthotic modifications when:

1. the need for the requested item has been verified through documentation provided by a qualified medical doctor or medical practitioner;
2. the requested item is not covered by the provincial insured health services (MSI), private insurances and/or privately/publicly funded organizations; and
3. it is confirmed it is the most economical option.

Prior to determination of eligibility, a caseworker may refer to a second medical professional/practitioner, to determine if:

1. the item/service is required;

2. considered effective; and/or
3. if an equally effective, more economical option or treatment, is available.

When orthotics or orthotic modifications are prescribed by a medical doctor or medical practitioner, assistance may be provided, subject to the following maximum rates:

1. up to \$300 once every two (2) years for custom orthotic supports; and
2. up to \$100 once every two (2) years for orthotic modifications to regular shoes.

6.2.22 Policy: Over the Counter Non-Prescription Medications

An applicant/recipient, spouse and/or dependents may be eligible for assistance with over-the-counter (non-prescription) medications, when a physician or dietician substantiates the need in writing.

Only those non-prescription medications authorized by a medical doctor or registered dietician can be considered.

Herbal medications are not funded/approved as items of special need. Soaps and cleaning supplies are not funded/approved as items of special need.

6.2.23 Policy: Personal Development

A recipient and/or spouse may be eligible for Income Assistance to cover personal development activities such as, but not limited to, assertiveness training, self-esteem programs, anger management, career development, individual counseling when they are part of an approved case plan developed to facilitate their movement towards independence and self-sufficiency.

Approval may be provided when it has been confirmed that funding is not available through MSI, private insurances and/or privately/publicly funded organizations. Up to a maximum of \$300 per activity/program to a maximum total of \$600 in a twelve (12) month period may be provided.

Personal development activities ordered or required by other agencies, departments or court system are not approved items/services of special need.

6.2.24 Policy: Prescription Drug Coverage

Coverage of prescription drug costs may be provided to an applicant, spouse and dependent child when there is no eligibility for Income Assistance ([Policy 6.1.6.- \(Individuals not in Receipt of Income Assistance\)](#)). Only medications approved in the [Nova Scotia Formulary](#) will be considered.

An applicant must register with the [Nova Scotia Family Pharmacare](#) program. When the Nova Scotia Family Pharmacare monthly out of pocket expenses (co-pay and/or deductible) are included in the budget calculation and a deficit results, an applicant may be eligible for the amount of the entitlement ([Policy 5.2.1 – \(Initial Budget Calculations\)](#)).

In urgent circumstances, pending Nova Scotia Family Pharmacare registration and with supervisory approval ([Policy 6.1.5 – \(Supervisory Determination of Higher Amount for a Special Need Item/Service\)](#)), a one month supply of each prescription medication can be included in the applicant's budget.

An applicant/recipient, spouse or dependent child who has a private health care plan from a public (does not include Nova Scotia Family Pharmacare or Low Income Pharmacare for Children) or a private entity may be required to use that plan and may not be eligible for Pharmacare benefits. There may be eligibility for a reimbursement of the co-payment amounts that exceed \$5.00 per prescription provided the medication/supply is a benefit under the [Nova Scotia Formulary](#). Receipts verifying the co-payments from the pharmacy or private health plan organization are required.

For recipients, refer to [Policy 9.1.1 – \(Pharmacare\)](#) for information on Pharmacare benefits.

6.2.25 Policy: Property Tax Arrears

Recipients who have been in receipt of Income Assistance for twelve (12) consecutive months or longer may be eligible for a one (1) time only payment of property tax arrears based on the following criteria:

1. the recipient must provide documentation that the property will be sold due to outstanding taxes;
2. only the amount required to avoid a tax sale can be considered;
3. assistance can only be provided if the property is solely in the name of the recipient;

4. arrears will only be considered for the period of time a recipient was in receipt of assistance;
5. the overpayment provisions of [Policy 6.1.3 - \(Overpayments Related to Special Needs\)](#) may apply. In such cases, the overpayment amount will be recovered by a monthly deduction from a recipient's entitlement.

Applicants may be eligible for property tax arrears. The assistance may be provided based on the minimum amount required to avoid a property tax sale on a one (1) time only basis and subject to supervisory approval.

6.2.26 Policy: Relocation - Out of Region/Province

An applicant/recipient may be eligible for the costs of relocation in the following situations:

1. employment has been secured;
2. for health and safety reasons including, but not limited to, confirmed report of family violence and/or confirmed medical report that the client and/or dependents can no longer live in his/her present environment.

An applicant/recipient may be eligible for the costs of relocation for employment when the above conditions are met and:

1. all avenues of available funding have been exhausted;
2. the viability of the employment opportunity has been verified through written confirmation from the employer stating the position for which the employee is hired, the start date of employment and the status of employment (part-time, casual, term, permanent);
3. a cost/benefit analysis compares the cost of providing Income Assistance for a period of three (3) months to the cost of relocation and confirms that the cost of Income Assistance payments would exceed the cost of relocation;
4. only the most economical cost of travel to the requested location will be considered;
5. authorization from the Supervisor for out of region travel or the District Manager has been obtained for out of province travel.

Where a parent requests financial assistance for the purpose of relocating themselves and their children to another jurisdiction, no assistance should be provided, unless the parent provides verification that they may leave the jurisdiction

with the child(ren). This involves the parent providing verification which confirms the non-custodial parent's knowledge of the move. This verification may be in the form of a court order/legal agreement/consensual arrangement between the parent and the non-custodial parent. Verification that a non-custodial parent is unknown or whereabouts are unknown must be provided before relocation allowance will be issued. The Family Maintenance Income Support program may provide assistance in verifying this information.

Assistance with the costs of relocation may be provided for health and safety reasons when there is confirmation of family violence. Applicants must provide all supporting documentation confirming the reasons for relocation prior to determination of eligibility for relocation.

In such situations, a caseworker will:

1. consider the following factors when determining the appropriateness of providing relocation assistance:
 - a. reports of family violence, (e.g. transition house involvement, police reports);
 - b. impact relocating may have on third parties, (e.g. family, friends, and other jurisdiction); and/or
 - c. health and safety of the Applicant/Recipient;
2. request applicable supporting documentation:
 - a. **Health and Safety** - Report of family violence, confirmation from transition house personnel and/or police verifying a report(s) of family violence. Record the name, position, company name and/or name of employer of the individual confirming a report of family violence in the case notes;
 - b. **Environment** - Written confirmation from the client's and/or dependent(s) physician indicating that the client and/or dependent(s), due to health concerns, can no longer live in his/her present environment.
3. notify the province/region to which the recipient is moving when any concerns exist with respect to the applicants and his/her dependent's well being. In addition, family members and/or friends may be contacted to verify they are aware the individual is relocating to their area; and
4. obtain authorization from the Supervisor for out of region travel and authorization from the District Manager for out of province travel.

6.2.27 Policy: Residential Respite

A recipient or spouse may be eligible for assistance with the costs associated with respite care in an approved home under the Services for Persons with Disabilities program of the Department of Community Services. A recipient or spouse must meet the eligibility criteria for admission into the home.

Four weeks annually is the maximum respite allowed per person.

6.2.28 Policy: Security/Damage Deposits

An applicant/recipient may be eligible for security/damage deposits, under the following circumstances:

1. the health and safety of the client/family is in question; and/or
2. a move can be made into more economical accommodations, (e.g. public housing) that can be covered under allowances and established in this policy.

Only one (1) security deposit will be paid on behalf of an applicant/recipient. Security deposits shall not exceed one half ($\frac{1}{2}$) of the actual rent, up to the maximum shelter rate for the family size. Payment of a security deposit should not be considered when it is evident that the monthly shelter costs are beyond the shelter allowances in policy.

An applicant/recipient will confirm the rental situation by providing a copy of the lease before assistance with the security deposit is provided.

6.2.29 Policy: School Supplies Supplement

Recipients with dependent children between the ages of 5 and 18 inclusive and attending elementary, junior high, and/or senior high school will receive an annual allowance to assist with the extra costs associated with a dependent child's schooling. An amount of \$50 for children between the ages of 5 - 12 and \$100 for children between the ages of 13 - 18 will be included in the monthly entitlement for the month of September. Entitlement will be based on the age of the child on September 30th.

For children, 19 to 20 inclusive, included in the budget as a dependent, who are attending high school, the allowance of \$100 will apply. For dependent children between the ages of 19 - 20 inclusive, a manual assessment by a caseworker is required.

6.2.30 Policy: Special Clothing

An applicant/recipient or dependent of an applicant/recipient may be eligible for a special clothing allotment for items such as, but not limited to, mastectomy clothing, shoes for orthotics under the following circumstances:

1. special clothing necessary because of a disability;
2. emergency situations; and
3. it has been confirmed that funding is not available through the provincial insured health services (MSI), private insurances and/or privately/publically funded organizations.

6.2.31 Policy: Special Diet

A special diet allowance may be provided to an applicant/recipient, spouse or dependents, up to a maximum of \$150 per month per person.

Approval for a special diet allowance is based on receiving medical documentation specific to the condition, to support the type of special diet and approved allowances set out in the [Policy 6.3.3 - \(Special Diet Rates Schedule\)](#).

Medical documentation can be accepted from a medical doctor, nurse practitioner or registered dietitian and is required prior to the approval of a special diet allowance. The medical documentation is to include information based on the diagnosis and reason for the special diet, the type of special diet required and the time frame the special diet is required.

If more than one (1) special diet is approved, the special diet allowances will be combined up to the maximum of \$150 per month per person.

The special diet allowance will be reviewed if the time frame has expired or at an annual review. Updated medical documentation is not required when the previous medical documentation indicates there is a chronic or permanent medical condition, such as diabetes, and there is an ongoing need for the special diet.

New or updated medical documentation is required only if:

1. there is a change in the reason for or type of special diet;
2. the special diet time frame has expired; or
3. confirmation of the special diet allowance is still required.

6.2.32 Policy: Telephone for Health and Safety Reasons

Applicants/recipients may be eligible for assistance to cover the basic service for a telephone, where a telephone is required for medical or personal safety reasons. Connection charges and deposits will not normally be paid by the Department.

The cost of special telephone equipment may be considered, when a medical condition prevents a recipient/applicant from using basic equipment, and assistance is not available from other sources (e.g. volunteer organizations).

Documentation of need from relevant professionals (medical or otherwise) must be provided by an applicant/recipient.

6.2.33 Policy: Transportation

An allowance for transportation may be provided:

1. in instances where the health and safety of an individual would be jeopardized;
2. when the transportation is required for a recipient to participate in employment, training, upgrading, volunteer activity, job search, attendance at Employment Services and any other activity deemed appropriate as part of the employment plan; and/or
3. where an individual with significant mental, physical or cognitive barriers is participating in an approved learning, volunteer or day program.

Applicants/recipients and/or spouse will be provided with the actual cost, up to a maximum total of \$150 per month based on the most economical and efficient means of transportation.

Program Policy:	Employment Support and Income Assistance	
Chapter: 6	Special Needs	
Section: 3	Special Needs Schedules	
Effective: August 1, 2001	ESIA Regulations: 12 Not eligibility for assistance 24 Information to be provided 26 Determination of eligibility 27(1)(2)Supervisor may determine higher amount 29(1) Expenses to be considered in determining eligibility 30 Amount payable 34 School supplies 46 Supervisor can modify calculation of budget deficit	Page 1 of 18
Revised: May 1, 2012		

6.3.1 Policy: **Special Needs Schedule**

Specific criteria regarding each special need item/service are contained within [Policy 6.2 - \(Special Needs\)](#).

Items of Special Need	Approval Criteria
Ambulance (Policy 6.2.1)	<ul style="list-style-type: none"> • for emergency use only. Not approved for non-emergency transportation • the approved rate set by the Department of Health and Wellness for emergency transportation
Car Seats and Booster Seats (Policy 6.2.2) (in accordance with Provincial legislation)	<ul style="list-style-type: none"> • new car/booster seats that are the most economical and are Canadian Standards Association (CSA) approved
Child Care (Policy 6.2.3)	<ul style="list-style-type: none"> • up to \$400 per month per family
Dental Costs (Policy 6.2.4)	<ul style="list-style-type: none"> • up to \$300 per item as per contracted services

Items of Special Need	Approval Criteria
<p>Emergency Shelter Expenses:</p> <ul style="list-style-type: none"> • homeless shelter (Policy 6.2.5(a)) • emergency heat (Policy 6.2.5(b)) • utility arrears (Policy 6.2.5(c)) 	<ul style="list-style-type: none"> • approved per diem, where applicable or most economical accommodations • minimum amount required to address the immediate need • minimum amount required to avoid disconnect/termination of service
<p>Employability Related Special Needs (Policy 6.2.6)</p> <ul style="list-style-type: none"> • approved personal development supports (examples included but not limited to, assertiveness training, self-esteem programs, anger management, career development, individual counseling not available through MSI) • association/professional/licensing dues • books, supplies and deposits/seat confirmation deposits (examples are but not limited to, books and supplies for non-student loan eligible programs) • equipment and supports related to disability where not available through other programs (examples include, but not limited to, job coaching, tutoring, ergonomic supports, obus forms, special chairs and technical aids) • other employment related costs 	<ul style="list-style-type: none"> • up to a maximum \$300 per activity/ program to a maximum total of \$600 in a twelve (12) month period • up to maximum total of \$500 in a twelve (12) month period • up to maximum total of \$700 in a twelve (12) month period • up to maximum total of \$1000 in a twelve (12) month period • up to maximum total of \$500 in a twelve (12) month period

Items of Special Need	Approval Criteria
<ul style="list-style-type: none"> • payment of fees that are directly related to a return to employment (examples include but are not limited to, driver's licences, criminal record check, driver's abstract, child abuse registry check, medicals, criminal record/pardon applications, fines) • personal hygiene and grooming supplies • professional assessments that may be required to develop an appropriate employment plan that are not provided by the Department • safety equipment and gear (examples include but are not limited to, hard hat, work boots, ear protectors, eye protectors, safety harnesses, safety gloves, masks, helmets, face shields) • specific short term skills training (examples include but are not limited to, computer literacy, GED, upgrading, professional refresher programs, continuing education programs) • tools (examples include but are not limited to, mechanics tools, carpentry tools, electronic tools, ladders, tool belts) • training related clothing (examples include but are not limited to, uniforms or specialized clothing required for the program) • work related clothing (examples include but are not limited to, uniforms, rain gear, coveralls, office appropriate attire) 	<ul style="list-style-type: none"> • up to maximum total of \$200 in a twelve (12) month period (criminal records pardon applications may exceed this amount). • up to a maximum \$50 every four (4) months • up to maximum total of \$1,000 in a twelve (12) month period • up to maximum total of \$300 in a twelve (12) month period • up to maximum \$500 per course • up to maximum total of \$500 in a twenty-four (24) month period • up to a maximum total of \$200 in a twelve (12) month period • up to maximum total of \$200 in a twelve (12) month period

