SLUDGE AUDIT — § 1 SOSIALTJENESTELOVEN

Systematic Sludge Identification Report

PRELIMINARY METHODOLOGICAL NOTE

Requirement count from Process Inflation Findings vs. circular paragraph alone:

The Process Inflation Findings identify **21 requirements** attributable to the normative field surrounding § 1. Reading the circular paragraph in the CONTEXT DOCUMENT (R-35 § 1) in isolation would make **7 requirements** visible — those whose exact or near-exact formulation appears in the circular text itself (Requirements 1, 2, 3, 4, 5, 6, and 7). The remaining **14 requirements** (Requirements 8–21) have no textual presence in the circular whatsoever. They are invisible from the circular alone. This gap — 14 out of 21 — is the foundational analytical finding of this session: the normative burden operating in the § 1 field cannot be detected from the primary governing instrument. It can only be mapped by following the downstream sub-legal instruments the circular has spawned or attracted.

Source mapping of requirements with no textual presence in the circular:

Requirement	Source Instrument	Category
Req 8	Kommunebrev 2025	(a) Kommunebrev
Req 9	Veileder om økonomisk stønad etter sosialtjenesteloven	(b) Veileder
Req 10	Barnets beste — veileder	(b) Veileder
Req 11	Barnets beste — veileder	(b) Veileder
Req 12	Barnets beste — veileder	(b) Veileder
Req 13	Veileder om økonomisk stønad etter sosialtjenesteloven	(b) Veileder
Req 14	Veileder om økonomisk stønad etter sosialtjenesteloven	(b) Veileder
Req 15	Veileder til sosialtjenesteloven § 17	(b) Veileder

Req 16	Veileder til sosialtjenesteloven § 17	(b) Veileder
Req 17	Veileder til sosialtjenesteloven § 17	(b) Veileder
Req 18	Veileder til sosialtjenesteloven § 17	(b) Veileder
Req 19	Veileder til sosialtjenesteloven § 17	(b) Veileder
Req 20	Standard for trygge brukermøter i NAV	(c) Standard document
Req 21	Standard for trygge brukermøter i NAV	(c) Standard document

Structural observation carried forward: The 14 sub-legally sourced requirements are themselves internally heterogeneous. Requirements 8–14 derive from instruments closely tied to the § 1 normative field (child welfare, individual assessment, documentation of needs). Requirements 15–19 derive from a § 17 veileder — meaning they belong to a different statutory provision's interpretive apparatus and are being imported wholesale into the § 1 analytical field, raising a secondary structural authority question. Requirements 20–21 derive from a workplace safety standard operating under arbeidsmiljøloven, placing them in an entirely different legal domain. These distinctions carry through Steps 2–6.

STEP 1 — IDENTIFICATION OF ALL REQUIREMENTS

REQUIREMENT 1

- **Exact obligation:** Upon choosing between different interpretive alternatives, the solution that best promotes the purposes of the Act shall be chosen.
- **Source instrument:** R-35 § 1 (Circular / Rundskriv 35)
- **Explicit or implicit:** Explicit
- **Textual presence in circular:** PRESENT — verbatim in circular § 1, section 1.1.1

REQUIREMENT 2

- **Exact obligation:** Services shall contribute to achieving the purposes of the Act and shall, as far as possible, be designed in cooperation with the recipient.
- **Source instrument:** R-35 § 1 (Circular)
- **Explicit or implicit:** Explicit
- **Textual presence in circular:** PRESENT — verbatim in circular § 1, section 1.1.1

REQUIREMENT 3

- **Exact obligation:** How the NAV office can best provide such assistance must be assessed concretely and individually on the basis of all the means available to the office.
- **Source instrument:** R-35 § 1 (Circular)

- **Explicit or implicit:** Explicit
- **Textual presence in circular:** PRESENT — verbatim in circular § 1, section 1.1.2.1

REQUIREMENT 4

- **Exact obligation:** The NAV office shall be particularly attentive toward persons with little social connection, persons in transitional or establishment phases, and children and young people in disadvantaged families.
- **Source instrument:** R-35 § 1 (Circular)
- **Explicit or implicit:** Explicit
- **Textual presence in circular:** PRESENT — verbatim in circular § 1, section 1.1.2.1

REQUIREMENT 5

- **Exact obligation:** Children and young people are especially vulnerable in difficult situations, and the NAV office must ensure that their specific needs are taken care of in the family's encounter with the office.
- **Source instrument:** R-35 § 1 (Circular)
- **Explicit or implicit:** Explicit
- **Textual presence in circular:** PRESENT — verbatim in circular § 1, section 1.1.2.1

REQUIREMENT 6

- **Exact obligation:** When a service is provided to several persons, the service offer must be assessed against the purposes of the Act for each individual recipient.
- **Source instrument:** R-35 § 1 (Circular)
- **Explicit or implicit:** Explicit
- **Textual presence in circular:** PRESENT — verbatim in circular § 1, section 1.1.2.1

REQUIREMENT 7

- **Exact obligation:** For example, the allocation of financial assistance to a family must be assessed in accordance with the purposes of the Act for each individual family member in addition to the family as a whole.
- **Source instrument:** R-35 § 1 (Circular)
- **Explicit or implicit:** Explicit (illustrative application of Req 6)
- **Textual presence in circular:** PRESENT — verbatim in circular § 1, section 1.1.2.1

REQUIREMENT 8

- **Exact obligation:** The UN Convention on the Rights of the Child obliges the NAV office to ensure that the best interests of the child is a fundamental consideration in all actions and decisions affecting children.
- **Source instrument:** Kommunebrev 2025
- **Explicit or implicit:** Explicit
- **Textual presence in circular:** ABSENT — not in circular; the circular references the CRC in its value preamble but does not operationalize this as an office-level duty in this form

REQUIREMENT 9

- **Exact obligation:** A concrete and individual assessment must always be carried out in every single case.
- **Source instrument:** Veileder om økonomisk stønad etter sosialtjenesteloven
- **Explicit or implicit:** Explicit
- **Textual presence in circular:** ABSENT — the circular states assessment must occur concretely and individually (Req 3) but does not add the absolute temporal qualifier "always" in every single case

