

Laboucane v. ICBC, 2026 BCCRT 1135

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Civil Resolution Tribunal

Date Issued: July 30, 2026

File: AB-2024-010965

Type: Accident Claims

Category: Accident Benefits

Civil Resolution Tribunal

Indexed as: *Laboucane v. ICBC*, 2026 BCCRT 1135

BETWEEN:

JOSHUA LABOUCANE

APPLICANT

AND:

INSURANCE CORPORATION OF BRITISH COLUMBIA

RESPONDENT

REASONS FOR DECISION

Tribunal Member:

Micah Carmody

INTRODUCTION

1. The applicant, Joshua Laboucane, was in a motor vehicle accident on October 29, 2021. Mr. Laboucane says the accident left him with disc damage and nerve

damage. He claims unspecified amounts for health care and rehabilitation benefits and permanent impairment compensation.

2. The respondent insurer, Insurance Corporation of British Columbia (ICBC), says it has met its obligations under the *Insurance Vehicle Act* (IVA) and associated regulations. It says Mr. Laboucane's injuries had resolved before he was involved in a bike accident. ICBC says I should dismiss the claims.
3. Mr. Laboucane represents himself. An authorized employee represents ICBC. For the reasons set out below, I dismiss Mr. Laboucane's claims.

JURISDICTION AND PROCEDURE

4. These are the formal written reasons of the Civil Resolution Tribunal (CRT). The CRT has jurisdiction over accident claims brought under section 133 of the *Civil Resolution Tribunal Act* (CRTA). CRTA section 133(1)(a) gives the CRT jurisdiction over the determination of entitlement to accident benefits.
5. CRTA section 2 says the CRT's mandate is to provide dispute resolution services accessibly, quickly, economically, informally, and flexibly. In resolving disputes, the CRT must apply principles of law and fairness, and recognize any relationships between parties to a dispute that will likely continue after the dispute resolution process has ended.
6. CRTA section 42 says the CRT may accept as evidence information that it considers relevant, necessary and appropriate, whether or not the information would be admissible in court.
7. Section 39 of the CRTA says that the CRT has discretion to decide the format of the hearing, including by writing, telephone, videoconferencing, email, or a combination of these. The CRT may also ask questions of the parties and witnesses and inform itself in any other way it considers appropriate. This dispute turns largely on whether Mr. Laboucane provided sufficient evidence to prove his entitlement to permanent impairment compensation. As I discuss in more detail below, Mr. Laboucane's

evidence was vague on important aspects of injuries and treatments. Addressing those issues could be a reason for an oral hearing or for requesting further written evidence and submissions. As noted in *Goundar v. Sibley*, 2025 BCCRT 36, the CRT must attempt to accommodate self-represented litigants to ensure they are able to present their case in full. However, this must be balanced against the CRT's obligation to be impartial. In this dispute, having reviewed ICBC's correspondence with Mr. Laboucane and its responding submissions, I find that Mr. Laboucane has had fair notice about what he needed to provide to prove his entitlement. He has had a reasonable opportunity to present his full case. I find that it would have crossed the line into advocacy for me to have called an oral hearing or asked further questions in these circumstances. For these reasons, I have made my decision based on the written materials before me.

Legal representation

8. In his Dispute Notice, Mr. Laboucane repeatedly said he requires a lawyer. He said he is entitled under his insurance to have a lawyer represent him while dealing with ICBC. He did not say anything further about this in submissions.
9. The CRT's rules say that a party does not need the CRT's permission to have a lawyer represent them if their dispute is about accident benefits, like this one. There is no suggestion that Mr. Laboucane was denied the opportunity to have a lawyer represent him. So, I find that Mr. Laboucane proceeded without a lawyer voluntarily.

