

STATE OF RHODE ISLAND

PROVIDENCE, SC.

SUPERIOR COURT

(FILED: August 19, 2024)

ANGANIE WILLIAMS,
Appellant,

v.

EMPLOYEES' RETIREMENT
SYSTEM OF RHODE ISLAND
Appellee.

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C.A. No. PC-2022-06276

DECISION

K. RODGERS, J. Before this Court is Anganie Williams' (Appellant or Williams) appeal from a decision of the Employees' Retirement System of the State of Rhode Island (Appellee or ERSRI) denying her application for accidental disability retirement.

Jurisdiction is pursuant to G.L. 1956 § 42-35-15. For the reasons contained herein, Williams' appeal is denied, and ERSRI's decision is affirmed.

I

Facts and Travel

A

Incidences at Appellant's Workplace

Appellant worked at the Rhode Island Department of Motor Vehicles (DMV) as a Motor Vehicle Service Clerk since 1999. (R. at 0014, Tr. 5:12-15, Aug. 4, 2022 (Tr.).)¹ Williams alleged that on May 2, 2018 she tripped over a cord at work. *See id.* at 00367, 00422. She claims that she lost consciousness from that fall and eventually went home that day; later that

¹ This Court will follow the consecutive pagination provided in the Administrative Record throughout this Decision.

day she was taken to the emergency room. *Id.* at 00422. X-rays of her hands, knees, left ankle, and left shoulder revealed no fractures, and a thoracic spine MRI and head MRI were also unremarkable. *See id.* She followed up with her primary care physician, Michael R. Heru, M.D. (Dr. Heru) who, in turn, referred her to orthopedist Razib Khaund, M.D. (Dr. Khaund). *See id.* at 00425.

Ira J. Singer, M.D. (Dr. Singer) performed an independent medical evaluation² of Appellant on July 17, 2018. *Id.* at 00422-425. In his written report, Dr. Singer concluded that she had sustained multiple injuries following her work-related fall but that “[h]er prognosis is good. At the current time, she has minimal objective findings to substantiate her subjective complaints.” *Id.* at 00424. Dr. Singer recommended that she complete her course of physical therapy and follow up with Dr. Khaund. *Id.* at 00425. Dr. Singer opined that “returning to her regular job would not be injurious to her orthopaedic health or to the health of others.” *Id.* Thereafter, Dr. Khaund approved Appellant’s return to work as of August 21, 2018, starting at five hours per day. *See id.* at 00634.

As referenced by Dr. Singer, Appellant also was referred to physical therapy. *See id.* at 00425. She attended forty-five sessions at Elite Physical Therapy until she was discharged on October 17, 2018. *Id.* at 00522. The discharge note indicates that Williams “has reached a plateau in progress with continued limited compliance with home exercise program[.]” *Id.*

Williams next alleged that on January 24, 2020, the arm of her office chair broke causing her to fall. *See id.* at 00367. Three days later, Appellant was seen by Jay M. Burstein, M.D. (Dr. Burstein) for an independent medical examination related to her May 2018 fall. *See id.* at 00410-412. Nowhere in that report does Dr. Burstein reference any recent fall that Appellant had at

² This independent medical evaluation was ordered in Williams’ Workers’ Compensation case that was filed in connection with her May 2, 2018 fall.

work. *See id.* Rather, Dr. Burstein noted that Appellant reported that frequent use of her computer mouse aggravates her wrist pain. *Id.* at 00411. Accordingly, Dr. Burstein recommended that there be an ergonomic workstation assessment to improve her workstation and that no additional physical therapy or injections for pain are indicated. *Id.* at 00412. He concluded that Appellant could work a six-hour shift until her workstation is reviewed and any recommended changes are implemented. *Id.*

Appellant completed an injury report in connection with the January 24, 2020 incident.³ *Id.* at 00397. She described the nature of her injuries from that fall as a “fractured wrist and torn rotator cuff.” *Id.* Notably, radiological examinations were conducted by Advanced Radiology Urgent Care and reports of the same were sent to Appellant’s primary care physician, Dr. Heru, on February 4, 2020, which reveal no acute fracture of the right forearm and no acute fracture or dislocation of the right wrist or the right shoulder. *Id.* at 00920-925. Notwithstanding these findings, Dr. Heru issued a note excusing Appellant from work “for a fracture in the right arm and wrist” and for right shoulder pain. *Id.* at 00926. Williams returned to work in March 2020 with accommodations.⁴ *Id.* at 00984.