REQUIREMENT 10

- **Exact obligation:** A best interests assessment involves: (i) assessing what the child's best interests are in this context; (ii) weighing that assessment against other considerations; (iii) demonstrating the content of the best interests assessment and explaining the weighting.
- **Source instrument:** Barnets beste — veileder
- **Explicit or implicit:** Explicit
- **Textual presence in circular:** ABSENT

REQUIREMENT 11

- **Exact obligation:** Best interests assessments must be documented so that others can see what assessments have been made and have the possibility of reviewing them.
- **Source instrument:** Barnets beste — veileder
- **Explicit or implicit:** Explicit
- **Textual presence in circular:** ABSENT

REQUIREMENT 12

- **Exact obligation:** What is written about the child in the case must be neutrally descriptive and limited to what is strictly necessary to demonstrate that sufficient consideration has been given to the best interests of the child.
- **Source instrument:** Barnets beste — veileder
- **Explicit or implicit:** Explicit
- **Textual presence in circular:** ABSENT

REQUIREMENT 13

- **Exact obligation:** Information must exist in the case that documents whether the applicant has a need for assistance or not.
- **Source instrument:** Veileder om økonomisk stønad etter sosialtjenesteloven
- **Explicit or implicit:** Explicit
- **Textual presence in circular:** ABSENT

REQUIREMENT 14

- **Exact obligation:** Oral applications may also occur and must be written down in a journal note by the NAV office.
- **Source instrument:** Veileder om økonomisk stønad etter sosialtjenesteloven

- **Explicit or implicit:** Explicit
- **Textual presence in circular:** ABSENT

REQUIREMENT 15

- **Exact obligation:** The NAV office has a duty to record verbal applications.
- **Source instrument:** Veileder til sosialtjenesteloven § 17
- **Explicit or implicit:** Explicit
- **Textual presence in circular:** ABSENT — Note: this requirement derives from a § 17 veileder and is imported into the § 1 normative field

REQUIREMENT 16

- **Exact obligation:** The time point of the application must appear from the case file.
- **Source instrument:** Veileder til sosialtjenesteloven § 17
- **Explicit or implicit:** Explicit
- **Textual presence in circular:** ABSENT

REQUIREMENT 17

- **Exact obligation:** A formal decision (vedtak) about this service must state what information, advice, and guidance has been given.
- **Source instrument:** Veileder til sosialtjenesteloven § 17
- **Explicit or implicit:** Explicit
- **Textual presence in circular:** ABSENT

REQUIREMENT 18

- **Exact obligation:** A closing note must be written — or possibly a closing letter as information for the user — at the conclusion of a service.
- **Source instrument:** Veileder til sosialtjenesteloven § 17
- **Explicit or implicit:** Explicit
- **Textual presence in circular:** ABSENT

REQUIREMENT 19

- **Exact obligation:** What has been done and what solutions have been chosen must be written in a closing note.
- **Source instrument:** Veileder til sosialtjenesteloven § 17
- **Explicit or implicit:** Explicit
- **Textual presence in circular:** ABSENT

REQUIREMENT 20

- **Exact obligation:** The employer must map and document risks at work that, individually or collectively, may give rise to risk of violence and threats in all forms of user meetings.
- **Source instrument:** Standard for trygge brukermøter i NAV
- **Explicit or implicit:** Explicit
- **Textual presence in circular:** ABSENT

REQUIREMENT 21

- **Exact obligation:** All established safety measures must be documented and made available to all employees at the unit.
- **Source instrument:** Standard for trygge brukermøter i NAV
- **Explicit or implicit:** Explicit
- **Textual presence in circular:** ABSENT

STEP 2 — LEGAL AUTHORITY CHECK

REQUIREMENT 1

- **Direction 1 — Circular authority:** YES — textually present in circular § 1
- **Direction 2 — Statutory authority:** YES — this is a standard statutory interpretation rule; the circular restates what is inherent in applying any purposive statute; no authority gap
- **Double authority gap:** NO
- **Category error:** NO

REQUIREMENT 2

- **Direction 1 — Circular authority:** YES — textually present
- **Direction 2 — Statutory authority:** PARTIAL — the circular extends the statutory formulation by adding a specific "co-design" obligation. The statute says services "shall" be oriented toward the Act's purposes; the circular converts the discretionary professional judgment about how to shape services into a specific methodological obligation (co-design with the recipient). The Process Inflation Finding for PROC-REQ-1.2 notes this "introduces a specific user co-design methodology/obligation that is not prescribed within the text of § 1, which leaves service design methods entirely open."
- **Double authority gap:** NO (circular authority present; statutory authority only partial)
- **Category error:** NO

REQUIREMENT 3

- **Direction 1 — Circular authority:** YES — textually present
- **Direction 2 — Statutory authority:** PARTIAL — the circular text restates language from the statute regarding the path to work. However, the Process Inflation Finding for PROC-REQ-1.3 identifies that "the law's permissive framing regarding a capacity to give help is converted into a mandatory assessment methodology, thereby eliminating the office's discretion to determine its own assessment approach." The statute affords open how-discretion; the circular converts this into a mandatory methodology.
- **Double authority gap:** NO
- **Category error:** NO

REQUIREMENT 4

- **Direction 1 — Circular authority:** YES — textually present
- **Direction 2 — Statutory authority:** YES — the circular identifies specific vulnerable groups as illustrations of the statutory concept "vanskeligstilte." The Process Inflation Finding classifies this as a SUBSTANTIVE LEGAL OBLIGATION, noting it "substitut[es] fixed substantive sub-criteria for the open normative term 'vanskeligstilte,' thereby defining exactly who qualifies for protection." While this narrows the statutory term, the obligation remains grounded in the statute's own protective framework.
- **Double authority gap:** NO
- **Category error:** NO

REQUIREMENT 5

- **Direction 1 — Circular authority:** YES — textually present
- **Direction 2 — Statutory authority:** PARTIAL — the Process Inflation Finding for PROC-REQ-1.5 notes this "escalates the law's broad directional goal of 'contributing to' service provision into a concrete, context-specific outcome-ensuring obligation during family meetings." The statute states a broad directional value; the circular mandates a specific operational outcome at a specific moment (the family meeting with the office). No statutory provision specifies this operational trigger.
- **Double authority gap:** NO (circular authority present)
- **Category error:** NO