Items of Special Need	Approval Criteria
<ul style="list-style-type: none"> work related courses (examples include but are not limited to, First Aid, WHMIS, CPR, traffic control, non violent crisis intervention) 	<ul style="list-style-type: none"> up to maximum \$200 per course
<p>Extermination Services (Policy 6.2.7)</p>	<ul style="list-style-type: none"> most economical option with supervisory approval
<p>Fire/Liability Insurance for Homeowners (Policy 6.2.8)</p>	<ul style="list-style-type: none"> 1/12 of the total yearly premium for every month of eligibility for Income Assistance
<p>Food, Shelter and/or Transportation for Medical Attention (Policy 6.2.9) that is not covered by the provincial insured health services (MSI), private insurances and/or privately/publicly funded organizations.</p>	<ul style="list-style-type: none"> most economical option with supervisory approval in accordance with specific policy criteria
<p>Foot Care (Policy 6.2.10) that is not covered by the provincial insured health services (MSI), private insurances and/or privately/publicly funded organizations.</p>	<ul style="list-style-type: none"> up to a maximum of \$180 per year, and subject to supervisory approval
<p>Funeral Costs (Policy 6.2.11):</p> <ul style="list-style-type: none"> opening and closing of grave, grave lot, clothing professional services and cremation urn or casket mileage 	<ul style="list-style-type: none"> up to \$1,100 up to \$2,700 \$0.60 per kilometer
<p>Furniture (Policy 6.2.12):</p> <ul style="list-style-type: none"> bed crib 	<ul style="list-style-type: none"> up to maximum \$100 new cribs that are the most economical and are Canadian Standards Approved (CSA) approved

Items of Special Need	Approval Criteria
<ul style="list-style-type: none"> • mattress (including box spring) • refrigerator • stove • table/chairs • washing machines 	<ul style="list-style-type: none"> • up to maximum \$100 • up to maximum \$200 • up to maximum \$150 • up to maximum \$125 • up to maximum \$200 <p>Note: For all the above includes:</p> <ul style="list-style-type: none"> • plus tax when applicable • when all other options for delivery have been exhausted, supervisor may approve delivery fees
<p>Guide Dog Allowance (Policy 6.2.13)</p> <p>The guide dog allowance is for food and routine care costs such as, but not limited to, grooming, teeth cleaning, toenail clipping, leashes, and incidentals.</p> <p>Routine veterinary costs include checkups, vaccinations, and flea and heartworm treatments.</p>	<ul style="list-style-type: none"> • \$90 per month maximum • up to maximum of \$300 per twelve (12) month period
<p>Hearing Aids (Policy 6.2.14) that are not provided/ funded by the provincial insured health services (MSI), private insurances and/or privately/publicly funded organizations.</p>	<ul style="list-style-type: none"> • most economical and subject to supervisory approval
<p>House Repairs (Policy 6.2.15) (recipients who have been in receipt of Income Assistance for six (6) months or longer) Assistance will only be considered when repairs are essential for the health and safety of the Recipient, spouse and/or dependents, and where alternative</p>	<ul style="list-style-type: none"> • most economical to meet needs and subject to supervisory approval

Items of Special Need	Approval Criteria
funding or financing is not available.	
Medical Equipment (Policy 6.2.16) (examples include but are not limited to, prosthetics, CPAP Machines, wheelchairs, crutches) that is not covered by the provincial insured health services (MSI), private insurances and/or privately/publicly funded organizations.	<ul style="list-style-type: none"> • most economical (including monthly rental/purchase) and subject to supervisory approval • does not include dental equipment/prosthesis (for dental refer to Policy 6.3.4 - (Dental Schedule))
Medical Supplies (Policy 6.2.17) (examples include but are not limited to, incontinent supplies, ostomy supplies, dressings) that are not covered by the provincial insured health services (MSI), private insurances and/or privately/publically funded organizations.	<ul style="list-style-type: none"> • most economical • soaps and cleaning supplies are not funded as an item of special need.
Mortgage/Rental Arrears (Policy 6.2.18)	<ul style="list-style-type: none"> • one time only, the minimum amount required to avoid foreclosure on the family home or eviction and subject to supervisory approval • will be subject to overpayment provisions
Moving Costs - Within Region (Policy 6.2.19)	<ul style="list-style-type: none"> • up to \$200 maximum and subject to approval according to specific criteria
Optical Care (Policy 6.2.20): <ul style="list-style-type: none"> • single vision glasses • bifocal glasses • eye exams 	<ul style="list-style-type: none"> • up to \$90 once every two (2) years • up to \$110 once every two (2) years • up to \$55 once every two (2) years
Orthotics (Policy 6.2.21)	<ul style="list-style-type: none"> • up to \$300 once every two (2) years for custom orthotic supports • up to \$100 once every two (2) years for orthotic modifications to regular

Items of Special Need	Approval Criteria
	shoes
<p>Over the Counter Non-prescription Medications (Policy 6.2.22) only those non-prescription medications authorized by a medical doctor or registered dietician can be considered.</p>	<ul style="list-style-type: none"> herbal medications are not funded as an item of special need soaps and cleaning supplies are not funded as an item of special need
<p>Personal Development (Policy 6.2.23) (examples included but not limited to, assertiveness training, self- esteem programs, anger management, career development, individual counseling) not available through MSI, private insurances and/or privately/publicly funded organizations.</p>	<ul style="list-style-type: none"> up to a maximum \$300 per activity/ program to a maximum total of \$600 in a twelve (12) month period personal development activities ordered or required by other agencies, departments or court system are not approved items/ services of special need
<p>Prescription Drug Coverage (Policy 6.2.24)</p>	<ul style="list-style-type: none"> in accordance with the Nova Scotia Formulary only
<p>Property Tax Arrears (Policy 6.2.25) (recipients who have received Income Assistance for twelve (12) consecutive months or longer)</p>	<ul style="list-style-type: none"> one time only, the minimum amount required to avoid a municipal tax sale of the property will be considered will be subject to specific criteria and overpayment provisions
<p>Relocation Out of Region/Province (Policy 6.2.26)</p>	<ul style="list-style-type: none"> most economical and subject to approval in accordance with specific criteria and supervisory approval
<p>Residential Respite (Policy 6.2.27)</p>	<ul style="list-style-type: none"> maximum four (4) weeks annually per recipient and/or spouse

Items of Special Need	Approval Criteria
Security/Damage Deposits (Policy 6.2.28)	<ul style="list-style-type: none"> • maximum one half (½) of the actual monthly rent up to the maximum allowable shelter rate for the family size and in accordance with specific criteria regarding health and safety, or movement to more economical accommodations
School Supplies Supplement (Policy 6.2.29) : <ul style="list-style-type: none"> • children ages 5 - 12 years old • children ages 13 - 18 years old • dependents ages 19 -20 in high school 	<ul style="list-style-type: none"> • \$50 per school year • \$100 per school year • \$100 per school year
Special Clothing (Policy 6.2.30) that is not covered by the provincial insured health services (MSI), private insurances and/or privately/publically funded organizations such as, but not limited to, mastectomy clothing, shoes for orthotics.	<ul style="list-style-type: none"> • most economical and subject to specific criteria
Special Diet (Policy 6.2.31)	<ul style="list-style-type: none"> • up to \$150 per person per month and per Policy 6.3.3 - (Special Diet Schedule)
Telephone for Health and Safety Reasons (Policy 6.2.32)	<ul style="list-style-type: none"> • the minimum monthly basic service charge • may approve purchase of telephone one (1) time only, when required based on most economical option
Transportation (Policy 6.2.33) for medical and employment related	<ul style="list-style-type: none"> • up to \$150 per month per recipient and/or spouse

6.3.2 Policy: Authority Levels

Approval of the cost of a special needs item, including the cost of all items that may be associated with the special needs item must comply with the following levels of authorization. Any item/service of special need that has an amount specifically listed in *Policy* must be adhered to by a caseworker.

Authority	Special Needs Items Specified in Policy Without a Specific Approval Amount
Caseworker	up to a maximum of \$200
Casework Supervisor	up to a maximum of \$1,500
District Manager	up to \$5,000 (Up to maximum of \$15,000 for wheelchairs)
Regional Administrator	\$5,000 and over

6.3.3 Policy: Special Diet Rate Schedule

Where there is eligibility for more than one (1) special diet, the special diet allowances will be added together up to the maximum of \$150 per month per applicant/recipient, spouse and dependent child.

Special Diet Rate Schedule	
Conditions Requiring Special Diet	Criteria/Approved Monthly Amounts
Cardiovascular Disease	\$27- Low Sodium, Low Salt
Celiac Disease	\$30 - Gluten Free Diets
Chronic Constipation/High Fibre Requirements	\$27 - High Fibre or High Residue
Crohn's Disease/Ulcerative Colitis	\$66
Chronic Fatigue/Fibromyalgia	\$54 - combination of High Fibre/modified fat.
Cystic Fibrosis	\$133 plus cost for supplement or additional amount specified by nutritionist.

Special Diet Rate Schedule		
Diabetes	1,000 kcalories and under	no additional funds
	1,001 – 1,200 kcalories	no additional funds
	1,201 – 1,500 kcalories	\$5
	1,501 – 1,800 kcalories	\$18
	1,801 – 2,000 kcalories	\$26
	2,001 – 2,200 kcalories	\$34
	2,201 – 2,400 kcalories	\$42
	2,401 – 2,600 kcalories	\$51
	2,601 – 2,800 kcalories	\$60
	2,801 – 3,000 kcalories	\$68
	above 3,000 kcalories	\$8 for each additional 200 kcalories
Dialysis	\$27 plus a supplement of Nepro or Supplena purchased at VGH up to \$150 per month.	
Failure to Thrive	no amount specified, up to \$150 per month. An individual assessment by a dietician is recommended. A time frame for a specific medical condition is required.	
Food Allergy - Milk/Dairy or Lactose Intolerance	less than 2 years of age	See Infant Formulas
	Funding is based on referral letter from dietician and is calculated individually. Up to \$150 per month with supervisory approval.	
Food Allergy - Wheat	Funding is based on referral letter from dietician and is calculated individually up to \$150 per month.	
Gastric/Ulcer or Bland Diets	no additional funds as treatment is based on eliminating the foods that cause distress.	

Special Diet Rate Schedule			
High Calorie/High Protein Diets (prescribed for illnesses such as, but not limited to, Cancer, or for post surgery when there has been extensive weight loss).	\$66		
HIV/AIDS - (High protein, High Calorie Diet)	3,000 kcalories	\$66	
	3,250 kcalories	\$88	
	3,500 kcalories	\$101	
Hyperlipidemia (low fat)	\$27		
Infant Formulas	Soy Formula ** (includes Isomil, Prosobee)	\$35	
	Lactose Free Formula**	\$28	
	Hypo-allergenic Formula**	Pregestimil (powder)	\$144
		Alimentum (ready to feed)	\$144
		Nutramigen	\$121
Oral Nutritional Supplements (such as, but not limited to, Ensure, Boost, Essentials, Advera, Pediasure)	actual costs up to \$150 per month. A time frame for a specific medical condition is required. An individual assessment by a dietician is recommended.		
Paraplegic Diet	\$36.50		
Reducing Diets (for purposes of weight loss or prescribed following gastroplasty)	no additional funds		

** This allowance will gradually be reduced as the child begins eating solid foods.

6.3.4 Policy: Dental Fee Guide

RATES SCHEDULE

Procedure Code	Description	General Practitioner Fee	Specialist Fee
Diagnostic			
1205	Emergency Oral Examination	\$31.20	\$42.40
1601	Surgical Consultation		\$71.20
2111	Radiographs - Single Film	\$9.60	\$23.20
2112	Radiographs B Two Films	\$12.80	\$24.80
2131	Occlusal Radiograph - Single Film	\$16.80	\$24.80
2601	Panoramic Radiograph - Single Film		\$54.40
Preventative			
11111	Scaling B one unit	\$27.20	\$59.20
11112	Scaling B two units	\$54.40	\$118.40
11113	Scaling B three units	\$81.60	\$177.60
11114	Scaling - four units	\$108.80	\$236.80
11117	Scaling - half unit	\$13.60	\$29.60
Procedure Code	Description	General Practitioner Fee	Specialist Fee
Amalgam Restorations (Non-Bonded Technique)			
	Caries/Trauma/Pain Control		
20111	• first tooth	\$60.00	\$66.40
20119	• each additional tooth (same quadrant)	\$60.00	\$66.40
	Smoothing of Fractured Surfaces		
20131	• first tooth	\$24.00	\$28.00
20139	• each additional tooth (same quadrant)	\$24.00	\$28.00
	Permanent Anterior & Premolars		
21211	• one surface	\$63.20	\$49.60
21212	• two surfaces	\$80.00	\$85.60
21213	• three surfaces	\$100.00	\$93.60
21214	• four surfaces	\$114.40	\$126.40
21215	• five surfaces or maximum surfaces per tooth	\$139.20	\$155.20

	Permanent Molars		
21221	• one surface	\$69.60	\$63.20
21222	• two surfaces	\$84.80	\$100.80
21223	• three surfaces	\$112.00	\$118.40
21224	• four surfaces	\$139.20	\$146.40
21225	• five surfaces or maximum surfaces per tooth	\$ 172.00	\$190.40
Amalgam Restorations (Bonded Technique)			
	Permanent Anterior & Premolars		
21231	• one surface	\$63.20	\$49.60
21232	• two surfaces	\$80.00	\$85.60
21233	• three surfaces	\$100.00	\$ 93.60
21234	• four surfaces	\$ 114.40	\$ 126.40
21235	• five surfaces or maximum surfaces per tooth	\$139.20	\$155.20
	Permanent Molars		
21241	• one surface	\$69.60	\$63.20
21242	• two surfaces	\$84.80	\$ 100.80
21243	• three surfaces	\$112.00	\$118.40
21244	• four surfaces	\$139.20	\$146.40
21245	• five surfaces	\$172.00	\$190.40
Retentive Pins			
21401	• one pin	\$14.40	\$25.60
21402	• two pins	\$23.20	\$ 45.60
21403	• three pins	\$26.40	\$ 56.00
21404	• four pins	\$31.20	\$ 73.60
21405	• five pins	\$37.60	\$ 85.60
Procedure Code	Description	General Practitioner Fee	Specialist Fee
Tooth Coloured Restorations			
	Permanent Anteriors		
23111	• one surface	79.20	82.40
23112	• two surfaces	92.80	99.20
23113	• three surfaces	114.40	147.20
23114	• four surfaces	152.00	192.80
23115	• five surfaces or maximum surfaces per tooth	190.40	249.60