In December 2020, Kenneth R. Catallozzi, M.D. (Dr. Catallozzi) performed an independent medical evaluation of Williams.⁵ *Id.* at 00723. At that time, she complained of pain in her neck, right shoulder, and back, and discomfort in her left hip. *Id.* at 00724. She stated to Dr. Catallozzi that she “can’t do my job full-time but part-time work I can handle.” *Id.* Dr.

³ There was no such injury report completed by Appellant in connection with the May 2, 2018 incident. *See R.*

⁴ Williams described her accommodations as a computer desk that allows her to stand for a period of time and sit for a period of time to alleviate neck pain. (R. at 0015, Tr. 10:3-5, Aug. 4, 2022 (Tr.).)

⁵ Dr. Catallozzi’s report indicates that this independent medical evaluation was ordered in connection with both of Williams’ Workers’ Compensation cases that were filed in connection with her May 2, 2018 fall and January 24, 2020 fall. (R. at 00723.)

Catallozzi opined that he did not believe “there is any long-term disability related to her right hand, wrist and forearm injury sustained on . . . January 24, 2020.” *Id.* at 00730. He further stated that her right shoulder pain, based on his review of the medical records, “would indicate an aggravation of a pre-existing right shoulder condition.” *Id.*

Appellant continued to work as a clerk at the DMV until June 16, 2021. *See id.* at 0015, Tr. 9:2-3, *see also* 00994. On that day, according to her August 4, 2022 testimony before ERSRI’s Disability Committee⁶ (the Committee), she alleges that her supervisor threatened to take her accommodation away. *Id.* at 0015, Tr. 9:23-10:8. She testified that the conflict with her supervisor escalated and her supervisor locked her in a room for three hours. *Id.* at 0015, Tr. 10:8-11. When Appellant’s supervisor returned, Appellant testified that she said she would “rather sit in the chair and die” than get up because she was suffering from high blood pressure and an asthma attack. *Id.* at 0015, Tr. 11:11-15. At that point, according to Appellant, her supervisor called emergency services and told them that Appellant was suffering from suicidal ideation. *Id.* at 0015, Tr. 11:15-16. Appellant testified that her manager refused to call her family as she requested and called her crazy. *Id.* at 0015, Tr. 12:15-19. She was taken by ambulance to Kent Hospital. *Id.* at 0015, Tr. 12:19-21; *see also id.* at 00994-01009. There is no incident or accident report from this June 16, 2021 event. *Id.* at 0016, Tr. 15:11-13. Williams did not return to work after June 16, 2021. *See id.* at 00985.

On September 20, 2021, Appellant, at sixty-two years old, applied for accidental disability retirement and ordinary disability retirement based on the May 2018 fall and the

⁶ This Court’s recitation of the events of June 16, 2021 derive solely from Williams’ testimony at the August 4, 2022 hearing before the Disability Committee. These allegations were not included in Williams’ instant application for disability retirement. It appears, however, that Williams repeatedly disclosed these workplace allegations to the multitude of treatment providers that she met with in connection with the allegations in the instant appeal.

January 2020 fall. *Id.* at 00367-74. From those two events, Appellant claimed to have injuries to her groin, head, neck, hip, hands, shoulder, ankle, and knees. *Id.* at 00367.