REQUIREMENT 6

- **Direction 1 — Circular authority:** YES — textually present
- **Direction 2 — Statutory authority:** PARTIAL — the Process Inflation Finding for PROC-REQ-1.6 notes this "converts a general individual value reference in § 1 into a specific, mandatory assessment procedure governing multi-recipient service contexts." The statute contains no such procedural instruction; the obligation arises from the circular's elaboration.
- **Double authority gap:** NO
- **Category error:** NO

REQUIREMENT 7

- **Direction 1 — Circular authority:** YES — textually present
- **Direction 2 — Statutory authority:** PARTIAL — the Process Inflation Finding for PROC-REQ-1.7 identifies that this "submits the open purpose of contributing to financial security to a fixed, mandatory two-level (per-member and per-family) assessment methodology absent from § 1." The two-level methodology is a circular construction with no statutory basis.
- **Double authority gap:** NO
- **Category error:** NO

REQUIREMENT 8

- **Direction 1 — Circular authority:** NO — source is Kommunebrev 2025; not in circular. **First-order authority gap: this requirement operates outside the circular framework entirely.**
- **Direction 2 — Statutory authority:** PARTIAL — the duty to consider the best interests of the child is grounded in the UN Convention on the Rights of the Child (incorporated into Norwegian law via menneskerettsloven) and Grunnloven § 104, giving it strong constitutional and international law anchoring. However, the specific formulation as a NAV office duty operative "in all actions and decisions affecting children" at the level of individual case handling derives from the Kommunebrev, not from any provision of sosialtjenesteloven § 1 itself. The circular acknowledges the CRC in its preamble but does not operationalize this as a specific duty in this form. The statutory basis is thus real but the operationalization instrument is sub-legal.
- **Double authority gap:** NO (statutory authority PARTIAL from international/constitutional law, not NO)
- **Category error:** NO — the obligation relates to social services users (children)

REQUIREMENT 9

- **Direction 1 — Circular authority:** NO — source is Veileder om økonomisk stønad; not in circular. **First-order authority gap.**
- **Direction 2 — Statutory authority:** PARTIAL — the requirement for individual, concrete assessment is broadly implied in sosialtjenesteloven's general structure. However, the Process Inflation Finding for PROC-REQ-1.9 identifies that "the absolute 'always must' requirement eliminates any contextual flexibility that would otherwise exist under § 1's open evidence-discretion." The absolute qualifier ("always" / "every single case") has no statutory anchor and converts a general principle into a rigid rule.
- **Double authority gap:** YES — circular authority ABSENT and statutory authority PARTIAL. The absolute formulation lacks both circular and statutory grounding.
- **Category error:** NO

REQUIREMENT 10

- **Direction 1 — Circular authority:** NO — source is Barnets beste — veileder; not in circular. **First-order authority gap.**
- **Direction 2 — Statutory authority:** PARTIAL — the Process Inflation Finding for PROC-REQ-1.10 notes this "substitutes the open normative standard of a 'comprehensive and coordinated service offer' with a fixed, sequentially ordered three-step procedural framework." The three-step sequence (assess → weigh → demonstrate/explain) is a veileder construction with no statutory text. The underlying obligation to consider children's best interests has constitutional grounding; the specific sequential framework does not.
- **Double authority gap:** YES — circular authority ABSENT and statutory authority PARTIAL. The procedural sequencing has no basis in the circular or the statute.
- **Category error:** NO

REQUIREMENT 11

- **Direction 1 — Circular authority:** NO — source is Barnets beste — veileder; not in circular. **First-order authority gap.**
- **Direction 2 — Statutory authority:** NO — the Process Inflation Finding for DOC-REQ-1.1 states this "mandates an absolute documentation obligation in an area where § 1 is fully silent." The general documentation principles of forvaltningsloven do not specifically mandate documentation of barnets beste assessments in this form. § 1 contains no documentation requirements of any kind.
- **Double authority gap:** YES — circular authority ABSENT and statutory authority NO.
- **Category error:** NO

REQUIREMENT 12

- **Direction 1 — Circular authority:** NO — source is Barnets beste — veileder; not in circular. **First-order authority gap.**
- **Direction 2 — Statutory authority:** NO — the Process Inflation Finding for DOC-REQ-1.2 confirms that "§ 1 is completely silent on administrative case file content and neutrality requirements." No provision of sosialtjenesteloven specifies content standards for what is written about a child in a case file.
- **Double authority gap:** YES — circular authority ABSENT and statutory authority NO.
- **Category error:** NO

REQUIREMENT 13

- **Direction 1 — Circular authority:** NO — source is Veileder om økonomisk stønad; not in circular. **First-order authority gap.**
- **Direction 2 — Statutory authority:** PARTIAL — documentation of need is broadly implied in general administrative law principles (forvaltningsloven's requirement for sufficiently documented decisions), but § 1 itself contains no documentation requirements. The Process Inflation Finding for DOC-REQ-1.3 confirms "§ 1's evidence-discretion is completely open and non-prescriptive regarding documentation."
- **Double authority gap:** YES — circular authority ABSENT and statutory authority PARTIAL (no § 1 anchor; only indirect forvaltningsloven basis).
- **Category error:** NO

REQUIREMENT 14

- **Direction 1 — Circular authority:** NO — source is Veileder om økonomisk stønad; not in circular. **First-order authority gap.**
- **Direction 2 — Statutory authority:** PARTIAL — the duty to accept and process applications (including oral ones) has a basis in forvaltningsloven § 11a and the general principle that rights should be accessible. The Process Inflation Finding for DOC-REQ-1.4 notes a "specific recording requirement (albeit conditionally applied) that lacks procedural anchoring within the open framework of § 1." The recording in journal note specifically is a sub-legal elaboration.
- **Double authority gap:** YES — circular authority ABSENT and statutory authority PARTIAL.