Procedure Code	Description	General Practitioner Fee	Specialist Fee
Permanent Premolars			
23311	• one surface	93.60	82.40
23312	• two surfaces	120.00	126.40
23313	• three surfaces	159.20	151.20
23314	• four surfaces	194.40	198.40
23315	• five surfaces or maximum surfaces per tooth	222.40	244.00
Permanent Molars			
23321	• one surface	69.60	63.20
23322	• two surfaces	84.80	100.80
23323	• three surfaces	112.00	118.40
23324	• four surfaces	139.20	146.40
23325	• five surfaces	172.00	190.40
25754	Anterior Teeth only-with composite core + pins, where applicable	\$166.40 + materials	
Endodontics			
32221	Pulpotomy B permanent anterior and premolars (excluding final restoration)	69.60	123.20
33111	Root Canals, Permanent Anteriors- one canal	278.40	411.20
Procedure Code	Description	General Practitioner Fee	Specialist Fee
Prosthodontics - Removable			
Complete Dentures, Standard			
51101	• Maxillary	565.60 + LAB	
51102	• Mandibular	616.00 + LAB	
Dentures, Surgical, Standard (Immediate)			
51301	• Maxillary	567.00 + LAB	
51302	• Mandibular	617.60 + LAB	
Partial Dentures (Acrylic Base)			
52111	• Maxillary	330.40 + LAB	
52112	• Mandibular	330.40 + LAB	

Procedure Code	Description	General Practitioner Fee	Specialist Fee
52301 52302	Partial Dentures (Acrylic) • Maxillary • Mandibular	330.40 + LAB 330.40 + LAB	
Dentures, Repairs (Three Months After Insertion)			
55101 55102	Repairs, Complete Denture No Impression Required • Maxillary • Mandibular	32.80 + LAB 32.80 + LAB	
55201 55202	Repairs, Complete Denture Impression Required • Maxillary • Mandibular	59.20 + LAB 59.20 + LAB	
55301 55302	Repairs, Partial Denture No Impression Required • Maxillary • Mandibular	32.80 + LAB 32.80 + LAB	
55401 55402	Repairs, Partial Denture Impression Required • Maxillary • Mandibular	89.60 + LAB 89.60 + LAB	
56211 56212	Reline, Complete Denture • Maxillary • Mandibular	151.20 151.20	
56221 56222	Reline, Partial Denture • Maxillary • Mandibular	128.80 132.80	
56231 56232	Reline, Complete Denture (Processed) • Maxillary • Mandibular	199.20 + LAB 207.20 + LAB	
56241 56242	Reline, Partial Denture (Processed) • Maxillary • Mandibular	182.40 + LAB 201.60 + LAB	

Procedure Code	Description	General Practitioner Fee	Specialist Fee
56311 56312	Rebase, Complete Denture • Maxillary • Mandibular	199.20 + LAB 231.20 + LAB	
56321 56322	Rebase, Partial Denture • Maxillary • Mandibular	182.40 + LAB 193.60 + LAB	
Dentures, Therapeutic Tissue Conditioning			
56511 56512	Complete Denture • Maxillary • Mandibular	79.20 79.20	
56521 56522	Partial Denture • Maxillary • Mandibular	79.20 79.20	

Procedure Code	Description	General Practitioner Fee	Specialist Fee
Oral Surgery			
71101 71109	Surgical Removal of Erupted teeth: • single tooth, uncomplicated • each additional in same quadrant, same appointment	78.40 52.00	72.80 34.40
71201 71209	• complicated, requiring surgical flap • each additional in same quadrant, same appointment	155.20 103.20	180.00 180.00
72111 72119	Removal, Impacted Teeth (Requires pre-approval) • single tooth • each additional tooth, same quadrant	155.20 103.20	180.00 180.00
72311 72319	Removal, Residual Roots, Erupted • first tooth • each additional tooth, same quadrant	59.20 40.00	74.40 74.40

Procedure Code	Description	General Practitioner Fee	Specialist Fee
72321	Removal, Residual Roots, Soft Tissue Coverage • first tooth	109.60	140.80
72329	• each additional tooth, same quadrant	72.80	140.80
72331	Removal, Residual Roots, Bone Tissue Coverage • first tooth	223.20	197.60
72339	• each additional tooth, same quadrant	148.80	197.60
Alveoloplasty			
73121	Per Sextant (Requires pre-approval)	136.80	153.60
Gingivoplasty			
73211	Per Sextant	56.00	156.80
Sedation			
92431	(Requires pre-approval) One Unit of Time	52.80	
92432	Two Units of Time	105.60	

ESIA Denturist Rates Schedule

Applicants may be eligible for assistance to cover the cost of dentures when recommended by a physician or a dentist. Dentures shall be obtained by the most economical means. If dentures are provided by a denturist, then the denturist must be licensed in the Province of Nova Scotia to do so.

Procedure Code	Description	Fee
Diagnostic		
30010	New Patient Exam Complete Maxillary	48.00
30020	New Patient Exam Complete Mandibular	46.40
30030	New Patient Exam	78.40
Dentures		
31310	Complete Standard Maxillary Denture	603.20
31320	Complete Standard Mandibular Denture	693.60
31330	Complete Standard Maxillary & Mandibular Denture	1,223.20
Dentures, Reline, Direct, Completed Denture		
32210	Maxillary	173.60
32220	Mandibular	188.00

Procedure Code	Description	Fee
32230	Maxillary & Mandibular Combined	361.60
Dentures, Reline, Processed, Complete Denture		
32110	Maxillary	200.00
32120	Mandibular	220.00
32130	Maxillary & Mandibular Combined	420.00
Relines (Payable Only As Part Of A Prior-Approval)		
32318	Complete Maxillary	198.40
32328	Complete Mandibular	208.80
32338	Complete Maxillary & Mandibular	407.20
32410	Complete Maxillary	200.00
32420	Complete Mandibular	220.00
32430	Complete Maxillary & Mandibular	420.00
Denture, Rebase, Processed		
33117	Maxillary	240.00
33127	Mandibular	260.00
Denture Repairs		
36110	Complete Maxillary Repair - No Impression	46.40
36120	Complete Mandibular Repair - No Impression	46.40
36210	Complete Maxillary Repair - with Impression	68.80
36220	Complete Mandibular Repair - with impression	68.80
Tissue Conditioning, Complete Denture		
Tissue conditioning is limited to two (2) services per arch in conjunction with new dentures, relines or rebases. If dentures have been done, tissue reconditioning can only be provided to the standard dentures.		
37110	Maxillary	52.00
37120	Mandibular	52.00

Procedure Code	Description	Fee
Diagnostic		
40010	New Patient Exam - Partial Maxillary	52.00
40020	New Patient Exam - Partial Mandibular	52.00
40030	New Patient Exam - Partial Maxillary & Mandibular	88.00
Partial Dentures Acrylic Base - With Clasp		
41610	Partial Maxillary	603.20
41620	Partial Mandibular	693.60
41630	Partial Maxillary & Mandibular	1,223.20
Partial Dentures Acrylic Base - Without Clasps		
41612	Partial Maxillary	528.80
41622	Partial Mandibular	617.60
41632	Partial Maxillary & Mandibular	1,074.40

Procedure Code	Description	Fee
Relines, Processed		
42116	Partial Maxillary	208.00
42126	Partial Mandibular	222.40
RELINES - Payable Only As Part Of A Prior-Approved Treatment Plan		
42318	Partial Maxillary	204.80
42328	Partial Mandibular	220.00
42338	Partial Maxillary & Mandibular	424.80
42316	Partial Maxillary	152.00
42326	Partial Mandibular	170.40
42336	Partial Maxillary & Mandibular	322.40
Rebase, Processed		
43116	Partial Maxillary	251.20
43126	Partial Mandibular	272.80
Repairs		
46110	Partial Maxillary - No Impression	46.40
46120	Partial Mandibular - No Impression	46.40
46210	Partial Maxillary - with Impression	68.80
46220	Partial Mandibular - with Impression	68.80
Tissue Conditioning, Partial Denture		
Tissue conditioning is limited to two (2) services per arch in conjunction with new dentures, relines or rebases. If dentures have been done, tissue reconditioning can only be provided to the standard dentures.		
47110	Partial Maxillary	52.00
47120	Partial Mandibular	52.00
98888	Repairs and Additions	20.00 to 29.60

Cross Reference: [Policy 6.2.4 - \(Dental\)](#)

<u>Program Policy:</u>	Employment Support and Income Assistance	
Chapter: 7	Employability	
Section: 1	Nova Scotia Employability Assessment (NSEA), Employability Participation (EP) Coding, Referrals and Services	
Effective: August 1, 2001	<u>ESIA Regulations:</u> 2(e)(ab)(i)(E)(F) Definitions 12 Ineligibility for Assistance 17(1)(2) Regulations: Employability Assessment 18(1)(2) Employment Plan 20(1)(2) Refusal to Accept Employment 21(2) Quitting a Job 24(1) Information to be Provided 29 (2) Expenses 44 Employment Expenses	Page 1 of 5
Revised: May 1, 2012		

7.1.1 Policy: Employment Services Provided

A recipient and/or the spouse, upon the completion of the Employment Services Screening Tool and/or the Nova Scotia Employability Assessment (NSEA), where applicable, will be provided access to the most appropriate and cost-effective services that are available and necessary to implement the employment plan.

A caseworker will ensure that required services can be delivered by the Department or by community-based partners in a timely manner that is responsive to a recipient's needs and consistent with labour market trends before approving the employment plan. These services may include but are not limited to:

1. personal development services which facilitate progressions to self-sufficiency;
2. support for a recipient in the form of referrals to appropriate agencies which provide services that address a recipient's needs and goals;
3. job preparation and employment entry supports such as job development, resume preparation, workshops, employment referrals, placements, etc.;
4. skills development supports such as skill specific training and placements;
5. career development supports consistent with a career/life development model that promotes lifelong learning and encourages recipient ownership of

the process;

6. office and technology supports such as Internet access, telephone service, photocopy and mail service; and/or
7. literacy/academic upgrading programs up to and including grade 12 that meet standards recognized by the Nova Scotia Department of Education.

7.1.2 Policy: Referred for Job Search Activities

A recipient and/or a spouse who has been determined to be employable at intake based on the questions on the Employment Services Screening Tool will be referred for job search activities.

The services will be provided by the Department of Community Services or a service provider approved by DCS. Participation in employment related activities is a requirement to support ongoing eligibility for Income Assistance.

7.1.3 Policy: Referral Nova Scotia Employability Assessment (NSEA)

A recipient and/or a spouse who has been determined potentially appropriate for participation in employability activity based on the Employment Services Screening Tool will be referred for completion of the Nova Scotia Employability Assessment (NSEA).

The NSEA will be facilitated by a person certified by the Department of Community Services. Participation in the NSEA and a resulting employment plan is a requirement to support ongoing eligibility for Income Assistance.

7.1.4 Policy: File Closure - Employment Support Services

A recipient and/or the spouse of a recipient who is referred to Employment Support Services will have a file within Employment Support Services.

The Employment Support Services file will be closed if one or more of the following circumstances exist:

1. a recipient and/or spouse of a recipient becomes ineligible for Income Assistance, except in cases where ineligibility has been caused through income generated from an Employment Support Services negotiated wage subsidy placement which requires follow up;

2. a recipient and/or spouse of a recipient demonstrates that the ability to seek or maintain either employment or other employability enhancing activity is not feasible due to significant barriers in the areas of physical/mental health, personal, social, addiction or family issues, and these issues cannot be addressed through participation in Employment Support Services;
3. consultation with the Income Assistance caseworker indicates that closure is appropriate; and/or
4. a recipient and/or spouse of a recipient has demonstrated verbal or physical behaviors that have been documented and determined to be inappropriate by a caseworker and a supervisor (Employment Support Services file may remain closed for a period of six (6) weeks beginning with the next service period).

Program Policy:	Employment Support and Income Assistance	
Chapter: 7	Employability	
Section: 2	Approved Training/Educational Programs	
Effective: August 1, 2001	ESIA Regulations: 2(e) Definitions 29(2) Expenses	Page 1 of 1
Revised: March 12, 2007		

7.2.1 Policy: Approved Training/Educational Programs (Non Post-Secondary)

A recipient and/or spouse who is unable to obtain financial assistance from other sources may receive or continue to receive Income Assistance while participating in an approved training/educational program as part of an approved employment plan. Such programs may include but are not limited to:

1. literacy/academic upgrading programs up to and including grade 12 that meet the standards recognized by the Nova Scotia Department of Education;
2. high school or adult day school;
3. short term specific skill enhancement programs (e.g. First Aid, WHMIS); or
4. continuing education classes.

Educational costs (e.g. tuition, books, transportation, child care, and other employability related needs) are considered allowable expenses and may be provided through special needs [Policy 6.2.6 - \(Employability Related Special Needs\)](#) for those recipients and/or spouses of recipients attending non-student assistance eligible programs.

Program Policy:	Employment Support and Income Assistance	
Chapter: 7	Employability	
Section: 3	Post-Secondary Education (Student Assistance Eligible programs)	
Effective: August 1, 2001	ESIA Regulations: 2 (x) Definitions 67(1)(2)(3) Post-secondary Education 73 Post-secondary Education	Page 1 of 4
Revised: January 12, 2008		

7.3.1 Policy: Ineligibility for Income Assistance and Post-Secondary Education (Student Assistance Eligible programs)

An applicant/recipient and/or spouse who is attending or returning to a post-secondary educational program is not eligible for Income Assistance and they must pursue other feasible sources of income (e.g. Student Assistance).

An applicant/recipient and/or spouse who indicates an interest in pursuing a post-secondary educational program will be referred to the Nova Scotia Student Aid program.

7.3.2 Policy: Eligibility for Income Assistance and Post-Secondary Education (Student Assistance Eligible programs)

A recipient and/or spouse who meet the criteria of one of the following circumstances is eligible to receive Income Assistance as an exception to the Post-Secondary Education Policy.

Circumstances:

1. is approved under the Labour Market Agreement for Persons with Disabilities (LMAPWD) program. This program is for adults with vocational handicaps and is funded by Human Resources Development Canada in partnership with the Government of Nova Scotia; or
2. is approved under the Career Seek Pilot Project [Policy 7.3.3 - \(Participation in Career Seek Pilot Project\)](#); or
3. was receiving Family Benefits on April 30, 2000 and commenced a post-secondary educational program prior to September 30, 2001; or
4. has been the subject of an employability assessment that recommends that a recipient attend a post-secondary education program of two (2) years or

less and they have been assigned a seat under a skills development program for adults funded in partnership between the Federal and Nova Scotia Governments; or

5. has been the subject of an employability assessment that recommends that a recipient attend a post-secondary education program of two (2) years or less; has pursued other feasible sources of income but they are not available or are insufficient; has been in receipt of income assistance for at least six (6) months immediately prior to attending the post-secondary educational program and is available for work when not involved in the post-secondary educational program.