B

Independent Medical Examinations

Following the filing of Williams' application, and in accordance with G.L. 1956 §§ 36-10-12(b) and 36-10-14(c), three physicians engaged by the Retirement Board of ERSRI examined Williams in February 2022 and provided reports documenting the same. Anthony M. DeLuise, Jr., M.D. (Dr. DeLuise) examined Appellant and reviewed roughly one thousand pages of medical records. (R. at 00965.) In his report, Dr. DeLuise stated that after her three month leave following the May 2018 fall, Appellant "felt as though her employer 'gave her a hard time when she returned to work'" and that "the majority of [Appellant's] discussion revolved around a difficult workplace environment, possibly hostile." *Id.* at 00964-65. Dr. DeLuise further noted that he had "to refocus her a number of times." *Id.* at 00965. Dr. DeLuise documented her diagnosis as follows:

"Diagnoses include left thoracolumbar syndrome, myofascial pain, myofascial trigger pain left lumbar area, probable mild lumbar facet pain syndrome, greater trochanteric pain syndrome, left more than right, gluteal strain, bilateral shoulder pain, right elbow pain and cervical pain. These diagnoses are causally related to the work-related injuries that occurred on May 2, 2018, and November⁷ 24, 2020. This is based on my review of the medical records and patient interview and examination today." *Id.*

Dr. DeLuise concluded that Appellant's disability claim is a direct result of her falls at work. *Id.* at 00969, ¶ 3. He further explained in his report:

"Based on my interview with her, she is very pain focused and still quite angry regarding her relationship with her employer. . . . Her

⁷ Dr. DeLuise notes the correct date of the second incident, January 24, 2020, elsewhere in his report. *See, e.g.,* R. at 00965, 00967.

examination is difficult as she is pain focused and guarded. In addition, she is a bit distracted by the specifics of her relationship with her job/coworkers and bosses. I do not feel she could effectively perform any job at this time. I don't think she would have the focus and concentration because of her pain." *Id.* ¶ 4.

John W. Golberg, M.D. (Dr. Golberg) also examined Appellant, reviewed her medical records, and prepared a report. *Id.* at 00972-80. Dr. Golberg noted her "extreme distress and anxiety" made a full examination extraordinarily difficult. *Id.* at 00975. He also reported that Williams described "significant conflict in particular with her supervisor and describes a workplace atmosphere of intimidation and lack of support." *Id.* at 00974. Dr. Golberg concluded that Appellant suffers from right shoulder strain, scapula-thoracic syndrome in her right shoulder, left hip pain with gluteal tendinitis, degenerative arthritic changes in her right wrist and right thumb joints, and chronic pain syndrome. *Id.* at 00979. Relying upon his interview with Williams, Dr. Golberg found that "the incapacity presently exhibited is inconsistent with any work capacity." *Id.* He further stated:

"She has limitations of motion and limitations of strength. She exhibits mental health disturbance . . . but has not had consistent management.

"...

"The claimant at present has no capacity for gainful employment.

"...

"She requires resumption of psycho-social support services.

"...

"It is my opinion that the claimant is permanently or totally disabled." *Id.* at 00980.

Dr. Golberg makes no findings on the causal relationship between her disability and her May 2018 fall or her January 2020 fall. *See generally id.* at 00972-980.

Finally, Franklin E. Mirrer, M.D. (Dr. Mirrer) examined Appellant, reviewed her extensive medical records, and completed a report. *Id.* at 00982-991. Dr. Mirrer noted the complicated nature of her case and that Williams was quite emotional in that session. *Id.* at 00983. Dr. Mirrer documented Williams’ multiple allegations of workplace bullying and hostility, including the events of June 16, 2021. *See id.* at 00984-85. Dr. Mirrer explained her physical examination, stating:

“This is a very anxious 63-year-old female. She has a lot to say and gets distracted in her thoughts regarding the behavior others had towards her at the [DMV]. Clearly, she has had some severe mental trauma from this” *Id.* at 00986.

Dr. Mirrer documented his impressions as follows:

“Williams unfortunately was . . . in a very toxic work environment that has caused her severe anxiety and led to, at least per the report of her supervisor, some suicidal ideation. This led her to leave work on June 16, 2021 and she has never returned.