- **Category error:** NO

REQUIREMENT 15

- **Direction 1 — Circular authority:** NO — source is Veileder til sosialtjenesteloven § 17; not in circular for § 1. **First-order authority gap.** Additional structural note: this requirement belongs to the § 17 normative apparatus and is not a § 1 obligation at all, suggesting a secondary category error of normative displacement.
- **Direction 2 — Statutory authority:** PARTIAL — a basis may exist in § 17 and forvaltningsloven for recording verbal applications, but: (a) that basis applies to § 17, not § 1; (b) the Process Inflation Finding for DOC-REQ-1.5 notes this "establishes a non-derogable, unconditional procedural duty regarding the administration of applications in an area where § 1 provides open how-discretion."
- **Double authority gap:** YES — circular authority ABSENT and statutory authority PARTIAL at best (with the additional problem that any statutory authority derives from § 17, not § 1).
- **Category error:** PARTIAL — this requirement belongs to the § 17 normative domain and should not be operating as a § 1 obligation.

REQUIREMENT 16

- **Direction 1 — Circular authority:** NO — source is Veileder til sosialtjenesteloven § 17; not in circular for § 1. **First-order authority gap.** Same structural displacement as Req 15.
- **Direction 2 — Statutory authority:** NO — the Process Inflation Finding for DOC-REQ-1.6 identifies this as a "highly specific case file content item" mandated in an area "where § 1 contains no documentation requirements and how-discretion remains completely open." A timestamp requirement has no statutory basis in § 1 or § 17 text.
- **Double authority gap:** YES — circular authority ABSENT and statutory authority NO.
- **Category error:** PARTIAL — belongs to § 17 normative domain.

REQUIREMENT 17

- **Direction 1 — Circular authority:** NO — source is Veileder til sosialtjenesteloven § 17; not in circular for § 1. **First-order authority gap.**
- **Direction 2 — Statutory authority:** PARTIAL — forvaltningsloven requires that administrative decisions (enkeltvedtak) state the legal basis and factual grounds. However, the specific requirement to state what information, advice, and guidance was given within the vedtak is a sub-legal elaboration of what vedtak content must include. The Process Inflation Finding for DOC-REQ-1.7 identifies this as converting "an open normative term into a rigid mandate regarding the exact content that must legally be recorded in formal administrative decisions."
- **Double authority gap:** YES — circular authority ABSENT and statutory authority PARTIAL.
- **Category error:** PARTIAL — belongs to § 17 normative domain.

REQUIREMENT 18

- **Direction 1 — Circular authority:** NO — source is Veileder til sosialtjenesteloven § 17; not in circular for § 1. **First-order authority gap.**
- **Direction 2 — Statutory authority:** NO — the Process Inflation Finding for DOC-REQ-1.8 notes this "mandates an absolute procedural closing step and document in an area where § 1 affords open how-discretion and is entirely silent on service conclusion protocols." No provision of sosialtjenesteloven or forvaltningsloven mandates a closing note or letter at service conclusion.
- **Double authority gap:** YES — circular authority ABSENT and statutory authority NO.
- **Category error:** PARTIAL — belongs to § 17 normative domain.

REQUIREMENT 19

- **Direction 1 — Circular authority:** NO — source is Veileder til sosialtjenesteloven § 17; not in circular for § 1. **First-order authority gap.**
- **Direction 2 — Statutory authority:** NO — the Process Inflation Finding for DOC-REQ-1.9 states this "converts the open discretionary space of service administration into a precise, fixed-content documentation mandate at closure, lacking any valid statutory anchor."
- **Double authority gap:** YES — circular authority ABSENT and statutory authority NO.
- **Category error:** PARTIAL — belongs to § 17 normative domain.

REQUIREMENT 20

- **Direction 1 — Circular authority:** NO — source is Standard for trygge brukermøter i NAV; not in circular. **First-order authority gap.**
- **Direction 2 — Statutory authority:** NO as a social services obligation — the Process Inflation Finding for DOC-REQ-1.10 is explicit: "This administrative mandate operates independently on the basis of AML occupational safety regulations, rendering § 1 only a thematic anchor rather than a true statutory source for the documentation requirement." The legal basis is arbeidsmiljøloven (AML), not sosialtjenesteloven.
- **Double authority gap:** YES — circular authority ABSENT and statutory authority NO under sosialtjenesteloven.
- **Category error:** YES — this requirement belongs to the occupational safety/labor law domain (arbeidsmiljøloven), not to the social services domain. The obligation runs from employer to employee, not from NAV office to service user.

REQUIREMENT 21

- **Direction 1 — Circular authority:** NO — source is Standard for trygge brukermøter i NAV; not in circular. **First-order authority gap.**
- **Direction 2 — Statutory authority:** NO as a social services obligation — the Process Inflation Finding for DOC-REQ-1.11 notes "the legal mandate strictly derives from an independent occupational safety regulation (Forskrift om utførelse av arbeid), completely bypassing the administrative discretion of § 1."
- **Double authority gap:** YES — circular authority ABSENT and statutory authority NO under sosialtjenesteloven.

- **Category error:** YES — same as Req 20: labor law / occupational safety domain.

STEP 3 — SCALE AND PROPORTIONALITY CHECK

Cross-reference against Volume Driver Findings (Anchor Document).

REQUIREMENT 1

- Scale flag: NO — a statutory interpretation rule does not presuppose organizational capacity or case volume.

REQUIREMENT 2

- Scale flag: PARTIAL — the co-design obligation per the Anchor Document intersects with the [D] Documentation Apparatus mechanism insofar as documenting participatory service design in small offices adds administrative overhead. However, no specific volume driver finding targets this requirement directly. The general finding that small offices substitute personal knowledge for bureaucratic record-keeping applies obliquely.

REQUIREMENT 3

- Scale flag: PARTIAL — the mandatory individual assessment methodology connects to the Anchor Document's [K] Competence Sustainability mechanism. The finding that municipalities processing very few cases per year cannot maintain the procedural competence required (Nes: 14 formal decisions per year; Verdal: 5–8 per year) applies to the mandatory individual assessment methodology. Where an office processes too few cases, the "concrete and individual" assessment cannot become a habituated routine. **This requirement lacks circular authority only in its mandatory-methodology dimension (Step 2), meaning any scale-related burden from that dimension is unsupported by the circular framework.**

REQUIREMENT 4

- Scale flag: NO — identifying specific vulnerable groups as interpretive guidance does not presuppose organizational capacity.