Under this exception, Income Assistance will only be provided to support the completion of programs at an undergraduate level. Income Assistance will not be provided for the payment of tuition, school books or student fees unless part of a partnership agreement.

7.3.3 Policy: Participation in the Career Seek Pilot Project

A recipient and/or spouse may apply to attend a post-secondary program of study through the Career Seek Pilot Project. In order to be found eligible for Career Seek, a recipient and/or spouse must meet the following criteria:

1. is currently in receipt of Income Assistance and has been in receipt of Income Assistance for six (6) consecutive months at the time of application; or
2. is currently in receipt of Income Assistance and has a cumulative total of twelve (12) months in receipt during the period of five (5) years prior to date of application;
3. is unable to attach to the labour market with current skills and education, and this has been verified through the development of the Nova Scotia Employability Assessment (NSEA) Action Plan;
4. is requesting to engage in a post-secondary program that facilitates connection to the labour market upon completion; and
5. demonstrates capability to pay for costs related to tuition, textbooks, student fees, child care and transportation for the duration of the program (through Student Assistance, grants, scholarships, family contributions).

All recipients and/or spouse who wish to submit an application to Career Seek are eligible to submit that application. The Regional Selection Committee will review all

applications and render a decision regarding eligibility in writing to the recipient and the caseworker.

7.3.4 Policy: Career Seek Pilot Project

7.3.4(a) Policy: Career Seek Pilot Project Program Benefits

A recipient who has been found eligible to participate in Career Seek will receive financial support for shelter and personal allowances provided through Income Assistance and based on the Employment Support and Income Assistance (ESIA) rates provided that a recipient continues to meet the basic eligibility criteria for Income Assistance.

The length of time required to complete the program of study will be negotiated between the Department of Community Services and a recipient using the Return to Work Action Plan. Support to participate in Career Seek is not to exceed a total maximum of six (6) school years. The Minister (or designate) may approve extensions for a program completion in extenuating circumstances.

7.3.4 (b) Policy: Education Programs Supported through Career Seek

Support will be provided for undergraduate degree programs only. A second degree will be supported in cases where the first degree may be considered a pre-requisite to further study, or where a recipient is enrolled in a concurrent degree program. Under no circumstance will Career Seek provide support for graduate, master or doctoral level programs.

Support may be provided for recipients who already have education or training at a post-secondary level if a recipient has been unable to secure a job using that education or training. The reasons for not attaching to the labour market must be verified through the development of the Return to Work Action Plan.

7.3.4(c) Policy: Case Planning for Career Seek

A case plan will be created in consultation between a recipient and the Employment Support Services caseworker. The plan should result in each Career Seek participant carrying the number of courses that will ensure completion of the program of study within the allowable time frame, but respects the distinct needs of the individual's family, learning and health situation as identified in the Nova Scotia Employability Assessment (NSEA).

7.3.4 (d) Policy: Expectations of Participants in Career Seek

To remain eligible for support through the Career Seek program, participants must:

1. complete the Nova Scotia Employability Assessment;
2. develop a case plan with the Department of Community Services that outlines the type of program to be taken, number of courses to be carried, length of time to complete the program, and what the participant's plans are for employment after graduation;
3. provide transcripts to the Employment Support Services caseworker at the end of the first semester and at the end of the academic year;
4. schedule and attend an appointment to meet with the Employment Support Services caseworker before beginning each new semester of study;
5. be available to and participate in work experience programs or other forms of employment that would support the program of study and career goal during the non-study periods;
6. complete the program of study within a maximum period of time as agreed upon in the Return to Work Action Plan;
7. notify the Employment Support Services caseworker of any changes in circumstances including changes to course load, program of study, career path or ability to pay for all costs related to tuition, textbooks, student fees, child care and transportation; and
8. successfully complete a minimum of 80% of the course credits carried per academic year.

Program Policy:	Employment Support and Income Assistance	
Chapter: 7	Employability	
Section: 4	Self-Employment and Entrepreneurship	
Effective: August 1, 2001	ESIA Regulations:	Page 1 of 3
Revised: March 12, 2007		

7.4.1 Policy: Self-Employment and Entrepreneurship

A recipient and/or the spouse who becomes engaged in a new self-employment activity, as part of an approved employment plan, may be eligible for Income Assistance (IA) for a period of six (6) months for business plan development and up to a maximum of eighteen (18) months during the period of operation of the business. Approval for self-employment is contingent on an assessment and approval from an approved 3rd Party Delivery Agent. A recipient and/or spouse must agree to engage in a plan with this approved 3rd Party Delivery Agent.

The Employment Support Services (ESS) caseworker will:

Phase 1: (Assessment phase)

1. conduct the Preliminary Entrepreneurial Assessment. If the recipient is recommended to pursue entrepreneurship based on this assessment, then refer the recipient and/or the spouse, who indicates an interest in entrepreneurship, for a 3rd party entrepreneurial skills assessment by an approved 3rd Party Delivery Agent; and
2. use the 3rd Party Delivery Agent's recommendation based on their findings of the 3rd party entrepreneurial skills assessment to make a decision regarding the appropriateness of entrepreneurship as an employment-related activity for the purpose of ongoing eligibility.

Phase 2: (Business plan development, training and access to financial resources phase)

1. refer the recipient and/or the spouse who is determined appropriate for entrepreneurship to an approved 3rd Party Delivery Agent for support with their business start up including the appropriate mix of training, business plan development and loans/access to lenders;

2. notify the 3rd Party Delivery Agent, the recipient and/or the spouse that supports for assessment, training and business plan development will be provided for a maximum of six (6) months. Phase 2 shall not exceed six (6) months;
3. ensure that eligible employment-related special needs, child care and transportation costs are included in the budget. (Costs to support the business including but not limited to, fax machines, business cards, computers, are considered costs of the business and are not eligible employment related special needs.); and
4. if the 3rd Party Delivery Agent, recommends that the recipient's business would lead the recipient to be self-supporting within the twelve (12) month period then approval is given to proceed to Phase 3.

Phase 3: (Business start up, aftercare and monitoring phase)

1. refer the recipient and or spouse for the aftercare and monitoring by an approved 3rd Party Agency;
2. disregard the net income from business for up to twelve (12) months from the start date of Phase 3 (aftercare and monitoring) provided the recipient or spouse does not draw a salary or wages from the business. If a salary or wage is drawn from the business by the recipient or spouse, it is chargeable income and will be considered in determining eligibility for Income Assistance. If the 3rd Party Delivery Agent recommends the ending of the "Disregard of the Net Income from business" before the twelve (12) month period ends, this recommendation should not compromise the recipient's ability to be successful;
3. ensure that the 3rd Party Delivery Agent provides an income reporting schedule every three (3) months from the date of referral;
4. consider the recommendation of the 3rd Party Delivery Agent regarding continuation of income assistance based on the viability of the operating business;
5. create an appropriate "bring forward system" to ensure that reports are received in a timely fashion;
6. meet with the 3rd Party Delivery Agent, the recipient and the Employment Support and Income Assistance (ESIA) caseworker(s) during the aftercare and monitoring as required;

7. evaluate by the 15th day of the 12th month of operation, the viability of the business to enable the recipient and/or spouse to be self-supporting, by considering the recommendation of the 3rd Party Delivery Agent, the opinion of the recipient and the ESIA caseworker(s);
8. if the collective opinions of the 3rd Party Delivery Agent, the recipient and the ESIA caseworker(s) determine that the business will not enable the recipient and/or spouse be self-supporting by the 12th month of operation, the following should occur:
 - a. make a recommendation to extend the “Disregard of the Net Income from business” period for up to another six (6) months - not to exceed a total of eighteen (18) months from the beginning of Phase 3 (date business became operational). This decision should be documented in the ESIA case notes and/or case conferencing notes.

or

 - b. inform the recipient and/or that they are required to return to other-related employment activity; and
9. if based on the collective opinions of the 3rd Party Delivery Agent, the recipient and the ESIA caseworker(s) (IA and ESS), that the recipient will not be fully self-supporting within the “Disregard of the Net Income from Business” period, a recommendation will be made requiring a return to other related employment activity.

Program Policy:	Employment Support and Income Assistance	
Chapter: 7	Employability	
Section: 5	Parental Leave from Employability Activity	
Effective: August 1, 2001	ESIA Regulations:	Page 1 of 1
Revised: March 12, 2007		

7.5.1 Policy: Parental Leave from Employability Activity

Where a recipient or the spouse gives birth to a child/or adopts a new child, a recipient or the spouse will be exempted from participation in employability related activity for a period of twelve (12) calendar months from the date of the birth of the child/or adoption of new child.

A recipient or spouse may be permitted to split this exemption, based on an approved case plan, to a maximum total of twelve (12) calendar months from the date of the birth of the child/or adoption of a new child. If the exempt recipient or spouse self identifies as being interested in participating in employability activity within the first twelve (12) months of the new child's life/or from the date of adoption, the appropriate assessment and services will be offered, but ongoing eligibility for Income Assistance will not be linked to participation in employability activity until the child reaches 13 months of age/or the first year from the date of adoption.

Program Policy:	Employment Support and Income Assistance	
Chapter: 8	Overpayment, Underpayments and Recovery	
Section: 1	Overpayment, Underpayments and Recovery	
Effective: August 1, 2001	ESIA Regulations: 68 Recovery of Overpayments 69 Underpayments	Page 1 of 4
Revised: December 31, 2010	ESIA Act: Act 3(f), 14 (1,2,3,4,5) 15	

8.1.1 Policy: Overpayments

An applicant/recipient will be determined to have an overpayment where a applicant/recipient received Income Assistance that was:

1. paid in error;
2. overpaid; or
3. paid based on false or misleading information supplied by an applicant/recipient.

Overpayments include deferred/retroactive income paid to a recipient, spouse and/or dependent child with respect to any period for which Income Assistance was previously provided. This includes situations where a recipient and/or spouse has agreed that the income is to be repaid from the proceeds of a deferred sale, an asset, or from another identified deferred income source (examples include, but not limited to, Employment Insurance Benefits, Canada Pension Plan, etc.).

When a special need item/service has been previously issued, or included in the determination of eligibility by being calculated in the budget deficit, up to the allowable maximums prescribed in *Regulations*, the amount issued for the requested special need item/service (such as, but not limited to, fuel, electricity, water, etc.), will result in the establishment of an overpayment. [Policy 6.1.3 - \(Overpayment Related to Special Needs\)](#)

Special need items/services are approved based on allowable maximum rates. Assistance with a special need item/service, in excess of the approved Income Assistance rate(s), will result in the establishment of an overpayment, unless the Supervisor approves a higher amount based on specific criteria [Policy 6.1.5 - \(Supervisory Determination of Higher Amount for a Special Need Item/Service\)](#).

When an overpayment is greater than \$10,000 and involves non-disclosure, the overpayment must be reviewed.

Where the overpayment(s) were paid are as a result of administrative error and a recipient and/or spouse made every reasonable effort to advise their assigned caseworker of the error, the recovery of the overpayment(s) will be limited to the most recent six (6) months for which the higher amount was paid.

Every reasonable effort will be made to recover overpayments. An overpayment can be recovered from a recipient and/or spouse to whom it is paid, or from the estate of a recipient and/or spouse. The Minister is entitled to use any legal recourse to recover overpayments from recipients.

When a person is no longer in receipt of Income Assistance, the Prevention, Detection and Revenue Unit, Department of Community Services may refer overpayments to a third party for collection activity.

Staff of the Prevention, Detection and Revenue Unit, Department of Community Services may refer overpayments to a third party for collection activity.

8.1.2 Policy: Recovery from Income Assistance

When an overpayment is to be recovered from a recipient of Income Assistance, the amount may be recovered from the Income Assistance otherwise payable to that recipient. The amount to be recovered will normally be a minimum of \$15 and a maximum of \$45 per month.

The repayment amount can be increased to more than \$45 with a recipient's written consent.

In situations where a recipient is requesting a reduction in the recovery amount because of extraordinary circumstances, this request will be reviewed by a caseworker and approved by a supervisor.

For applicants/recipients and/or former recipients whose overpayments have been assigned to external collections and they are requesting a reduction in the recovery amount, they will be referred to the external collectors for review.

8.1.3 Policy: Splitting Overpayments

A recipient who separates from his/her spouse will maintain the remaining balance of any overpayment incurred while a recipient and spouse received Income Assistance as a couple.

Overpayments will only be split when the portion of the overpayment can be determined to be the specific responsibility of a recipient or the spouse.

A person with an outstanding overpayment who becomes the spouse of a different recipient will have the remaining balance of their overpayment transferred to the new case for recovery.

8.1.4 Policy: Waiver of Overpayments

Clients may submit requests to have their overpayments waived. Prior to any recommendation with respect to waiving, a reduction of the recovery amount must be explored. Waiving an overpayment will be considered in the following situations:

1. the client is deceased;
2. the client is bankrupt;
3. the client is permanently absent from the Province;
4. the client has been ineligible to receive assistance for a period of six (6) or more years and no recovery activity has been commenced on an overpayment during the same period;
5. the collection of the overpayment would create undue hardship (only ineligible clients); or
6. the collection of the overpayment would be contrary to the purpose of the *Act* (only ineligible clients).

If staff recommends approving a request, it is forwarded to the Minister/Designate for consideration.

8.1.5 Policy: Underpayments

Where recipient receives less Income Assistance than they are eligible to receive, through no fault of their own, the underpayment will be calculated for the most recent six (6) months for which the lesser amount was paid.

8.1.6 Policy: Bankruptcy

The Employment Support and Income Assistance program adheres to the *Bankruptcy and Insolvency Act*.

Program Policy:	Employment Support and Income Assistance	
Chapter: 9	Pharmacare	
Section: 1	Pharmacare	
Effective: August 1, 2001	ESIA Regulations: 2(ab) Special Need 62 Pharmacare Assistance 63 Co-pay 64(1)(2) Extended Pharmacare 65 Transitional Pharmacare 78, 79 Pharmacare	Page 1 of 4
Revised: May 1, 2012		

9.1.1 Policy: Pharmacare

[Pharmacare](#) benefits may be granted to eligible recipients and/or spouse and dependents in receipt of Income Assistance. Any recipient and/ or spouse and dependents having access to another drug plan, from a public (does not include Nova Scotia Family Pharmacare or Low Income Pharmacare for Children) or a private entity, may be required to use that plan and may not be eligible for Pharmacare benefits. There may be eligibility for a reimbursement of the co-payment amounts that exceed \$5.00 per prescription provided the medication/supply is a benefit under the [Nova Scotia Formulary](#). [Policy 6.2.24 – \(Prescription Drug Coverage\)](#).