“She fell in May 2018 in which she had the injuries . . . as a direct result of that. But she was able to return to work after some physical therapy and had some accommodations there that allowed her to work However, I believe it was the incident at work of June 16, 2021 that has caused her not to return, and not her orthopedic injuries. While her orthopedic injuries are real and she does have some chronic pain and discomfort, that is not what has kept her out of work.”

“ . . .

“[T]he secondary injury on January 24, 2020 certainly did cause some further injury to her wrist, forearm, and aggravated her shoulder and neck. But, again, she returned from that injury after approximately three months and was back at work for well over one year before the incident of June 16, 2021.” *Id.* at 00989.

Dr. Mirrer concluded that “in terms of her physical condition, she was and can continue to perform the duties she had at the DMV with the accommodations that she had.” *Id.* at 00991.

Additionally, Dr. Mirrer opined that “[a]t the present time, from her orthopedic complaints, she is not disabled from any employment.” *Id.*

C

ERSRI’s Disability Committee’s April 1, 2022 Decision

In a decision dated April 1, 2022, the Committee recommended a denial of Appellant’s application for ordinary disability retirement and accidental disability retirement. *Id.* at 00365. The Committee found Dr. Mirrer’s report persuasive that Appellant ceased working at the DMV as a result of a dispute with her supervisor that concluded with her June 16, 2021 visit to Kent Hospital and not as a result of either fall in May 2018 or January 2020. *Id.* at 00363. The Committee concluded, “based upon the record evidence, that [Appellant] is not disabled as a result of any orthopedic injuries sustained in the identified alleged accidents, but that she rather stopped working as a result of conflict with her co-workers.” *Id.*

Beyond Dr. Mirrer’s report, the Committee relied on Appellant’s other medical records. *Id.* at 00364. For example, the Committee cited Dr. Singer’s report from July 17, 2018, in which he concluded that Appellant would be physically capable of returning to work. *Id.* The Committee also referenced Dr. Khaund’s August 21, 2018 report in which he said that Appellant could return to duty with accommodations. *Id.* The Committee also relied on certain reports from the Arrigan Center, including its final physical therapy assessment dated September 15, 2021, finding that Williams functions at a level required for her position, and its final psychosocial rehabilitation consultation of the same date stating that Appellant’s unease surrounds her relationship with her manager rather than her pain. *Id.*

The Committee was not swayed by the conclusions in Dr. DeLuise’s and Dr. Golberg’s reports. *Id.* at 00365. Instead, the Committee concluded that Dr. DeLuise’s references to

Williams' anguish over her work environment supports Dr. Mirrer's conclusions. *Id.* The Committee also noted that while Dr. Golberg's report mentions Appellant's complaints about her workplace, he did not identify any physical or mental ailment that would prevent her from returning to work. *Id.*

The Committee recommended that Appellant's application for ordinary disability retirement and accidental disability retirement be denied. *Id.* On May 18, 2022, the Retirement Board voted to accept the Committees' recommendation. *Id.* at 00356.

On June 6, 2022, Appellant appealed the Retirement Board's decision denying her application for accidental disability retirement and ordinary disability retirement. *Id.* at 0021-22. In support of her appeal, Williams submitted supplementary medical records of additional treatment providers, including a cardiologist, a pulmonary specialist, a pain specialist, orthopedic surgeons, and a gynecologist. *See generally id.* at 0027-0321.

D

Reconsideration Hearing

On August 4, 2022, the Committee held a reconsideration hearing at Williams' request. (R. at 0014, Tr. 6:18-20.) Appellant testified at the hearing and described her work environment which involved her coworkers repeatedly spraying Lysol near her which triggered her allergies. *Id.* at 0015, Tr. 9:2-7. Most of Appellant's testimony concerned the confrontation with her supervisor on June 16, 2021. *See id.* at 0015. The Committee chairperson attempted to focus Williams on her current disabling condition and symptoms rather than the interpersonal workplace issues. *Id.* at 0016. Appellant then generally described her physical ailments including neck issues, a swollen ankle, groin issues, high blood pressure, cataracts, back issues, a swollen knee, trouble sleeping, sleep apnea, and headaches. *Id.* at 0016, Tr. 16:10-17, 16:23-24; 0017, Tr. 17:14-17, 18:5-6. Appellant briefly testified about her two falls in May 2018 and

January 2020 at the DMV and confirmed that she went back to work after each fall. *Id.* at 0017, Tr. 17:20-25, 18:8-20, 18:25-19:1.