REQUIREMENT 5

- Scale flag: PARTIAL — the outcome-ensuring obligation for children's needs in family meetings connects to the Anchor Document's child-perspective documentation cluster (Cluster 3). The finding that "caseworkers verbally know what they should do but fail to document it" appears across 15+ municipalities and is driven by the combination of documentation demands and competence degradation in low-volume environments. The outcome-ensuring obligation in § 1 is the upstream normative source for the downstream documentation cascade. **The escalation of a directional goal into a concrete outcome obligation (Step 2) means any scale-related**

burden arising from the resulting documentation and operational obligations operates without a clear circular foundation for its mandatory form.

REQUIREMENT 6

- Scale flag: YES — the mandatory per-recipient assessment procedure in multi-recipient service scenarios directly connects to the Anchor Document's finding on individual needs-based calculation. The Anchor Document notes that "municipalities default to standard [aggregate] rates precisely when case volume is too low to sustain discretionary assessment practice." Imposing mandatory individual assessments for each family member (Req 6 and 7) on offices that encounter such multi-recipient situations infrequently produces the same [K] competence decay dynamic. Specific Anchor Document finding applicable: "individual needs-based calculation (scale-neutral per Set A)... may be volume-sensitive in practice" — the parallel concern for multi-recipient assessment is structurally identical. **This requirement lacks circular authority only in its mandatory-procedure dimension; the scale burden it imposes therefore operates without regulatory foundation for that dimension.**

REQUIREMENT 7

- Scale flag: YES — the two-level family assessment methodology (per-member and per-family) is structurally more demanding than Req 6 and presupposes the organizational capacity to conduct separate assessments for each family member. The Anchor Document's child-perspective documentation cluster (Cluster 3) specifically documents that "the documentation requirements presuppose a specialization that the scale does not support." Generalist offices encountering families with children infrequently cannot sustain the competence to execute two-level assessments reliably. **The two-level methodology is a circular construction with no statutory anchor (Step 2); any scale burden it imposes is therefore entirely unsupported by the circular.**

REQUIREMENT 8

- Scale flag: PARTIAL — the best interests of the child obligation as operationalized through the Kommunebrev directly connects to the Anchor Document's child-perspective documentation cluster. The finding that "caseworkers verbally conduct the assessments while failing to document them" is confirmed across 15+ municipalities. The Kommunebrev's formulation as applicable to "all actions and decisions affecting children" intensifies the breadth and frequency of the trigger. **This requirement lacks circular authority (Step 2); the scale burden it imposes operates outside any framework the circular provides guidance for.**

REQUIREMENT 9

- Scale flag: YES — the absolute "always must" assessment formulation directly connects to the Anchor Document's [P] Procedural Continuity mechanism. The finding that a procedural pipeline "cannot become habitual when triggered fewer than 10–15 times per year" (Midtre Gauldal, Skaun, Verdal, Sogndal) means the absolute

obligation to conduct a concrete and individual assessment "in every single case" cannot be institutionalized as a reliable routine in low-volume offices. Specific finding: "municipalities processing fewer than ~20 formal cases annually" cannot build the procedural pipeline. **This requirement constitutes a double authority gap (Step 2); any scale burden it imposes operates without regulatory foundation in the circular or the statute.**

REQUIREMENT 10

- Scale flag: YES — the mandatory three-step sequential framework for best interests assessments connects directly to the Anchor Document's [K] Competence Sustainability mechanism and child-perspective documentation cluster. The finding that "caseworkers who encounter child-welfare assessments infrequently cannot reasonably be expected to both maintain the substantive competence [K] and execute the documentation pipeline [D] to the standard assumed" is directly applicable. The three-step sequence presupposes repeated practice to become a reliable cognitive and administrative routine. **This requirement constitutes a double authority gap (Step 2); scale burden operates without regulatory foundation.**

REQUIREMENT 11

- Scale flag: YES — mandatory documentation of best interests assessments is a direct instantiation of the Anchor Document's [D] Documentation Apparatus mechanism — the single most empirically dominant mechanism across all supervision reports (65 findings; ~42% of all Set B occurrences). The Anchor Document's core structural finding applies verbatim: "caseworkers in small offices actually deliver the service, often effectively and to the satisfaction of users, but fail to translate this delivery into the formal administrative record expected by the supervision standard." Specific confirming finding: documentation of children's needs in writing even when caseworkers demonstrably possess that knowledge is explicitly listed among recurrent [D] obligations. **This requirement constitutes a double authority gap; disproportionate burden imposed without regulatory foundation.**

REQUIREMENT 12

- Scale flag: PARTIAL — content standards for case file entries connect to [D] Documentation Apparatus. The Anchor Document identifies the pattern of small offices maintaining tacit knowledge about families without converting it to written records. The neutrality and necessity standards in Req 12 add a qualitative layer to the documentation obligation that requires more sophisticated caseworker judgment and more time per entry. **This requirement constitutes a double authority gap; burden without regulatory foundation.**

REQUIREMENT 13

- Scale flag: YES — the obligation to have case file documentation of need directly instantiates [D] Documentation Apparatus. The Anchor Document's finding that "the phrase 'caseworkers knew more about the users' situations than the journals

reflected' appears — with only minor variation — in findings from Nordreisa, Nannestad, Giske, Nav Numedal, Senja, Hjelmeland, Karlsøy, Årdal, Salangen, Vennesla, and Målselv-Bardu" confirms that this documentation obligation is the structural source of systemic compliance failure in small offices. **Double authority gap; burden without regulatory foundation in the circular.**

REQUIREMENT 14

- Scale flag: YES — recording oral applications in journal notes connects to [P] Procedural Continuity (oral application registration) and [D] Documentation Apparatus. The Anchor Document specifically identifies "formalizing oral applications" as a distinct [P] sub-mechanism: "the inability to maintain a repeatable pipeline for formalizing oral applications into statutory requests, documented in Skaun, Høyanger, Verdal, and Sogndal." **Double authority gap; burden without regulatory foundation.**