Tort claims

10. In submissions that Mr. Laboucane filed as evidence, he said he is claiming \$125,000 to \$265,000 in damages for past care, future care, expenses, interest, and costs. He did not provide any explanation for how he calculated these amounts under the applicable legislation. I infer that he is attempting to claim tort damages related to his bodily injuries from the accident.
11. On May 1, 2021, British Columbia's vehicle insurance scheme changed to a "no-fault" system. Under that system, section 115 of the IVA prohibits claims for bodily

injuries arising from accidents that occurred after May 1, 2021, like this one. Instead, IVA section 114 says insureds are entitled to enhanced accident benefits under IVA Part 10. So, to the extent that Mr. Laboucane claims damages under tort law for pain and suffering, I find the CRT cannot award any.

Request for an independent medical examination

12. In submissions, Mr. Laboucane requested an order for an independent medical examination (IME). ICBC did not provide a position on this request.
13. Section 3 of the *Accident Claims Regulation* says if an applicant's physical or mental condition is at issue, the CRT may appoint an expert to conduct an IME and provide an expert report. This report may include the nature and extent of the injury, the diagnosis of an injury, the applicant's condition at the time of the IME, and the applicant's prognosis. The CRT's rules allow the CRT, on its own initiative or upon request, to order an IME at any time after a Dispute Response has been filed. The CRT's rules also provide a non-exhaustive list of relevant factors. These include the injury type, the issues in the dispute, the amount claimed, a party's ability to pay for their own expert, and the extent and nature of existing medical evidence and expert reports.
14. Here, the nature and extent of Mr. Laboucane's injuries are not particularly in dispute. The dispute is more about whether the injuries resolved before his bike accident, and I find that is best resolved on the treatment records before me. Mr. Laboucane did not explain why he wanted an IME or what questions he wanted the examiner to answer. He raised the issue late in the process, during adjudication. Mr. Laboucane also did not provide any evidence about his ability to pay for an IME.
15. As I noted above, the CRT's mandate is to provide proportionate, speedy, and economic dispute resolution services. Based on the criteria listed above, I am not persuaded that pausing this dispute and ordering an IME aligns with the CRT's mandate. In particular, I find it unlikely that an IME would provide additional insight

into the key issue here, which is whether the injuries resolved before the bike accident. For these reasons, I decline to order an IME.

ISSUES

16. The issues in this dispute are:

- a. Is Mr. Laboucane entitled to additional health care and rehabilitation benefits? If so, what amounts?
- b. Is Mr. Laboucane entitled to permanent impairment compensation? If so, what amounts?

BACKGROUND, EVIDENCE AND ANALYSIS

17. As the applicant in this civil proceeding, Mr. Laboucane must prove claims on a balance of probabilities, meaning more likely than not. Mr. Laboucane's reply submissions, which appear to be drafted using artificial intelligence, attempt to reverse this burden by stating that ICBC must establish that he recovered from his injuries, that further treatment would provide no benefit, and that his current symptoms are unrelated to the accident. However, the burden remains on Mr. Laboucane. While I have read all the parties' evidence and submissions, I only refer to what is necessary to explain my decision.
18. Mr. Laboucane described the October 29, 2021 accident to ICBC as follows. He braked for an emergency vehicle that pulled out in front of him, and then the vehicle behind him rear-ended him. Although Mr. Laboucane says he was rear-ended at 60 km/h, there was minor damage to both vehicles. He did not go to the hospital or see a doctor initially.
19. Mr. Laboucane was employed full-time as a registered forest technologist for the Province of British Columbia. The accident happened while Mr. Laboucane was on his lunch break. He took the afternoon off but otherwise did not miss work except to

attend treatments. He was able to work modified duties by doing more desk work and avoiding physically demanding field work, both of which were part of his duties.