E

ERSRI's Disability Committee's August 4, 2022 Decision

Following the reconsideration hearing, the Committee issued another decision on August 4, 2022. (R. at 003-0011.) The Committee recommended that Appellant's ordinary disability retirement application be approved and that her accidental disability retirement application be denied. *Id.* at 006-8.

In reaching this recommendation, the Committee looked to Appellant's testimony regarding her plethora of ailments which diminished her ability to function. *Id.* at 008. Specifically, she testified that her symptoms included chronic physical and mental pain, headaches, allergies, asthma, neck pain, shoulder pain, knee pain, and trouble sleeping. *Id.* The Committee relied on Dr. DeLuise and Dr. Golberg's conclusions that Appellant is incapable of performing her duties and Dr. DeLuise's focus on Appellant's pain levels. *Id.* The Committee employed a holistic view of Appellant and concluded that she would be unable to perform her job requirements. *Id.* The Committee recommended that its earlier denial of her application for ordinary disability retirement be reversed and that she be granted an ordinary disability retirement. *Id.*

Turning to the accidental disability retirement application, the Committee again concluded that the falls on May 2, 2018 and January 24, 2020 did not result in any disabling condition. *Id.* at 008-9. In reaching this conclusion, the Committee relied on Dr. Mirrer's report that Appellant returned to work after each of those incidents and that she regularly attended work until the June 16, 2021 conflict with her supervisor and coworkers. *Id.* at 009. The Committee

again found Dr. Mirrer’s conclusion persuasive that she stopped attending work “as a result of conflict with her co-workers, and her constellation of non-work-related ailments.” *Id.* The Committee cited Appellant’s medical records from Dr. Burstein, Dr. Singer, Dr. Khaund, and the Arrigan Rehabilitation Center to support its conclusion. *Id.* at 0010. The Committee also referenced, as it had in its April 1, 2022 decision, that both Dr. DeLuise and Dr. Golberg noted Appellant’s emphasis on workplace conflicts in their respective reports. *Id.*; *cf id.* at 00365.

The Committee concluded that there is no evidence that shows that any workplace accident resulted in Appellant’s mental or physical disability. *Id.* at 009. Therefore, the Committee recommended a denial of Appellant’s application for accidental disability retirement. *Id.* at 0010.

The Retirement Board voted to accept the Committee’s recommendation to overturn its earlier denial of Appellant’s ordinary disability retirement application and to deny her application for an accidental disability retirement. *Id.* at 001.

On October 31, 2022, Appellant filed a timely appeal from ERSRI’s decision.

II

Standard of Review

Section 42-35-15(g) of the Administrative Procedures Act (APA) establishes this Court’s appellate jurisdiction to review final decisions issued by state administrative agencies. *See McAninch v. State of R.I. Department of Labor & Training*, 64 A.3d 84, 87 (R.I. 2013). Pursuant to § 42-35-15(g):

“The court shall not substitute its judgment for that of the agency as to the weight of the evidence on questions of fact. The court may affirm the decision of the agency or remand the case for further proceedings, or it may reverse or modify the decision if substantial rights of the appellant have been prejudiced because the administrative findings, inferences, conclusions, or decisions are:

- “(1) In violation of constitutional or statutory provisions;
- “(2) In excess of the statutory authority of the agency;
- “(3) Made upon unlawful procedure;
- “(4) Affected by other error of law;
- “(5) Clearly erroneous in view of the reliable, probative, and substantial evidence on the whole record; or
- “(6) Arbitrary or capricious or characterized by abuse of discretion or clearly unwarranted exercise of discretion.”