REQUIREMENT 15

- Scale flag: YES — the unconditional duty to record verbal applications connects to [P] Procedural Continuity. The Anchor Document finds that oral application registration "cannot become habitual when triggered fewer than 10–15 times per year." **Double authority gap with partial category error; burden entirely without regulatory foundation — and derived from a § 17 instrument that has no authority over § 1 obligations.**

REQUIREMENT 16

- Scale flag: YES — the timestamp requirement is a specific [D] Documentation Apparatus obligation. While individually modest, it operates as part of the § 17 documentation stack (Cluster 1 in the Anchor Document), which the Anchor Document confirms "impose a triple documentation burden — formal decision + journal + contact archive — on every single advisory interaction." The Anchor Document identifies the start-deadline/timestamp requirement as "the single most frequently sanctioned element across the entire dataset." **Double authority gap; burden without regulatory foundation.**

REQUIREMENT 17

- Scale flag: YES — mandatory vedtak content requirements are part of [D] Documentation Apparatus and [P] Procedural Continuity. The Anchor Document identifies the obligation to state what advice was given in vedtak as part of the § 17 documentation compliance stack. Specific finding: "requiring a vedtak must precede or accompany service commencement" with specific content constitutes part of the triple documentation burden. **Double authority gap; burden without regulatory foundation.**

REQUIREMENT 18

- Scale flag: YES — the mandatory closing note/letter requirement instantiates [D] Documentation Apparatus at service conclusion. The Anchor Document documents that "services are provided immediately and effectively, but municipalities are sanctioned because help preceded paperwork" — the closing documentation requirement is the final layer of this administrative pipeline. In offices with low § 17 case frequency, the closing note routine cannot become habitual. **Double authority gap; burden without regulatory foundation.**

REQUIREMENT 19

- Scale flag: YES — mandatory closing note content requirements are a specific [D] Documentation Apparatus obligation. Same structural finding as Req 18 applies. **Double authority gap; burden without regulatory foundation.**

REQUIREMENT 20

- Scale flag: PARTIAL — employer risk-mapping obligations connect to the Anchor Document's internal control apparatus cluster (Cluster 2), which documents that "the cumulative demand falls on the Nav leader, who is simultaneously the primary caseworker, the decision approver, the system administrator for deviation software, the author of ROS analyses." ROS-type analyses are part of this cluster. **Double authority gap with full category error; any burden this imposes in the social services context is entirely without regulatory foundation in the circular or the Social Services Act.**

REQUIREMENT 21

- Scale flag: PARTIAL — documentation of safety measures connects to [D] Documentation Apparatus. The Anchor Document's internal control cluster finding that deviation software is "unknown, inaccessible, or felt to be redundant" in small offices applies structurally to safety measure documentation systems. **Double authority gap with full category error; burden without regulatory foundation.**

STEP 4 — PURPOSE CLASSIFICATION

REQUIREMENT 1

- **Classification:** [USER NEED]
- **Justification:** A statutory interpretation rule whose sole function is to direct the content of case decisions toward the Act's purposes. It has no documentation or reporting function. The circular states it guides "tolkingen av enkeltbestemmelsene i loven" — interpretation of individual provisions — which directly governs the quality and fairness of each user's case outcome.

REQUIREMENT 2

- **Classification:** [MIXED] — primary: USER NEED; secondary: INTERNAL CONTROL
- **Justification:** The core obligation — services designed in cooperation with the recipient — directly serves user interests by making services responsive to individual circumstances. However, the co-design methodology element also creates an administrative trail of obligation that can be subject to supervision review. The primary driver is user benefit; the secondary driver is the demonstration of that benefit to supervisory actors.

REQUIREMENT 3

- **Classification:** [MIXED] — primary: USER NEED; secondary: INTERNAL CONTROL
- **Justification:** Concrete individual assessment of available means directly serves the user by ensuring the best available help is identified. The mandatory-methodology dimension (as opposed to a professional discretion standard) also serves the auditability of the decision — "concrete and individual" assessment can be verified in the case file. The primary function remains user-serving; the methodology requirement introduces an auditability dimension.

REQUIREMENT 4

- **Classification:** [USER NEED]
- **Justification:** Identifying specific vulnerable groups for heightened attention is a pure protective provision. It directly governs who receives special consideration in the assessment process and has no documentation or reporting dimension.

REQUIREMENT 5

- **Classification:** [MIXED] — primary: USER NEED; secondary: INTERNAL CONTROL
- **Justification:** Ensuring children's specific needs are protected in family meetings primarily serves those children's welfare — a direct user benefit. The "must ensure" formulation also creates a standard that supervision can verify, introducing an internal accountability dimension. Primary function is protective; the supervisability of the outcome is secondary.

REQUIREMENT 6

- **Classification:** [MIXED] — primary: USER NEED; secondary: INTERNAL CONTROL
- **Justification:** Individual assessment in multi-recipient scenarios primarily protects each recipient's right to an individually tailored decision, directly serving legal security. The mandatory-procedure dimension converts this into a verifiable administrative step that also serves audit and control functions.

REQUIREMENT 7

- **Classification:** [MIXED] — primary: USER NEED; secondary: INTERNAL CONTROL
- **Justification:** Per-member family assessment serves the user by ensuring each child and family member's rights are individually considered. The two-level mandatory methodology also creates a verifiable administrative structure. Primary function is user protection; the fixed methodology imposes an additional control layer.

REQUIREMENT 8

- **Classification:** [USER NEED]
- **Justification:** The best interests of the child as a fundamental consideration in all actions and decisions affecting children is a constitutional and international human rights protection. Its function is entirely directed at protecting the child's legal security and welfare outcome. The Kommunebrev formulation does not add a reporting or documentation function; it amplifies the protective scope.

REQUIREMENT 9

- **Classification:** [MIXED] — primary: USER NEED; secondary: INTERNAL CONTROL
- **Justification:** Concrete individual assessment in every case serves the user by preventing standardized or formulaic decisions. The absolute "always must" formulation, however, primarily creates an unambiguous supervisory standard: compliance is easy to verify (did an individual assessment occur?) and non-compliance is easy to sanction. The primary beneficiary is the user; the absolute form serves audit and control. As a veileder operating in a domain the circular leaves open, the framing is explicitly oriented toward the verifiability of compliance.