20. Mr. Laboucane attended physiotherapy and kinesiology appointments once or twice per week from November 2021 to the end of June 2022. He initially reported feeling he had whiplash and a sore neck, spine and low back. He felt stiff and sore.
21. It is not clear when Mr. Laboucane first saw a doctor about his injuries from the accident. April 25, 2022, is the earliest record of Mr. Laboucane visiting general practitioner Dr. Douglas Snyder. Dr. Snyder diagnosed Mr. Laboucane with a mild to moderate cervical strain and a mild lumbar strain. Dr. Snyder noted that another general practitioner ordered x-rays that were normal. Dr. Snyder ordered an electromyogram of the upper extremities, and referred Mr. Laboucane to neurologist Dr. Anthony Costantino.
22. On September 17, 2022, Mr. Laboucane was involved in a bicycle accident. Mr. Laboucane does not say anything about his bike accident, except that he had symptoms before the bike accident, including neck pain, headaches, and arm numbness.
23. On October 3, 2022, Dr. Snyder noted that Mr. Laboucane hit his head 2 weeks ago and received 5 sutures and was diagnosed with a concussion and cervical strain. On October 17, 2022, Mr. Laboucane told his physiotherapist that he was riding a bicycle at night without a helmet and hit his head on a rock. He reported constant pressure in eyes and temples, noise sensitivity, difficulty speaking, waking in the middle of the night, neck pain, and tingling into his left hand. The physiotherapist observed difficulty with head rotation, and pain with flexion and extension.
24. As shown in the physiotherapy records, the headaches receded over time, but the neck stiffness persisted. Mr. Laboucane does not describe his current symptoms but has continued to see a physiotherapist for lower back pain and other issues, funded by a different insurer.

25. In November 2022, Mr. Laboucane had an MRI on his cervical spine. There was no spinal canal or foraminal stenosis, and nothing particularly remarkable. This is consistent with Dr. Costantino's opinion, which was that any neck pain Mr. Laboucane had was musculoskeletal soft tissue pain.
26. On December 19, 2022, Mr. Laboucane reported to physiotherapist Michaela England that he had "typical neck pain still present since post accident". Michaela England submitted a treatment plan to ICBC the next day. The plan noted Mr. Laboucane was currently off work due to another injury. ICBC refused to fund this treatment plan.
27. In early 2023, Mr. Laboucane asked ICBC to continue funding treatment. ICBC said it needed medical evidence from a doctor. It also sent him a medical authorization form to find out more information about his bike accident and treatments. From there, things devolved into arguments from Mr. Laboucane about how ICBC had treated him and what it was required to do. I infer that Mr. Laboucane did not complete the medical authorization form, as there is no completed form in evidence.

Is Mr. Laboucane entitled to additional health care and rehabilitation benefits?

28. Section 123 of the IVA and section 19 of the *Enhanced Accident Benefits Regulation* together say that an insured is entitled to the payment or reimbursement of reasonable expenses incurred for health care services that are provided to facilitate the insured's recovery from bodily injury or to address a decline in the insured's physical or mental function because of their bodily injury.
29. Mr. Laboucane says his accident-related impairments continued after ICBC-funded treatment ended. He wants ICBC to reimburse him for all "denied treatment expenses," but he does not say what these are. He also wants ICBC to reinstate accident benefits and fund ongoing rehabilitation and medical care.
30. ICBC says the bike accident means there is no causal connection between Mr. Laboucane's ongoing complaints and his accident-related injuries.

31. I find the physiotherapy and kinesiology treatment notes from November 2021 to June 2022 document that with treatment, Mr. Laboucane experienced a gradual lessening of symptoms, increased strength, and improved functional capacity.
32. Kinesiologist Lindsay O'Hara noted that by June 2022, Mr. Laboucane was working full-time, full duties. He still had some pain in his neck and lower back that increased with activity, and hand tingling. However, Lindsay O'Hara wrote that Mr. Laboucane had the tools to work independently on his strength and activity tolerance, and he could be discharged.
33. Similarly, on June 30, 2022, physiotherapist Carlos Aliana wrote that Mr. Laboucane was able to perform all his activities of daily living. His soft tissue injury "should be fully healed," and he could increase field work as tolerated. Carlos Aliana also wrote that they gave Mr. Laboucane a home exercise program and education, and he did not need more physiotherapy treatment, so he would be discharged, although he could try chiropractic or registered massage therapy.
34. On June 20, 2022, Dr. Snyder recommended Mr. Laboucane try chiropractic or registered massage therapy treatments. However, there is no evidence Mr. Laboucane visited any of these practitioners, or had them submit a treatment plan to ICBC.
35. Mr. Laboucane argues that the fact that treatment funding ended does not establish that his rehabilitation needs ended. However, it is not only that treatment funding ended – it is also that he stopped seeking and attending treatment. I would expect a person who was still injured to document their disagreement with the kinesiologist's and physiotherapist's recommended discharge. I would also expect them to seek further treatment from a chiropractor and registered massage therapist as recommended by Dr. Snyder. Instead, 3 months went by without any treatment at all before the bike accident. Absent some other explanation for failing to seek additional treatment, I find that Mr. Laboucane did not require further treatment. Based on the practitioners' reports, I find his impairments had substantially resolved, other than some lingering pain and discomfort with certain activities.