In reviewing an administrative agency’s decision, the Court “may not substitute its judgment for that of the agency and must affirm the decision of the agency unless its findings are clearly erroneous.” *Guarino v. Department of Social Welfare*, 122 R.I. 583, 588, 410 A.2d 425, 428 (1980) (citing § 42-35-15(g)(5)). Further, the Court may not “weigh the evidence [or] pass upon the credibility of witnesses [or] substitute its findings of fact for those made at the administrative level.” *E. Grossman & Sons, Inc. v. Rocha*, 118 R.I. 276, 285, 373 A.2d 496, 501 (1977). Rather, § 42-35-15(g) limits the Court to an examination of the record in order to ascertain whether the agency’s decision is supported by legally competent evidence. *See Center for Behavioral Health, Rhode Island, Inc. v. Barros*, 710 A.2d 680, 684 (R.I. 1998). Legally competent evidence, also referred to as “substantial evidence,” is “relevant evidence that a reasonable mind might accept as adequate to support a conclusion [and] means an amount more than a scintilla but less than a preponderance.” *Town of Burrillville v. Rhode Island State Labor Relations Board*, 921 A.2d 113, 118 (R.I. 2007) (internal quotation omitted).

III

Analysis

Appellant’s sole argument is that she satisfies the accidental disability retirement standard because there is competent evidence, in the form of her medical records, which support her claim that the May 2, 2018 and January 24, 2020 accidents proximately caused her disabling

condition. (Mem. of L. in Supp. of Williams' Compl. at 2-5 (Appellant's Mem.)) ERSRI maintains that Appellant is not disabled as a natural and proximate result of an accident while in the performance of her work duties and that there is legally competent evidence in the record to support that finding. (ERSRI's Mem. of L. in Supp. of its Decision of Sept. 21, 2022 at 18-20 (ERSRI's Mem.))

The standard for granting an accidental disability retirement is set forth in § 36-10-14(c), which provides in pertinent part:

“If a medical examination conducted by three (3) physicians engaged by the retirement board and such investigation as the retirement board may desire to make shall show that the member is physically or mentally incapacitated for the performance of service *as a natural and proximate result of an accident*, while in the performance of duty, and that the disability is not the result of willful negligence or misconduct on the part of the member, and is not the result of age or length of service, and that the member has not attained the age of sixty-five (65), and that the member should be retired, the physicians who conducted the examination shall so certify to the retirement board stating the time, place, and conditions of service performed by the member resulting in the disability and the retirement board may grant the member an accidental disability benefit.” (Emphasis added.)

“[P]roximate cause is a question of fact and only under the most extreme circumstances will be taken as a question of law.” *Yankee v. LeBlanc*, 819 A.2d 1277, 1281 (R.I. 2003). “The word ‘proximate,’ in the legal context of ‘proximate cause,’ requires a factual finding that the ‘harm would not have occurred but for the [accident] and that the harm [was a] natural and probable consequence of the [accident].”’ *Pierce v. Providence Retirement Board*, 15 A.3d 957, 964 (R.I. 2011) (quoting *Wells v. Uvex Winter Optical, Inc.*, 635 A.2d 1188, 1191 (R.I. 1994)).

Appellant would have this Court elevate the opinions of Dr. DeLuise and her primary care physician, Dr. Heru, over the opinions of other physicians. *See* Appellant's Mem. at 4. Appellant's argument is misguided because she is asking this Court to weigh the evidence and

reach the opposite conclusion that ERSRI reached; namely, that Appellant does qualify for accidental disability retirement. *See id.* However, that is not the role of this Court on appeal. *See E. Grossman & Sons*, 118 R.I. at 285, 373 A.2d at 501 (court may not weigh evidence, pass on credibility, or substitute its own findings of fact). Instead, this Court is tasked with examining the record to see if there is legally competent evidence to support ERSRI's findings. *See Town of Burrillville*, 921 A.2d at 118.