REQUIREMENT 10

- **Classification:** [MIXED] — primary: USER NEED; secondary: INTERNAL CONTROL
- **Justification:** The substantive content of a best interests assessment (steps i and ii — assess and weigh) serves the child's legal security. However, step iii — demonstrating the content of the assessment and explaining the weighting — is explicitly an accountability and verifiability requirement. The veileder source states the three-step framework enables "others" to review the assessments. The primary purpose of steps i–ii is the child's welfare; step iii is internal control / supervisory verifiability.

REQUIREMENT 11

- **Classification:** [INTERNAL CONTROL]
- **Justification:** The veileder text explicitly states the documentation obligation exists so "that others can see what assessments have been made and have the possibility of reviewing them" — this is an unambiguous statement of audit purpose. The documentation itself adds nothing to the quality of the assessment made; it only creates a verifiable record. The Process Inflation Finding for DOC-REQ-1.1 confirms

this as "an absolute documentation obligation" with no direct bearing on the child's case outcome beyond what the assessment itself (Req 10) already delivers.

REQUIREMENT 12

- **Classification:** [INTERNAL CONTROL]
- **Justification:** Content standards for case file entries (neutrally descriptive, strictly limited to necessity) are editorial and administrative norms governing the form of records, not their substance. They serve the interests of internal record management, legal defensibility, and data minimization compliance — not the child's case outcome. Nothing in the content standard rule changes the assessment made; it only shapes how the record of that assessment is managed.

REQUIREMENT 13

- **Classification:** [INTERNAL CONTROL]
- **Justification:** The obligation that case files must document whether need exists is a file-integrity requirement serving internal audit functions: supervision can verify that a needs assessment was conducted and its conclusion recorded. It does not change the assessment itself. The veileder context is explicit that the documentation serves to demonstrate the exercise of discretion to external reviewers — a control function, not a user-serving one.

REQUIREMENT 14

- **Classification:** [INTERNAL CONTROL]
- **Justification:** Recording an oral application in a journal note serves the administrative trail — creating a verifiable record of when and how an application was made. It has no effect on the substantive outcome for the user. The requirement exists to enable supervision review of application handling, not to improve the quality of the case assessment.

REQUIREMENT 15

- **Classification:** [INTERNAL CONTROL]
- **Justification:** The duty to record verbal applications is a procedural formalization requirement serving the supervisory traceability of the service pipeline. As the Process Inflation Finding for DOC-REQ-1.5 notes, this establishes an "unconditional procedural duty" — its function is to create a verifiable administrative record of application receipt, not to improve the quality of the help given. The obligation runs toward the administrative system, not toward the user.

REQUIREMENT 16

- **Classification:** [INTERNAL CONTROL]
- **Justification:** A timestamp in the case file is purely an audit and traceability tool. It serves supervisory verification of whether applications were processed within statutory timeframes (forvaltningsloven § 11a). It has no effect on the quality or

fairness of the assessment. The obligation runs entirely toward the administrative control system.

REQUIREMENT 17

- **Classification:** [MIXED] — primary: INTERNAL CONTROL; secondary: USER NEED
- **Justification:** Stating in the vedtak what advice was given serves two purposes. Primarily, it creates a verifiable record of service content for supervisory review — an audit trail. Secondarily, it may benefit the user by providing a written summary of what was agreed. Given that the user was present for the advice and the primary framing in the veileder is about the vedtak's role as an administrative document, the primary function is internal control; user benefit is secondary.

REQUIREMENT 18

- **Classification:** [INTERNAL CONTROL]
- **Justification:** A mandatory closing note or letter is a procedural closing step that creates an administrative record of service completion. The "eventuelt et avslutningsbrev som informasjon til brukeren" framing acknowledges a user-communication dimension, but the mandatory closing note (as distinct from the optional letter) is explicitly an administrative record-keeping requirement. The primary function is to document closure for internal and supervisory purposes.

REQUIREMENT 19

- **Classification:** [INTERNAL CONTROL]
- **Justification:** The specific content requirements for the closing note (what was done, what solutions were chosen) serve internal audit and accountability functions. They document the service delivered for supervisory verification. The obligation runs toward the administrative record, not toward improving the service outcome for the user, who has already received that service by the point of closure.

REQUIREMENT 20

- **Classification:** [INTERNAL CONTROL] — in the social services context
- **Justification:** Employer risk-mapping for violence and threats during user meetings serves occupational safety management functions in the AML domain — the obligation runs from employer to employee, not from the NAV office to the service user. In the social services context, it performs no function related to the quality, fairness, or legal security of any user's case assessment. It is an internal safety management obligation entirely external to the social services normative framework.

REQUIREMENT 21

- **Classification:** [INTERNAL CONTROL] — in the social services context
- **Justification:** Documentation of safety measures and their availability to employees is a workplace governance obligation in the AML domain. In the social services

context, it has no effect on any user's case outcome. It is an internal administrative obligation entirely external to the social services normative framework.

STEP 5 — TRANSACTION COST CHARACTERIZATION

Requirements classified as [USER NEED] with no additional mandatory-methodology burden (Requirements 1, 4, 8) generate no transaction cost burden — they direct the substantive content of decisions toward user protection without creating administrative process obligations beyond what those decisions inherently require. No burden statement is issued for these.

REQUIREMENT 2 [MIXED] A caseworker must ensure that service design occurs in cooperation with the recipient and must be prepared to demonstrate, if audited, that co-design occurred. In practice this means keeping a record of how the user's preferences were incorporated into the service plan. For supervisory purposes, informal knowledge of the user's preferences is insufficient; the co-design process must be traceable. The transaction cost is moderate: it adds a co-design documentation layer to each service engagement. This burden has partial circular authority — the circular supports the co-design obligation but does not specify the documentation of co-design, meaning caseworkers must meet an expectation the circular does not fully spell out.

REQUIREMENT 3 [MIXED] A caseworker must apply and document a specific assessment methodology — identifying all available means and demonstrating that the best path to work was chosen — rather than relying on professional judgment about which means are appropriate. Where audited, the caseworker must produce a case record showing that all available means were considered. This is a methodological compliance demand layered on top of the substantive decision. The transaction cost is moderate and increases with caseload complexity. This burden is partially supported by the circular, but the mandatory-methodology dimension (as distinct from the professional assessment obligation) operates without a clear circular framework that specifies what "all available means" documentation looks like.