Only those medications/supplies and the approved amount included in the Nova Scotia Formulary can be considered. Requests for assistance with prescription drug coverage that is not included in the Nova Scotia Formulary will not be approved as a special needs item. [Policy 9.1.3 – \(Exception Drug Status\)](#). Receipts verifying the co-payments from the pharmacy or private health plan are required.

Recipients and/or their spouses and dependents are required to pay a flat co-pay fee of \$5.00 per prescription, unless recipients and/or their spouses and dependents is/are eligible for co-pay exemption as per [Policy 9.1.4 – \(Co-Pay Exemptions\)](#).

Recipients and/or spouse and their dependents requiring Pharmacare coverage must provide their Nova Scotia Health Card Number (HCN).

Where Pharmacare benefits have been provided to a recipient is discontinued because the total chargeable income of a recipient exceeds the total allowable expenses, a recipient may be eligible for Extended or Transitional Pharmacare if they meet the specific criteria for [Policy 9.1.5 - \(Extended Pharmacare\)](#) or [Policy 9.1.6 – \(Transitional Pharmacare\)](#).

[Pharmacare](#) benefits may be granted to eligible recipients and/or their spouses and dependents in receipt of Income Assistance. Any recipient and/or spouse and their dependents having access to another drug plan, from a public or private entity, will be required to use that plan and will not be eligible for Pharmacare benefits.

Pharmacare benefits are provided in accordance with the contracted service, only. Requests for assistance with prescription drug coverage that is not included in the approved formulary will not be approved as a special needs item. Only those medications/supplies and the approved amount included in the [Nova Scotia Formulary](#) can be considered. All Income Assistance recipients and/or their spouses and dependents are required to pay a flat co-pay fee of \$5.00 per prescription, unless recipients and/or their spouses and dependents is/are eligible for co-pay exemption.

All recipients and/or their spouses and dependents requiring Pharmacare coverage must provide their Nova Scotia Health Card Number (HCN).

Where Pharmacare benefits have been provided to a recipient is discontinued because the total chargeable income of a recipient exceeds the total allowable expenses, a recipient may be eligible for Extended Pharmacare if they meet the specific criteria. [Policy 9.1.5 - \(Extended Pharmacare\)](#)

9.1.2 Policy: Pharmacare Coverage

Pharmacare coverage will be effective immediately or on the first day of the subsequent month following the determination of eligibility for Income Assistance for recipients and/or their spouses and dependents, where Pharmacare (prescription drug coverage) is not available from an employer or from some other source. When cases are deemed ineligible, Pharmacare coverage will normally be terminated on the last day of that month, however, where warranted, Pharmacare coverage may be terminated immediately.

Pharmacare coverage is accessed by use of the Nova Scotia Health Card Number (HCN). Only those pharmacies that have on-line access to Medavie Blue Cross can be utilized.

The maximum supply of an eligible product to be dispensed at any one (1) time by a pharmacy is one hundred (100) days.

9.1.3 Policy: Exception Status Drugs

The Department of Community Services Pharmacare benefits are administered by the Department of Health and Wellness. The [Community Services Pharmacare](#)

benefits adhere to the [Nova Scotia Formulary](#). This list provides access to approved drugs, biological and related preparations, diabetes, and ostomy supplies.

If a recipient is prescribed or requesting a drug that is not a benefit on the Nova Scotia Formulary, a recipient should be advised to have their physician request approval through Pharmacare for coverage by submitting the appropriate Department of Health and Wellness documentation. Certain drugs are only eligible for coverage when an individual meets the criteria developed by the Department of Health and Wellness. These drugs may be approved by the Department of Health and Wellness as [exception status drugs](#).

Those drugs that are not approved as benefits under the Nova Scotia Formulary, or drugs not approved for exception status drug coverage must not be covered under special needs under any circumstances.

9.1.4 Policy: Co-pay Exemptions

Individual recipients may be considered co-pay exempt under the following circumstances:

1. there is the existence of a disability; or
2. multiple monthly prescriptions (more than three (3) per person); or
3. a small dosage amount specified in the prescription, which is to be taken on a frequent basis.

9.1.5 Policy: Extended Pharmacare

Where Pharmacare benefits that have been provided to a recipient is discontinued because the total chargeable income of a recipient exceeds the total allowable expenses, a recipient may be eligible for Extended Pharmacare if a budget deficit exists when the average monthly drug costs are included as an expense in the determination of eligibility for Income Assistance.

Once eligibility for Income Assistance Extended Pharmacare benefits has been established, the average monthly drug costs are not to be included in the budget calculation when assessing eligibility for any other special needs. When conducting the assessment for other items/services of special need, the average drug costs are to be excluded from the calculation of the budget deficit to provide an accurate reflection of the eligibility for the requested item/service.

9.1.6 Policy: Transitional Pharmacare

Recipients and/or spouses of recipients, who are determined to be ineligible for Income Assistance due to employment income, may be provided Transitional Pharmacare coverage for one (1) year from date of discontinuation of Income Assistance regardless of the date of activation.

Recipients may request activation of Transitional Pharmacare benefits any time in the twelve (12) month period after ineligibility is established due to ineligibility from employment income.

Recipients who are ineligible for Income Assistance for reasons other than employment and who secure employment at a later date are not eligible for Transitional Pharmacare benefits.

Transitional Pharmacare will only be provided when the cost of drugs is not available from any other source including, but not limited to, a drug plan from the place of employment of a recipient or a recipient's spouse. Recipients must provide information respecting their new work situation, including available benefits.

Recipients are not limited to the number of times they can receive Transitional Pharmacare benefits.

Cross Reference:

[Policy 6.1.6 - \(Individuals not in Receipt of Income Assistance\)](#)

Program Policy:	Employment Support and Income Assistance	
Chapter: 10	Children's Allowances	
Section: 1	Nova Scotia Child Benefit Program	
Effective: August 1, 2001	ESIA Regulations: 74, 75, 76 Nova Scotia Child Benefit	Page 1 of 3
Revised: March 12, 2007		

10.1.1 Policy: Children's Benefits

Benefits for Nova Scotia children in all low-income families, including those in receipt of Income Assistance, are administered through the tax system. By filing an annual income tax return and completing a Canada Child Tax Benefit (CCTB) application, eligible families may receive these benefits. The CCTB consists of a base amount, the National Child Benefit Supplement (NCBS), the Nova Scotia Child Benefit (NSCB) and, if applicable, the Child Disability Benefit (CDB). These benefits are income based.

In circumstances where families in receipt of Income Assistance are receiving less than \$133 per child through a combination of the NCBS and the NSCB, Income Assistance may provide temporary benefits (up to three (3) months, or until the family receives the NCBS/NSCB).

10.1.2 Policy: Child Benefit Adjustment (CBA)

Families in receipt of Income Assistance with children under the age of 18 may request a Child Benefit Adjustment (CBA). This payment may be issued by Income Assistance when a family does not receive the National Child Benefit Supplement (NCBS) and the Nova Scotia Child Benefit (NSCB) equal to \$133 per child. An applicant/recipient and/or spouse may request an assessment to determine eligibility to receive CBA.

To receive a CBA payment an applicant/recipient and spouse will:

1. request an assessment for CBA eligibility;
2. be eligible for Income Assistance and receive a basic Income Assistance payment for the same month(s) they are requesting CBA;
3. ensure their income tax returns are filed up to date with Canada Revenue Agency (CRA) for an applicant/recipient and spouse;

4. provide CRA with their current address;
5. notify CRA when there has been a change in marital status in excess of 90 days and they have completed a 'Marital Status Change' form RC65;
6. apply for the Canada Child Tax Benefit (CCTB) for all dependent children. An applicant/recipient and spouse must make application for the Canada Child Tax Benefit. In addition to filing an up to date Income Tax Return, families must apply for children's benefits. Form 'RC66 Canada Child Tax Benefit Application' must be submitted to CRA for application for children's benefit;
7. be recognized as the primary care giver with CRA to receive consideration for the children's benefits;
8. provide completed and correct information to CRA to advise changes in family circumstances (e.g. marriage, separation, or a new partner and address);
9. advise the worker if they or their spouse and dependent are immigrants and provide information of action taken to secure permanent Canadian Residency;
10. advise the worker of any changes in their Social Insurance Number (SIN) or their spouse's SIN, including status of a temporary SIN number; and
11. comply with CRA's request for information (e.g. completing a questionnaire).

If an applicant or recipient and spouse has requested a CBA assessment and meet the above criteria, CBA may be issued according to the following guidelines:

1. CBA will be calculated separately for each child, based on the number of children as recorded by CRA, unless the number of children declared for income assistance purposes is lower. In situations where a family is receiving partial payments but receives more than \$133 for one (1) child and less than \$133 for each subsequent child, the excess for the first child will not be used to reduce the adjustment for the other children;
2. payments will be prorated from the date of the child's birth or the date the child returned home to determine the amount of CBA. CBA will be issued for a maximum period of three (3) months;
3. clients may be eligible to receive a CBA payment when a family's income for the prior tax year disqualifies the family for the NCBS and the NSCB;

4. a recipient or spouse who has a change in marital status (separation) and the family is receiving the NSCB totaling less than \$133 per month per child may receive a CBA payment. This payment may be issued for a maximum period of nine (9) months from the date of the initial CBA payment; and/or
5. a family who is not receiving the equivalent of \$133 per month, per child, due to the birth of a child(ren) or a child(ren) returning to the family from an agency/foster parent or from another family situation may receive CBA.

10.1.3 Policy: Child Benefit Adjustment (CBA) Eligibility for Refugee Claimants

Families who are refugee claimants and in receipt of Income Assistance with children under the age of 18 may request a Child Benefit Adjustment (CBA), [Policy 10.1.2 - \(Child Benefit Adjustment\)](#). Refugee claimants who do not meet Canada Revenue Agency (CRA)'s eligibility criteria because of their immigration status are not able to apply for the Canada Child Tax Benefit (CCTB). Although a work permit and temporary Social Insurance Number (SIN) prefixed by the number nine (9) may have been issued, an application for CCTB can only be made after refugee protection or permanent residency has been granted.

In these situations, Income Assistance may provide temporary benefits, in excess of three (3) months or until the family receives the National Child Benefit Supplement (NCBS) and the Nova Scotia Child Benefit (NSCB), because the immigration process may exceed three (3) months.

10.1.4 Policy: Child Benefit Adjustment (CBA) Repayment

When a recipient and/or spouse receives a retroactive payment for the National Child Benefit Supplement (NCBS) and the Nova Scotia Child Benefit (NSCB) as a result of a Canada Revenue Agency (CRA) assessment for the same period a Child Benefit Adjustment (CBA) is issued from Income Assistance, an overpayment will be assessed and there will be a requirement for repayment.

In situations where a recipient and/or spouse are found ineligible to receive Income Assistance and are assessed with an overpayment for a specific period, the amount of CBA issued during that period will also be included in the calculation of the overpayment.

Program Policy:	Employment Support and Income Assistance	
Chapter: 11	Prevention and Detection	
Section: 1	Eligibility Review	
Effective: August 1, 2001	ESIA Regulations:	Page 1 of 1
Revised: March 12, 2007	ESIA Act: Act 4(2), 19 (1) (2) (3) (4) (5)	

11.1.1 Policy: Eligibility Review

Applicants/recipients of Income Assistance may have their case information reviewed by the Eligibility Review program when it is alleged an applicant/recipient may not be eligible to receive all or a portion of the Income Assistance payment(s)/service(s). Complaints can be received from the general public or initiated by a caseworker.

Applicants/recipients may be referred to the Eligibility Review program for one or more of the following reasons:

1. an applicant/recipient is alleged to be cohabiting, which is contrary to the information provided;
2. an applicant/recipient is alleged to be in receipt of undeclared income (including, but not limited to, employment earnings, Employment Insurance benefits, pension or insurance payments, and/or assistance from another province);
3. an applicant/recipient is alleged to have either excess assets or undeclared assets;
4. an applicant/recipient appears to have misrepresented their family situation, for example, dependent child change; or
5. an applicant/recipient appears to be living beyond his/her means.

Program Policy:	Employment Support and Income Assistance	
Chapter: 12	Administrative Reviews and Appeals	
Section: 1	Administrative Reviews and Appeals	
Effective: August 1, 2001	ESIA Regulations:	Page 1 of 6
Revised: December 1, 2008	ESIA Act: Act 12(1)	

12.1.1 Policy: Definitions

In these policies and procedures:

1. “**Act**” means the *Employment Support and Income Assistance (ESIA) Act*.
2. “**Advocate**” means any person who assists and/or represents an appellant during the appeals process.
3. “**Appellant**” means an applicant/recipient who has filed an appeal or who has had an appeal filed on their behalf under the *Employment Support and Income Assistance Act*, or the *Social Assistance Act*, such as the Services for Persons with Disabilities program.
4. “**Caseworker**” means the person who has made the initial decision on behalf of the Department and communicated this decision to an applicant/recipient.
5. “**Coordinator**” means the person responsible for coordinating appeals in a region.
6. “**Days**” means calendar days (See [Policy 12.1.8 - \(How to Interpret Dates\)](#)).
7. “**Supervisor**” means the person who is responsible for conducting the administrative review as designated by the Minister in pursuant to *Sec4(2) of the Act*.

12.1.2 Policy: Right to Appeal

Any person who applies for or receives Employment Support and Income Assistance or who applies or receives assistance under the Services for Persons with Disabilities programs, has the right to have any decision made by the Department of Community Services reviewed and appealed if dissatisfied with the decision concerning the application. The Legislative Authority is established under

the *ESIA Act*, sec 12(1), and the *Social Assistance (SA) Act*, sec 19 “...may appeal any decision...”

With respect to Homes for Special Care and other programs under the Services for Persons with Disabilities program, only issues of financial eligibility related to a needs test are subject to an administrative review and appeal hearing by an Appeal Board under the *Employment Support and Income Assistance Appeal Regulations*. Appeals of Homes for Special Care and other programs under the Services for Persons with Disabilities program that are based on disputed level of care are referred to Appeal Board hearings under the *Homes for Special Care Act and Regulations*.

12.1.3 Policy: Notification of Right to Appeal

Legislative Authority; *ESIA Act* sec 7(2)(v) “advise the applicant..”

A caseworker will notify the applicant/recipient in writing of the decision made and of their right to appeal that decision. A pamphlet that defines the steps to appeal in plain language that includes an application for appeal form will accompany the decision.