In the Committee's August 4, 2022 decision, the Committee relies on Dr. Mirrer's report and analysis. (R. at 009.) Dr. Mirrer stated that after Appellant fell at work on May 2, 2018 and January 24, 2020, she returned to work and continued regular attendance until the confrontation with her colleagues on June 16, 2021. *Id.*; *see also id.* at 00984-985. At that point, according to Dr. Mirrer's report, Appellant stopped attending work altogether even though she was not suffering from any orthopedic injuries. *See id.* at 009. The Committee found Dr. Mirrer's conclusion persuasive that Appellant stopped working at the DMV due to the events of June 16, 2021. *Id.*

In addition, the Committee cited evidence contained in the medical records that reflect that her orthopedic injuries are not disabling, including reports by Dr. Singer, Dr. Khaund, and Dr. Burstein. *Id.* at 0010; *see also id.* at 00415, 00425, 00634. Dr. Singer reported that Appellant returning to work would not negatively impact her orthopedic health. *Id.* at 0010; *see also id.* at 00425. Dr. Khaund stated that Appellant could return to light duty at the DMV with accommodations. *Id.* at 0010; *see also id.* at 00634. Dr. Burstein concluded that there are no physical findings that would prevent Appellant from working full time. *Id.* at 009; *see also id.* at 00413-15. Each of these findings can easily be reconciled with the Committee's ultimate determination that Appellant is entitled to an ordinary disability retirement because she has

“myriad ailments” which have a “significant impact . . . on her ability to function.” *Id.* at 008.

The Committee found:

“After hearing Ms. Williams’ testimony, the Committee concludes that she is indeed incapacitated for the performance of service based on her *entire constellation of medical and emotional issues*, and further concludes that she should be retired.” *Id.* (emphasis added).

The record – and Appellant herself – confirm that Appellant returned to work after each incident in May 2018 and January 2020. *See id.* at 0015, Tr. 9:2-4; *see also id.* at 00984. The orthopedic injuries from each of those events did not cause her to stop work; the tension with her supervisor and coworkers, which came to a head on June 16, 2021, is what precipitated her permanent departure from working at the DMV. *See id.* at 00984-85. There is legally competent evidence in the record to support the Retirement Board’s decision to adopt the Committee’s recommendation to deny Williams an accidental disability retirement because there is no evidence of an accident or accidents in the workplace that resulted in Appellant’s physical or mental disability. *Id.* at 0010. Williams ceased working at DMV “due to perceived mistreatment against a backdrop of numerous non-work-related health issues.” *Id.* at 009.

While the Committee gave greater weight to Dr. Mirrer’s independent medical evaluation and his conclusions than to the conclusions of Dr. DeLuise and Dr. Golberg, it is within its capacity to do so. *See E. Grossman & Sons, Inc.*, 118 R.I. at 285, 373 A.2d at 501; *see also R.* at 009-10. There is ample evidence that the Committee relied on that satisfies the legally competent evidence standard, which is “more than a scintilla but less than a preponderance.” *Town of Burrillville*, 921 A.2d at 118. Accordingly, ERSRI’s decision must be affirmed.

IV

Conclusion

The Committee relied on legally competent evidence in making its determination that Appellant does not qualify for accidental disability retirement. Accordingly, the decision of ERSRI, which adopted the Committee's August 4, 2022 recommendation, is hereby affirmed and Appellant's appeal is denied.

Counsel for ERSRI shall submit the appropriate order for entry.



RHODE ISLAND SUPERIOR COURT

Decision Addendum Sheet

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CASE NO: **PC-2022-06276**

COURT: **Providence County Superior Court**

DATE DECISION FILED: **August 19, 2024**

JUSTICE/MAGISTRATE: **K. Rodgers, J.**

ATTORNEYS:

For Plaintiff: **Anganie Williams, *pro se***

For Defendant: **Larissa Delisi, Esq.
Michael P. Robinson, Esq.**