36. I acknowledge that physiotherapist Michaela England, in support of a proposed treatment plan in December 2022, wrote that previous treatment was ended but “client and writer unsure why it was ended and why ongoing treatment was not provided [given client’s] ongoing limitations.” I find this was a practitioner doing her best to advocate for her client. As she told ICBC, she had not seen Mr. Laboucane before. This means she was not in a position to observe whether he had ongoing limitations from the accident. As a result, I put little weight on this evidence.

37. Overall, there is almost no medical evidence indicating that Mr. Laboucane’s present symptoms are the result of his October 29, 2021 accident. In other words, he has not established that the accident was a necessary cause of his current impairments. For these reasons, I dismiss Mr. Laboucane’s claim for additional health care and rehabilitation benefits.

Is Mr. Laboucane entitled to permanent impairment compensation?

38. IVA section 129 requires ICBC to pay lump sum permanent impairment compensation when a person sustains a permanent impairment in a motor vehicle accident. ICBC must calculate the compensation using the *Permanent Impairment Regulation* (PIR) and its schedule.

39. Here, Mr. Laboucane does not identify any permanent impairment he has. Instead, he says that the absence of a formal permanent impairment assessment is not evidence that a permanent impairment does not exist. He says that if I find additional evidence is required, the appropriate remedy is further assessment rather than dismissal.

40. The CRT sometimes dismisses claims for permanent impairment compensation with the caveat that the applicant may reapply for permanent impairment compensation if their impairments become permanent. This usually happens where the applicant has a serious impairment and the medical evidence does not show that the injury has become static or stabilized.

41. That is different from the present case. I mentioned at the outset that Mr. Laboucane said he had disc damage and nerve damage, but there is no medical evidence of either. Based on the clinical records and medical evidence before me, Mr. Laboucane's neck and lower back complaints were musculoskeletal soft tissue injuries, not neurogenic and not the type of impairment indicated in the PIR schedule. I also find that they largely resolved with treatment before his bike accident in October 2022. Mr. Laboucane has not met his burden of proving that he has a serious impairment arising from the October 29, 2021 accident.
42. For these reasons, I find Mr. Laboucane has not established that he is entitled to any permanent impairment compensation, and I dismiss his claim.

CRT fees and expenses

43. Under CRTA section 49 and the CRT rules, a successful party is generally entitled to the recovery of their tribunal fees and dispute-related expenses. ICBC was successful, so I order Mr. Laboucane to reimburse ICBC its \$25 in paid CRT fees. As Mr. Laboucane was unsuccessful, I dismiss his claim for CRT fees. Neither party claims any dispute-related expenses.

ORDERS

44. I dismiss Mr. Laboucane's claims.
45. Within 21 days of the date of this decision, I order Mr. Laboucane to pay ICBC \$25 in CRT fees.
46. ICBC is also entitled to post-judgment interest under the *Court Order Interest Act*.

47. This is a validated decision and order. Under CRTA sections 57 and 58, a validated copy of the CRT's order can be enforced through the Supreme Court of British Columbia or the Provincial Court of British Columbia if it is under \$35,000. Once filed, a CRT order has the same force and effect as an order of the court that it is filed in.

Micah Carmody, Tribunal Member