A caseworker will make reasonable efforts to give the applicant/recipient explanation of the *Legislation, Regulations and Policy* as well as the factual basis for the decision. This provides the opportunity for all parties to review and understand the rationale behind a decision prior to an appeal being filed.

12.1.4 Policy: Filing an Appeal

Legislative Authority; *ESIA Act* sec 12(3) “...within thirty days...”

If an applicant/recipient wishes to appeal, they must submit a written application for appeal to their caseworker within thirty (30) days of the original decision having been communicated to them.

Procedures for filing an appeal:

1. an applicant/recipient shall make a written application for an appeal making sure to include; the decision being appealed, the reason for the appeal as well as their signature, date, address and telephone number if applicable;
2. to assist an applicant/recipient, who wishes to appeal, a pamphlet is available at each office outlining the steps, and includes the form to be completed. Where appropriate or if required, a caseworker should assist an applicant/recipient; and

3. applications will be accepted up to forty-five (45) days from communication of the decision. Any person wishing to submit an application for appeal beyond forty-five (45) days must have their extenuating circumstances reviewed by the Regional Administrator within six (6) months of the original decision. Extenuating circumstances refer to reasons beyond the client's control such as being in the hospital or redirected mail.

12.1.5 Policy: Administrative Review

An Administrative Review is a meaningful, thorough and objective review that provides an opportunity for the original decision to be upheld, overturned or varied. The person conducting the Administrative Review is independent of the original decision and will ensure the decision being appealed is consistent with the *Legislation, Regulations and Policy*, and that the appellant's case is given a fair and timely review.

Legislative Authority; ESIA Act sec 4(2) "The Minister may..."

A caseworker's immediate supervisor will conduct the administrative review unless they had been closely involved with the case decision, in which case an alternate supervisor or the next level of supervision will conduct the review.

Legislative Authority; ESIA Act sec 12(4) "The Minister shall..."

Within ten (10) days of receiving notification of an appeal, the administrative review must be conducted and the appellant informed of the decision. Compliance with the ten (10) day requirement will be monitored through program management.

Legislative Authority; ESIA Act sec 12(5) "Within ten days..."

When the decision of a caseworker is upheld, and an appellant has been advised of the outcome in writing, an appellant will have ten (10) days to respond in writing to request to continue the appeal hearing. Continuation of appeal forms will be accepted up to twenty (20) days. An appellant who wishes to continue with the appeal after twenty (20) days must have their extenuating circumstance reviewed by the Regional Administrator within six (6) months of the original decision.

If an appellant does not respond within the given time frame, the Department will record that an appellant accepts the outcome of the review. Once an appellant withdraws an appeal it is closed and cannot be reopened.

12.1.6 Policy: Notification of Appeal Hearing

Assistance Appeal Regulation 9(1) "...shall hear and render..."

In the event that the appellant continues with the appeal, the regional office will coordinate the appeal and send notification of the date, time and place of the hearing by registered mail to the appellant ten (10) days prior to the hearing. The regional office will also provide documentation for the Appeal Board.

Assistance Appeal Regulation 11(1) "Appellant may..."

If an appellant wishes to have a hearing but cannot attend due to extenuating circumstances, they can either request that the appeal hearing be rescheduled or indicate that they would like the option of a hearing utilizing the telephone.

Assistance Appeal Regulation 11(2) "Where the appellant..."

The appellant shall be notified that if they do not attend the hearing or send a representative, the appeal will be heard in their absence unless they have requested an alternative date.

12.1.7 Policy: Right to Representation

Assistance Appeals Regulation; sec 11(1) "The appellant may..."

Persons appealing have the right to be represented by an advocate throughout the appeals process. Prior to appeal information being sent to a representative, the Department should obtain consent, preferable written, from the appellant to discuss their case with an advocate acting on their behalf.

Procedures for appeals involving representatives:

1. the Department will ask the appellant if they have any documentation to submit to the Appeal Board or Department and if they have witnesses to present, prior to the hearing;
2. in lieu of attending the hearing, the appellant may send a representative to the appeal hearing who will provide the Chairperson or Vice Chairperson with written proof that the appellant authorizes them to represent the appellant at the hearing;
3. if counsel is representing the appellant at the hearing, the person responsible for coordinating appeals for the Region will send a copy of the appeals report to the representative, provided they are admitted to the bar. If the representative is an articled clerk, the Department should send the appeals

report to the principal as well or confirm that the clerk is acting on their behalf;

4. the person responsible for coordinating appeals for the region will also identify and schedule who will represent the Department at the appeals hearing;
5. if counsel is required to represent the Department, the person responsible for coordinating appeals for the region will consult with the Department of Justice to engage counsel.

12.1.8 Policy: How to Interpret Dates

When calculating dates as defined in *Legislation, Regulations and Policy*, they will be calculated according to the *Interpretation Act*.

Legislative Authority; Interpretation Act sec. 19(k) "Where the time limit for the doing of any act expires or falls upon a holiday, the time so limited extends to and the act may be done on the first following day is not a holiday;"

Legislative Authority; sec 7(j) "'holiday' includes Sunday, New Year's Day, Good Friday, Canada Day, Christmas Day, the birthday or the day appointed for the celebration of the birth of the reigning Sovereign, Victoria Day, Labour Day, Remembrance Day and any day appointed by any statute in force in the Province or by proclamation of the Governor General or of the Lieutenant Government as a general holiday or for general fast or thanksgiving, and whenever a holiday other than Remembrance Day falls on a Sunday the expression holiday includes the following day;"

The person conducting the review will follow this procedure:

1. the date a decision is communicated or an application for an appeal is received is not counted as the start date for the required time line. Time line for completion commences on the day following communication;
2. if the due date falls on a Saturday, work must be completed by the preceding Friday;
3. if the due date falls on a Sunday, work is due on the following Monday; or
4. if the due date falls on a holiday, work is due the next day which is not a holiday.

12.1.9 Policy: Information about the Appeal Board

Legislative Authority, sec 13 & Regulations sec 4, 6, 7, 8, 9, 10 11, 12, 13

Legislation and regulations govern the Appeal Board. The Appeal Board is established by the Minister pursuant to section 11 of the *Employment Support and Income Assistance Act*. There are five (5) boards for the province. The Minister shall designate one (1) member of an appeal board to be the Chairperson of the board and all other members to be Vice-Chairpersons. The quorum of an appeal board is one (1) member. Members of the Appeal Board will attend such training, as the Minister considers necessary.

Member(s) of the Appeal Board will be selected for appeal hearings based on rotation within each region.

The Appeal Board shall hear and render a decision within forty-five (45) days of the date of the appellant's rejection of the decision of the administrative review. Once the hearing is held, the Appeal Board has seven (7) days to render its decision. If an appellant is dissatisfied with a decision of the Appeal Board, their next level of appeal would be to the Supreme Court of Nova Scotia.

EMPLOYMENT SUPPORT AND INCOME ASSISTANCE POLICY MANUAL
Department of Community Services

Appendix: 1
Section: Acronyms

Issued: August 1, 2001
Revised: May 1, 2012

Acronyms

AIDS	Acquired Immune Deficiency Syndrome
ALTC	Nova Scotia Affordable Living Tax Credit
AOM	Assignment of Maintenance
CBA	Child Benefit Adjustment
CCTB	Canada Child Tax Benefit
CDB	Child Disability Benefit
CNIB	Canadian National Institute for the Blind
CPAP	Continuous Positive Airway Pressure
CPP	Canada Pension Plan
CPPD	Canada Pension Plan Disability
CPR	Coronary Pulmonary Resuscitation
CRA	Canada Revenue Agency
CSA	Canadian Standards Association
DCS	Department of Community Services
DIAND	Department of Indian Affairs and Northern Development
EI	Employment Insurance
EP	Employability Participation
EPO	Emergency Protection Order
ER	Eligibility Review
ERO	Eligibility Review Officer
ESIA	Employment Support and Income Assistance
ESS	Employment Support Services
ETW	Educate to Work
FB	Family Benefits
FMIS	Family Maintenance Income Support
FOIPOP	Freedom of Information and Protection of Privacy
GED	General Education Diploma
GIS	Guaranteed Income Supplement
GST	Goods and Services Tax

HCN	Health Card Number
HIV	Human Immunodeficiency Virus
IA	Income Assistance
IDA	Individual Development Account
LAE	Labour and Advanced Education
LMAPWD	Labour Market Agreement for Persons with Disabilities
LMDA	Labour Market Development Agreement
LTD	Long Term Disability
MEP	Maintenance Enforcement Program
MERC	Mandatory Employment Related Costs
MLA	Member of the Legislative Assembly
MP	Member of Parliament
MR	Municipal Relations
MSI	Medical Services Insurance
NCBS/NCB	National Child Benefit Supplement
NSCB	Nova Scotia Child Benefit
NSEA	Nova Scotia Employability Assessment
OAS	Old Age Security
OH&S	Occupational Health and Safety
PDRU	Prevention, Detection and Recovery Unit
PIN	Personal Identification Number
PRC	Poverty Reduction Credit
RDSP	Registered Disability Savings Plan
SA	Social Assistance
SIN	Social Insurance Number
SNS	Service Nova Scotia
SPD	Services for Persons with Disabilities
UCCB	Universal Child Care Benefit
USA/US	United States of America
WCB	Workers Compensation Board
WHMIS	Workplace Hazardous Materials Information System
WITB	Working Income Tax Benefit

EMPLOYMENT SUPPORT AND INCOME ASSISTANCE POLICY MANUAL
Department of Community Services

Appendix: 2
Section: The Nova Scotia Child Benefit

Issued: August 1, 2001
Revised: July 1, 2011

The Nova Scotia Child Benefit

Legislative Authority:

- the *Nova Scotia Income Tax Act*.

Policy Objectives:

- help prevent and reduce child poverty;
- promote labour market attachment, reducing the need for low income working families to turn to social assistance programs and making it easier for families receiving income assistance to make the transition to work; and
- simplify and reduce administration by harmonizing program objectives and benefits across jurisdictions.

Strategic Direction:

- provide benefits in a more mainstream way by using an income test to address the needs of all low income families (e.g. children's benefits, working income supplements and Pharmacare);
- reduce the percentage of population that typically depend on income assistance programs;
- ensure work is a viable economic choice; and
- help families to better participate in their communities, reducing the marginalization that can be associated with income assistance programs.

Operating Principles:

- fair and equitable provision of income support for children;
- non-discriminatory, eligibility based on income test only;

- non-intrusive;
- secure, predictable income source throughout changes in the economy; and
- assist families to be financially self-sufficient.

Program Description:

The Nova Scotia Child Benefit is an income support program for all low income families with children under the age of 18, regardless of the parents' source of income. It shares the same objectives as the National Child Benefit Initiative.

Starting in July 2001, the benefits are designed to fully integrate with the National Child Benefit Supplement to establish a standard benefit for each child of a low income family.

Together, these two (2) programs, started in July 1998, removed the need for children's personal allowances in Nova Scotia's Income Assistance program effective August 1, 2001.

The Nova Scotia Child Benefit is based on an income test, and makes provision for the payment of cash benefits to eligible families with a net annual family income below \$23,000. Families with net incomes up to \$18,000 are eligible for maximum benefits; families with annual incomes between \$18,001 and \$23,000 are eligible to receive partial benefits.

The provision of benefits is governed by the *Nova Scotia Child Benefit Regulations* made pursuant to Section 34, Chapter 217, of the *Nova Scotia Income Tax Act*. The *Regulations* specify eligibility requirements, per child benefit levels, income thresholds and benefit reduction levels where applicable.

The program is administered and delivered by the Canada Customs and Revenue Agency on behalf of Nova Scotia and shares the same business rules as the Canada Child Tax Benefit. The Canada Child Tax Benefit has two (2) components; the National Child Benefit Supplement and the basic amount. The basic amount is the benefit that, prior to July 1998 was known as the Child Tax Benefit. When the Supplement was added July 1998 the two (2) components became known as the Canada Child Tax Benefit.

Eligibility for the program is determined by Canada Customs and Revenue Agency pursuant to the *Nova Scotia Income Tax Act* and *Regulations*. Canada Customs and Revenue Agency is responsible for general communication, client notification regarding eligibility and entitlements, inquiries, and appeals on behalf of Nova Scotia. Monthly payments are included with Canada Child Tax Benefit payments.

Families do not have to make separate application for the Nova Scotia Child Benefit. The annual income tax return filed by a family constitutes an application. Both parents must file an income tax return whether or not one or both have income. Eligibility and benefits are determined on net family income for the previous income tax year and number of children. The benefit year is July 1 to June 30.

Payments are made by direct deposit or cheque on the 20th of each month. To ensure there is no disruption in benefit payments, Canada Customs and Revenue Agency must be kept informed of any changes in family income, marital status, number of dependent children and current address.

Benefit Structure:

Effective July 1, 2001 the Nova Scotia Child Benefit was fully integrated with the National Child Benefit Supplement to establish a standard benefit.

The benefits are:

The Nova Scotia Child Benefit Maximum Annual Benefits		
# of Children	July 2010	July 2011
1 st child	\$445	\$542.90
2 nd child	\$645	\$786.90
3 rd and each additional child	\$720	\$878.40

The National Child Benefit Supplement Maximum Annual Benefits		
# of Children	July 2010	July 2011
1 st child	\$2,088	\$2,118
2 nd child	\$1,848	\$1,873
3 rd and each additional child	\$1,758	\$1,782

The Nova Scotia Child Benefit is combined with the National Child Benefit Supplement to establish a standard benefit for each child as illustrated below:

Combined Benefits – July 1, 2011 - June 30, 2012			
Children	Nova Scotia Child Benefit	National Child Benefit Supplement	Combined Benefits
1 st child	\$543	\$2,118	\$2,661
2 nd child	\$787	\$1,873	\$2,660
3 rd and each additional child	\$878	\$1,782	\$2,660

The following chart illustrates the Nova Scotia Child Benefit combined with the Canada Child Tax Benefit:

Nova Scotia Child Benefit and the Canada Child Tax Benefit Families Receiving Maximum Benefits of the Nova Scotia Child Benefit Monthly Benefits - July 1, 2011			
Family Size	Nova Scotia and National Child Benefit Combined	Canada Child Tax Benefit Base Amount *	Total Monthly Federal Cheque
1 Child	\$221.74	\$113.92	\$335.66
2 Children	\$443.40	\$227.83	\$671.23
3 Children	\$665.10	\$349.67	\$1,014.77
4 Children	\$886.80	\$471.51	\$1,358.31
5 Children	\$1,108.50	\$593.93	\$1,702.43

EMPLOYMENT SUPPORT AND INCOME ASSISTANCE POLICY MANUAL
Department of Community Services

Appendix: 3
Section: Family Violence Protocol

Issued: August 1, 2001
Revised: April 30, 2010

Family Violence and Abuse Protocols

A.3.1 Definition of the Family Violence and Abuse Protocols

The Employment Support and Income Assistance (ESIA) Family Violence and Abuse Protocols identify ESIA caseworkers' responsibilities in regards to three (3) types of violence and abuse that could be experienced by ESIA clients:

1. Intervention for Spousal/Intimate Partner Violence ([Section A.3.2](#))
2. Protection of Children from Abuse and Neglect ([Section A.3.3](#))
3. Protection of Adults from Abuse and Neglect ([Section A.3.4](#))

The Protocols are helpful for caseworkers and staff who might be in a position to observe violence and abuse.

The objective of the Family Violence and Abuse Protocols is to increase awareness of the three (3) types of violence and abuse, and to outline caseworkers' and staff's responsibilities, where required, to respond to violence and abuse experienced by ESIA clients or others with whom caseworkers or staff may have contact.

A.3.2 Intervention for Spousal/Intimate Partner Violence

A.3.2.1 Definition of Spousal/Intimate Partner Violence

Spousal/intimate partner violence is the violence or abuse inflicted on a person by her/his intimate partner, whether she/he is married, in a common-law relationship, dating, or the violence or abuse is inflicted by a former intimate partner. Spousal/intimate partner violence can occur between same or opposite sex couples.

Other common terms describing spousal/intimate partner violence are “domestic violence”, “woman abuse”, and “family violence”.

The majority of spousal/intimate partner violence cases reported to the police involve a woman being the victim; however incidents are also reported where a man is the victim.

Underlying all abuse is a power imbalance between the victim and the abuser. Spousal/intimate partner violence need not involve physical contact with the victim since acts of intimidation such as punching walls and making verbal threats can also achieve this power imbalance. The abuser exercises control over the victim by inducing fear.

Spousal/intimate partner violence can occur in a variety of forms:

- Verbal (name-calling, criticism, insults, swearing, yelling, blaming)
- Physical (slapping, punching, choking, grabbing, kicking, shoving, throwing items, physical restraint)
- Sexual (forced intercourse or other sexual activity, criticizing victim for refusing to engage in sexual activity, treating victim like a sex object)
- Emotional/psychological/social (intimidation, isolation from family and friends, mind games, lying, insults, jealousy, embarrassing the victim, ignoring the victim, not allowing the victim to express emotions)
- Financial/economic (misusing money or possessions, withholding money)
- Criminal harassment (stalking in person, by phone, email, or other)
- Spiritual (mocking personal spiritual beliefs, not allowing person to attend spiritual institution or participate in ceremonies or traditions of her/his faith).
- Threats of any of the forms of spousal/intimate partner violence noted above (verbal, non-verbal, written)

Spousal/intimate partner violence does not necessarily end when the victim leaves her/his partner. Abusive partners may continue to harass and assault their partner after separation. Victims of spousal/intimate partner violence are at an increased risk of experiencing additional violence or even homicide during the first year after leaving the relationship.

A.3.2.2 Indicators of Spousal/Intimate Partner Violence

The following are indicators that a person may be experiencing spousal/intimate partner violence. The person may:

- show signs of bruises, welts, burns, or scalds
- be undernourished or withdrawn
- exhibit shame or fear
- be accompanied by a partner who answers questions directed at the client
- give an explanation that does not accurately account for her/his injury
- avoid eye contact, or show extreme agitation or anxiety while explaining the injury
- minimize the injury, or blame her/himself as being “clumsy”
- give an exaggerated denial of violence as the cause of the injury
- give a quick, ready-made response as to the cause of the injury before being asked

When in the client’s home, a caseworker will be aware of signs of violence, such as broken furniture or other items; holes in walls; and changes in the client’s or children’s behaviour.

Pregnancy can increase a woman’s chances of experiencing spousal/intimate partner violence. Violence can start and/or escalate during pregnancy.

Persons with disabilities (physical, cognitive, or mental health) may be increasingly vulnerable to spousal/intimate partner violence. A person with a disability often faces barriers that may deter her/him to disclose the violence, or leave the relationship.

Cultural diversity can enhance a person's vulnerability to spousal/intimate partner violence. Some common barriers that might deter the person from disclosing the violence or leaving the relationship include:

- language
- discrimination
- gender roles
- family values
- fear of deportation
- isolation
- blaming self

Note: These indicators do not necessarily prove that an individual has experienced spousal/intimate partner violence. They are clues that violence may have occurred.

A.3.2.3 Spousal/Intimate Partner Violence, and the Law

Many of the types of violence associated with spousal/intimate partner violence are identified as crimes in the *Criminal Code of Canada*. Particularly, these are physical and sexual abuse, threats, and criminal harassment (stalking).

Individuals can seek protection from spousal/intimate partner violence through either an emergency protection order or a peace bond.

Emergency Protection Order (EPO): This order provides an individual immediate protection from spousal/intimate partner violence. An emergency protection order is available under Nova Scotia's *Domestic Violence Intervention Act*, which explains how people can apply to the justice system for immediate protection.

An EPO application can be made by calling the Justice of the Peace Centre toll free at 1-866-816-6555, or asking the police, the Nova Scotia Department of Justice's Victim Services, or a transition house worker to apply for one on the victim's behalf. (See Section A.3.2.7 – Helpful Links for an online link to more information about the *Domestic Violence Intervention Act*).

Peace Bond: A peace bond is a legal document that protects an individual's safety, and/or that of their spouse/common-law partner, their child(ren), and/or their

property. To receive a peace bond, individuals must submit an application to the Provincial Court. (Contact information for the Provincial Court: www.courts.ns.ca/provincial/pc_location.htm).

A.3.2.4 Reporting Procedures

There is no legal obligation to report spousal/intimate partner violence.

If however there are children in the environment witnessing the violence, or if the client discloses her/his children are being abused, this information must be reported to Child Welfare, as per Section 22 (2) (i) of the *Children and Family Services Act*.

A.3.2.5 Intervention Guidelines

Despite no legal obligation to report spousal/intimate partner violence, caseworkers may identify the need, either in the office or in the field, to provide help to clients who have experienced violence. Where there is violence, whether it is suspected or confirmed, caseworkers should provide an opportunity and atmosphere/environment in which a client feels comfortable to disclose the violence:

1. Discuss the issue with the client alone

It is imperative to discuss the issue privately in order to ensure the safety of the client and avoid any escalation of the violence. It is unlikely a client will speak about violence in the presence of the abuser or other family members.

2. Validate the client's experience

Supporting the client may be the first indication to her/him that the violence is serious and is not her/his fault. The client is not to be blamed for the violence.

3. Educate the client

Inform the client that:

- a. she/he is not alone
- b. she/he is not to blame for the violence
- c. assault is a criminal offence
- d. there is the risk that the violence will escalate in frequency and severity over time
- e. there are services available to support the client

- f. violence in the family can adversely affect children who witness the violence by causing devastating traumatic and/or psychological effects.

4. Be supportive

Be aware of how very difficult and traumatizing this is for the client. Because of the devastating psychological effects of physical and emotional harm, people who have experienced violence may require counseling to receive support and to improve their self-esteem. A caseworker will communicate with the client in a manner that is supportive and respectful.

5. Discuss options for action

Share information about supportive services and agencies, such as:

- a. police;
- b. transition houses, outreach programs, help-lines, women's/men's centres, youth centres;
- c. support groups and counseling services for the client and her/his children;
- d. legal aid, including emergency protection orders and peace bonds;
- e. medical services;
- f. clergy; and/or
- g. resources such as brochures and booklets.

Encourage the client to establish a network of support through family and friends.

6. Respect freedom of choice

Be sensitive to the client's freedom of choice. Assisting the client in violent situations should never go beyond what she/he wants. A caseworker will encourage the client to define her/his own problems and solutions. Intervention should be aimed not at making decisions for the client, but rather facilitating her/his ability to think through alternatives and seek an acceptable course of action. The client is an adult and her/his decisions must be respected.

7. Be aware of confidentiality

The information received from the client about her/his situation must be kept confidential in compliance with policy respecting confidentiality and the *Freedom of Information and Protection of Privacy Act*.

However, if there are children in the environment witnessing the violence, or if the client discloses her/his children are being abused, this must be reported to Child Welfare, as per Section 22 (2) (i) of the *Children and Family Services Act*.

8. Leave the door open

People who have experienced spousal/intimate partner violence may choose a course of action that others may consider inappropriate. The fact that a client returns to her/his partner is not an indication that the intervention has failed. The encounter with the client is successful if:

- a. the client is not blamed, but rather supported;
- b. she/he is educated about options; and
- c. she/he is made aware of existing supportive resources.

If the client decides to return or remain with her/his partner, it is acceptable for the Caseworker to voice her/his concern for the client's safety, but this must be done so in a nonjudgmental manner.

Note: The caseworker will consult or apprise her/his supervisor on the situation, where appropriate.

A.3.2.6 Documentation

Care is to be taken when documenting the intervention with a client who is experiencing or may be experiencing spousal/intimate partner violence. The purpose of documenting the intervention is to:

1. support eligibility for financial assistance provided in an emergency situation, in accordance with the Employment Support and Income Assistance (*ESIA*) *Policy* Manual; and/or
2. demonstrate in case notes that the appropriate response has been taken, in accordance with the *ESIA* Family Violence and Abuse Protocols.

Documentation should include only a brief summary of the client's situation and the intervention with the client. Case notes will be recorded electronically.

Information to be documented will include:

1. type of financial assistance (if any) provided to client;

2. brief description of the indicators of violence observed, or that were disclosed by the client; and
3. identification of community support services, legal support, and/or information provided to client.

It is recommended that personal information identifying the abuser or third parties in the situation be limited (e.g. name, residence). This is in accordance to *Confidentiality Policy* and the *Freedom of Information and Protection of Privacy Act*.

When making case notes, a caseworker must avoid including her/his personal assumptions or judgments regarding the situation.

A caseworker will identify in the case notes whether the abuse being documented has been disclosed by the client, or observed by a caseworker; and the client must be made aware that documentation of the violence observed or disclosed is being included in the case notes.

Note: If further direction is needed regarding what information is appropriate for documentation, a supervisor will be consulted. If a supervisor is not available, contact the regional FOIPOP Delegate.

A.3.2.7 Links to Helpful Information

- Fact Sheet on Intimate Partner Violence, Nova Scotia Advisory Council on the Status of Women
<http://www.women.gov.ns.ca/assets/files/2010%20FS2%20Domestic%20Violence%20-%20online.pdf>
- Making Changes: A Book for Women in Abusive Relationships, Nova Scotia Advisory Council on the Status of Women
http://women.gov.ns.ca/assets/files/Making%20Changes_2011_WEB.pdf

To order copies of “Making Changes” contact the Nova Scotia Advisory Council on the Status of Women at (902) 424-8662

- Safely on Your Way: Child Custody and Access Information for Women Leaving Abusive Relationships and Their Service Providers, Family Law Information Project for Abused Women
www.legalinfo.org/images/stories/pdf/flipaw.pdf
- Emergency Protection Order brochure, Nova Scotia Department of Justice
http://gov.ns.ca/just/flic/docs/DIVA_Brochure_EN.pdf
- Peace Bond application information, Nova Scotia Department of Justice

http://www.gov.ns.ca/just/srl/guides/_docs/AppyforaPeaceBond.pdf

- Freedom of Information and Protection of Privacy DCS Privacy Policy:
www.gov.ns.ca/coms/department/documents/PrivacyPolicy.pdf
- DCS Privacy Brochure:
www.gov.ns.ca/coms/department/documents/Privacy_Brochure.pdf

For additional information about spousal/intimate partner violence, contact the Nova Scotia Department of Justice Victim Services: (902) 424-3309 or www.gov.ns.ca/just

A.3.3 Protection of Children from Abuse and Neglect

A.3.3.1 Children and Family Services Act

The *Children and Family Services Act* (1991) is the legislation that deals with child protection, children in care, foster care, and adoption. The *Act* protects children from abuse and neglect, and offers services to children and their families.

A child is defined as a person under sixteen (16) years of age, according to Section 3 (1) (e) of the *Children and Family Services Act*.

A.3.3.2 Definition of Child Abuse or Neglect

Child abuse or neglect refers to a wide range of actions or omissions by a parent, guardian, and/or other that place a child at risk of serious harm. Child abuse or neglect can be:

1. **Physical abuse**

Physical abuse is defined as a deliberate non-accidental assault on any part of a child's body that results in physical harm. It may also result from excessive or inappropriate discipline. Injuries may include bruising, burns, welts, bite marks, major bone fractures, internal injuries, and death.

2. **Sexual abuse**

Sexual abuse is a generic term used to describe the improper exposure of a child to sexual contact, activity, or behaviour with or without the child's consent. Sexual abuse is perpetrated by an older person for personal sexual gratification. The abuse can occur by anyone either within or outside of the child's family.

3. **Emotional abuse**

Emotional abuse is actions or omissions ranging from habitual humiliation to withholding life-sustaining nurturing. The abuse is persistent or chronic on the part of the parent, guardian, or other; and results in some degree of emotional damage to the child, evidenced by severe anxiety, depression, withdrawal, or self-destructive or aggressive behaviour.

4. **Neglect**

Child neglect is any lack of care on the part of the parent, guardian, or other, that may result in significant harm to the child's development, or that places the child in danger. Neglect includes failure to provide adequately for the child's need for food, shelter, clothing, hygiene, medical care and/or supervision.

A.3.3.3 When a Child is in Need of Protective Services

When a child has been abused or neglected, or is at substantial risk of being harmed from abuse or neglect, protective services from Child Welfare are needed. The following is Section 22 (2) from the *Children and Family Services Act*, which defines in what situations a child is in need of protective services.

Child is in need of protective services

22 (1) In this Section, "substantial risk" means a real chance of danger that is apparent on the evidence.

(2) A child is in need of protective services where:

- (a) the child has suffered physical harm, inflicted by a parent or guardian of the child or caused by the failure of a parent or guardian to supervise and protect the child adequately;
- (b) there is a substantial risk that the child will suffer physical harm inflicted or caused as described in clause (a);
- (c) the child has been sexually abused by a parent or guardian of the child, or by another person where a parent or guardian of the child knows or should know of the possibility of sexual abuse and fails to protect the child;
- (d) there is a substantial risk that the child will be sexually abused as described in clause (c);
- (e) a child requires medical treatment to cure, prevent or alleviate physical harm or suffering, and the child's parent or guardian does not provide, or refuses or is unavailable or is unable to consent to, the treatment;
- (f) the child has suffered emotional harm, demonstrated by severe anxiety, depression, withdrawal, or self-destructive or aggressive behaviour and the child's parent or guardian does not provide, or refuses or is unavailable or unable to consent to, services or treatment to remedy or alleviate the harm;
- (g) there is a substantial risk that the child will suffer emotional harm of the kind described in clause (f), and the parent or guardian does not provide, or refuses or is unavailable or unable to consent to, services or treatment to remedy or alleviate the harm;
- (h) the child suffers from a mental, emotional or developmental condition that, if not remedied, could seriously impair the child's development and the child's parent or guardian does not provide, or refuses or is unavailable or unable to consent to, services or treatment to remedy or alleviate the condition;

- (i) the child has suffered physical or emotional harm caused by being exposed to repeated domestic violence by or towards a parent or guardian of the child, and the child's parent or guardian fails or refuses to obtain services or treatment to remedy or alleviate the violence;
- (j) the child has suffered physical harm caused by chronic and serious neglect by a parent or guardian of the child, and the parent or guardian does not provide, or refuses or is unavailable or unable to consent to, services or treatment to remedy or alleviate the harm;
- (ja) there is a substantial risk that the child will suffer physical harm inflicted or caused as described in clause (j);
- (k) the child has been abandoned, the child's only parent or guardian has died or is unavailable to exercise custodial rights over the child and has not made adequate provisions for the child's care and custody, or the child is in the care of an agency or another person and the parent or guardian of the child refuses or is unable or unwilling to resume the child's care and custody;
- (l) the child is under twelve (12) years of age and has killed or seriously injured another person or caused serious damage to another person's property, and services or treatment are necessary to prevent a recurrence and a parent or guardian of the child does not provide, or refuses or is unavailable or unable to consent to, the necessary services or treatment;
- (m) the child is under twelve (12) years of age and has on more than one occasion injured another person or caused loss or damage to another person's property, with the encouragement of a parent or guardian of the child or because of the parent or guardian's failure or inability to supervise the child adequately. 1990, c. 5, s. 22; 1996, c. 10, s. 1.

A.3.3.4 Indicators of Abuse and Neglect

The following are indicators that a child may be experiencing abuse or neglect. The child may:

- describe abusive incidents, or describe witnessing violence by or towards a parent/guardian/other adult (e.g. spousal/intimate partner violence)
- have unexplained injuries on the face, head, torso, buttocks, or back of legs where accidental injuries are unlikely to appear; or have injuries inconsistent with the explanation provided

- have unexplained pain, bruises, lacerations, redness, swelling, or bleeding in the genital, vaginal, or anal areas
- have a detailed and age-inappropriate understanding of sexual behaviour, and be preoccupied with sex in conversations and in play
- seek attention and affection inappropriately
- be anxious, depressed, or withdrawn; or engage in self-destructive or aggressive behaviour
- seem afraid to tell parents of minor misdeeds, or be wary of adults in general
- be very dirty and unkempt
- seem malnourished, or be constantly hungry due to inadequate nutrition (sufficient quality and quantity)
- engage in role reversal with his/her parent/guardian/other adult
- be inadequately dressed for the weather
- be unsupervised or left with an inappropriate caregiver
- have medical problems that have not been addressed
- seem to be suffering from developmental lags that have no obvious physical cause
- have been abandoned
- The following are indicators that a parent/guardian/other adult may be abusing or neglecting a child:
 - offers an illogical, unconvincing, or contradictory explanation, or no explanation for the child's injury
 - is evasive and/or resistant and may show signs of anxiety
 - exhibits signs of indifference to the extent of the injuries and the need for treatment
 - blames the injuries on the child's awkwardness or behaviour
 - makes negative comments indicating the child is bad, stupid, clumsy

- gives rewards and punishments inconsistently
- openly rejects the child, or is inconsistent in providing affection, attention and stimulation
- holds unrealistic and age-inappropriate expectations, and makes inappropriate demands on the child

Note: These indicators do not necessarily prove that a child has been abused. They are clues that abuse or neglect may have occurred.

A.3.3.5 Legal Requirement to Report

1. Reporting child abuse or neglect

Under the *Children and Family Services Act* (Section 23 (1)), every person who has information indicating that a child is in need of protective services shall forthwith report that information to the local Child Welfare agency. This includes all information indicating possible abuse or neglect, regardless whether or not that information is confidential or privileged.

The legislation places an even higher responsibility on persons who provide professional or official duties with respect to children (Section 24). The Employment Support and Income Assistance (ESIA) caseworker is one of these professionals. Professionals are legally obligated to report information of suspected abuse or neglect to a Child Welfare agency. The *Act* requires that if, in the course of their duties, professionals have information to suspect that a child is being abused, may be abused, or may have been abused in the past, this must be reported forthwith to a Child Welfare agency.

ESIA caseworkers are only responsible for reporting suspected or known abuse or neglect. They are not required to prove that abuse or neglect has occurred. Child Welfare may use the information received by the caseworker to conduct an investigation, to determine whether abuse or neglect has occurred.

Child Welfare referrals should be given top priority. Legal reporting obligations override the confidentiality requirement of all professional relationships, and require professionals to report even if the information is considered to be privileged.

The *Children and Family Services Act* also sets out the duty to report third party abuse. Section 25 (2) specifies that “every person who has information indicating that a child is or may be suffering or may have suffered abuse by a person other than a parent or guardian shall report the information to an

agency.” Caseworkers must report situations involving third party abuse or neglect.

2. Protection from liability

The *Children and Family Services Act* states that legal action cannot be taken against a person who reports child abuse or neglect, unless the reporting is done falsely or maliciously (Section 23 (5)).

3. Penalty for failure to report

The *Children and Family Services Act* states that any person who fails to report child abuse or neglect is guilty of a summary offence. The penalty is a fine of up to two thousand dollars (\$2,000) and/or imprisonment for a term of up to six (6) months (Section 23 (3)).

Persons who provide professional or official duties with respect to children are liable, under Section 24 (6), to higher penalties if they fail to report. The penalty is a maximum fine of five thousand dollars (\$5,000), and/or imprisonment for a period not exceeding one (1) year. The ESIA caseworker is one of these professionals.

A.3.3.6 The Referral to Child Welfare

The information upon which suspected child abuse and/or neglect is based must be reported to a Child Welfare agency forthwith. To make a Child Welfare referral, the caseworker will call the central Child Welfare office toll free at 1-877-424-1177. To make a referral after regular business hours, on weekends, and on holidays, call 1-866-922-2434.

Caseworkers may also contact their local Child Welfare office. Contact information for these offices can be found online at:

www.gov.ns.ca/coms/departement/contact/Agencies.html

When making the referral, the caseworker will provide Child Welfare with the following information:

- name and contact information of the caseworker making the referral
- name of the child who might need protection, their location, and their Health Card Number (if known)

Other known information to provide Child Welfare includes:

- observed signs of abuse or neglect

- the relationship between the child and the alleged abuser(s)
- contact information for whoever else may have information about the abuse
- whether there is a family doctor available
- health/safety issues of which the Child Welfare Worker should be aware (e.g. dangerous animals, weapons at the child's residence)

Letter to confirm receipt of referral

At the time of referral, it is the caseworker's responsibility to request from Child Welfare a written acknowledgment of their receipt of the referral. The caseworker should not request details from Child Welfare about how they will be proceeding with the referral (e.g. whether an investigation will be conducted).

A.3.3.7 Documentation and Follow Up

1. Documentation

A case note that a referral was made to Child Welfare must be documented by the caseworker and placed on the electronic case file. The case note must indicate only that a referral was made. The case note will not include details of the reported abuse or neglect. When/if the caseworker receives the written confirmation from Child Welfare that the referral was received, this will be put in the case file.

If further direction is needed regarding what information about the Child Welfare referral is appropriate for documentation, a supervisor should be consulted. If a supervisor is not available, contact the regional Freedom of Information and Protection of Privacy (FOIPOP) Delegate.

2. Informing a supervisor

A supervisor should be informed as soon as possible that a referral to Child Welfare has been made.

A.3.3.8 Links to Legislation and Helpful Information

- Child Welfare, Department of Community Services
www.gov.ns.ca/coms/families/abuse/index.html
- *Children and Family Services Act*

<http://nslegislature.ca/legc/statutes/childfam.htm>

- Freedom of Information and Protection of Privacy DCS Privacy Policy:
www.gov.ns.ca/coms/department/documents/PrivacyPolicy.pdf
- DCS Privacy Brochure:
www.gov.ns.ca/coms/department/documents/Privacy_Brochure.pdf

A.3.4 Protection of Adults from Abuse and Neglect

A.3.4.1 Adult Protection Act

The *Adult Protection Act* (1985) protects from abuse or neglect all persons sixteen (16) years of age and older who cannot physically or mentally protect or care for themselves.

A.3.4.2 When an Adult is in Need of Protective Services

An adult in need of protection is a person who:

- is sixteen (16) years of age or over;
- in the premise where she/he resides, is a victim of physical abuse, sexual abuse, mental cruelty, neglect, or a combination thereof;
- due to physical or mental infirmity, is incapable of protecting her/himself from abuse or neglect; and refuses, delays, or is unable to make provision for her/his protection;
- is not receiving adequate care and attention; is incapable of caring adequately for her/himself due to physical or mental infirmity; and refuses, delays, or is unable to make provision for her/his adequate care and attention.

The *Adult Protection Act* does not cover cases of financial abuse. These cases are of a criminal matter and are investigated by the police under the Criminal Code.

If the caseworker is not sure whether a case falls under the *Adult Protection Act*, she/he will contact an Adult Protection Worker.

Where the situation involves a person who is subject to abuse, but the person does not meet the criteria of the *Adult Protection Act*, the caseworker will intervene as outlined in the Family Violence and Abuse Protocols, Section A.3.2 – Intervention for Spousal/Intimate Partner Violence.

A.3.4.3 Indicators of Abuse and Neglect

The following are just a few of the indicators that an adult may be experiencing abuse or neglect:

- unexplained injuries such as bruises, burns, swelling, fractures, rope marks

- repeated falls, old injuries
- poor skin condition, such as dry, dirty, pressure sores, abrasions
- inability to care for personal needs such as hygiene, toileting, diet
- malnourished, dehydrated, extreme weight loss
- agitation, unexplained fearfulness, particularly in the presence of a family member/care giver
- deference to the family member/care giver (e.g. waits for the care giver to respond to questions when no communication impediment exists)
- confusion

Note: These indicators do not necessarily prove that an adult has been abused. They are clues that abuse or neglect may have occurred.

A.3.4.4 Legal Requirement to Report

1. Reporting adult abuse or neglect

Under Section 5(1) of the *Adult Protection Act*, in a situation where it appears that an adult is in need of protection from abuse or neglect (as stated in the definition of an adult in need of protective services), it is required by law that a referral be made forthwith to the local Adult Protection office. Reporting this information to Adult Protection is a legal obligation, regardless whether or not that information is confidential or privileged. All persons must give top priority to their referral to Adult Protection.

2. Protection from liability

The *Adult Protection Act* states that legal action cannot be taken against a person who reports adult abuse or neglect, unless the reporting is done falsely or maliciously (Section 5 (2)).

3. Penalty for failure to report

The *Adult Protection Act* states that a person who fails to report adult abuse or neglect is guilty of an offence. The penalty for this offence is a maximum of one thousand dollars (\$1,000), and/or imprisonment for a period not exceeding one (1) year (Section 16 (1) and 17).

A.3.4.5 The Referral to Adult Protection

The information upon which suspected adult abuse or neglect is based must be reported to Adult Protection forthwith. To report adult abuse or neglect, the caseworker will call Adult Protection through its Continuing Care phone line (1-800-225-7225) and leave a message with information that will help Adult Protection to proceed with an investigation, if warranted. Required information in this referral includes:

- name and contact information of the caseworker making the referral;
- name of the client who might need protection, their location, and Health Card number (if known)

Within seven (7) working days (depending on the urgency of the referral), an Adult Protection Worker may return the caseworker's call to gather more information about the referral.

Information requested by the Adult Protection Worker might include:

- observed signs of abuse or neglect
- the relationship between the client and the alleged abuser(s)
- contact information for whoever else may have information about the abuse
- whether there is a family doctor available
- whether there is a need to see the client alone
- health/safety issues of which the Adult Protection Worker should be aware (e.g. dangerous animals/weapons at the adult's residence)

Follow-up with Adult Protection authorities

If the caseworker has not been contacted by Adult Protection within one (1) week of making the referral, the caseworker will contact Adult Protection to confirm that the referral has been received. The caseworker will not request details from Adult Protection about how they will be proceeding with the referral (e.g. whether an investigation will be conducted).

A.3.4.6 Documentation and Follow Up

1. Documentation

A case note that a referral was made to Adult Protection must be documented by the caseworker and placed on the electronic case file. This case note must indicate only that a referral was made. The case note will not include details of the reported abuse.

If further direction is needed regarding what information is appropriate for documentation, a supervisor should be consulted. If a supervisor is not available, contact the regional Freedom of Information and Protection of Privacy (FOIPOP) Delegate.

2. Informing a supervisor

A supervisor should be informed as soon as possible that a referral to Adult Protection has been made.

A.3.4.7 Protection for Persons in Care Act

The *Protection for Persons in Care Act (2007)* is an extra safeguard that protects from abuse or neglect adults sixteen (16) years of age and older who are patients or residents receiving care from a care facility. All facility administrators and service providers, including staff and volunteers, are liable under this *Act* to promptly report all allegations of abuse.

The *Act* intends to protect persons in care from:

- physical abuse
- sexual contact, activity, or behaviour between a patient/resident and a service provider
- non-consensual sexual contact, activity, or behaviour between patients/residents
- mistreatment causing emotional harm
- the administration, withholding, or prescribing of medication for inappropriate purposes
- the misappropriation, improper, or illegal conversion of money or other valuable possessions

- failure to provide adequate nutrition, care, medical attention, or necessities of life without valid consent

Reporting adult abuse and neglect

To report adult abuse/neglect, or for more information about the *Protection for Persons in Care Act*, call Adult Protection toll free at 1-800-225-7225.

A.3.4.8 Links to Legislation and Helpful Information

- *Adult Protection Act* and general information, Department of Health and Wellness
www.gov.ns.ca/health/ccs/adult_protection.asp
- *Protection for Persons in Care Act* and general information, Department of Health and Wellness
www.gov.ns.ca/health/ppcact/default.asp
- Freedom of Information and Protection of Privacy Act
<http://nslegislature.ca/legc/statutes/freedom.htm>
- DCS Privacy Policy:
www.gov.ns.ca/coms/department/documents/PrivacyPolicy.pdf
- DCS Privacy Brochure:
www.gov.ns.ca/coms/department/documents/Privacy_Brochure.pdf