REQUIREMENT 5 [MIXED] A caseworker handling family cases must specifically document that children's needs were identified and addressed in the family meeting with the office. The "must ensure" formulation implies that caseworkers must be able to demonstrate — through their case files or notes — that the outcome-ensuring obligation was met. In practice: a specific reference to children's situation and how the office addressed their needs must appear in each family case record. The transaction cost is low to moderate per individual case, but across a high proportion of family cases adds cumulatively. Because the outcome-ensuring obligation escalates beyond what the circular's directional goal supports (Step 2), caseworkers must meet a standard the circular does not directly authorize.

REQUIREMENT 6 [MIXED] A caseworker must, for every service involving multiple recipients, conduct separate assessments for each individual and document these assessments individually in the case file. This is a multiplication of assessment and documentation work proportional to the number of recipients per case. For family cases

involving several members, the caseworker must produce evidence that each member's situation was individually assessed against the Act's purposes. The transaction cost is moderate to high in family-intensive caseloads. The mandatory-procedure dimension operates without statutory support (Step 2), meaning caseworkers must satisfy an administrative methodology requirement that the statute itself does not prescribe.

REQUIREMENT 7 [MIXED] A caseworker allocating financial assistance to a family must produce a two-level assessment: one for the family as a whole and individual assessments for each member. The transaction cost is the production and documentation of this two-level structure in every family financial assistance decision. In offices with high family caseloads this is a significant cumulative burden. The two-level methodology is a circular construction with no statutory anchor; caseworkers must comply with an obligation the statute does not require.

REQUIREMENT 9 [MIXED] A caseworker must conduct and be able to demonstrate a concrete, individual assessment in every single case without exception. The absolute formulation means no case may be disposed of through a standardized review process, even where cases are structurally identical. Each case file must contain evidence of individualization. In high-volume offices this is manageable; in offices processing 5–20 relevant cases per year, the routine cannot be institutionalized and each case triggers a full compliance exercise from a standing start. Transaction cost: moderate to high depending on volume. This requirement constitutes a double authority gap: caseworkers must comply with an absolute obligation that neither the circular nor the statute in its absolute form supports, with no regulatory guidance available.

REQUIREMENT 10 [MIXED — secondary: INTERNAL CONTROL] A caseworker must execute a three-step sequential process for every best interests assessment and must produce evidence of each step. Step iii — demonstrating and explaining the weighting — is particularly demanding because it requires explicit articulation of how competing considerations were balanced, a sophisticated legal-reasoning task. The transaction cost per case is moderate to high, depending on the complexity of the child's circumstances. Caseworkers must comply with a three-step procedural framework the circular does not mention and the statute does not prescribe, with no circular-level guidance available on how to discharge the obligation.

REQUIREMENT 11 [INTERNAL CONTROL] A caseworker must produce a written record of the best interests assessment — separate from or incorporated into the case decision — that is legible to external reviewers. What must be documented: the content of the assessment, the considerations weighed, and the reasoning behind the weighting (connecting to Req 10, step iii). For whom: supervisory actors (Statsforvalteren), internal quality control, and potential appeal authorities. The transaction cost is moderate per case but is the direct source of the pervasive supervision finding that "caseworkers knew more about the users' situations than the journals reflected." Caseworkers must comply with a documentation obligation that operates entirely outside the circular framework — the circular provides no guidance on how to discharge this obligation, what format to use, or what level of detail suffices.

REQUIREMENT 12 [INTERNAL CONTROL] A caseworker must review and edit entries about children to ensure they are neutrally descriptive and limited to what is strictly necessary. What must be done: after conducting the assessment, the caseworker must apply an editorial quality filter to their case notes. For whom: data minimization compliance, legal defensibility, supervisory audit. The transaction cost is low per entry but requires additional editorial judgment on top of the substantive assessment and documentation. This obligation operates entirely outside the circular framework; caseworkers receive no circular-level guidance on what "neutrally descriptive" or "strictly necessary" means in practice.

REQUIREMENT 13 [INTERNAL CONTROL] A caseworker must ensure that the case file contains explicit documentation of the needs assessment outcome — both a positive finding of need and a documented basis for that finding, or a documented finding that no need exists. What must be documented: the needs assessment conclusion and its evidentiary basis. For whom: supervisory verification, appeal handling. Transaction cost: low to moderate per case, but it requires that the evidentiary basis be rendered explicit in writing rather than remaining in the caseworker's professional judgment. This operates outside the circular framework; no circular guidance exists for what level of documentation of need suffices.

REQUIREMENT 14 [INTERNAL CONTROL] A caseworker must, when receiving an oral application, write a journal note recording the application. What must be documented: the date, content, and nature of the oral application. For whom: the case record, supervisory audit. Transaction cost: low per instance, but in offices where oral applications are the norm rather than the exception, the obligation multiplies across a large portion of the caseload. This operates outside the circular framework; caseworkers must comply with an obligation the circular does not address.

REQUIREMENT 15 [INTERNAL CONTROL] A caseworker must record every verbal application in a formal administrative record. What must be done: convert an informal oral communication into a written administrative act, recording the application in the case system. For whom: the administrative pipeline, supervisory audit. Transaction cost: low per instance; high cumulatively in offices where face-to-face oral communication is the dominant mode of service access. Derived from a § 17 veileder with no authority over § 1 obligations — caseworkers must comply with an obligation that the primary normative instrument governing their § 1 work (the circular) does not address, and which derives from a different statutory provision's interpretive apparatus.

REQUIREMENT 16 [INTERNAL CONTROL] A caseworker must record the timestamp of each application in the case file. What must be documented: the specific date (and possibly time) of application receipt. For whom: supervisory verification of application-processing deadlines. Transaction cost: minimal per entry. However, the Anchor Document identifies this as the single most frequently sanctioned documentation element across the dataset — its simplicity is deceptive because it is a mandatory field that cannot be omitted without triggering a formal finding. Derives from a § 17 veileder with no authority over § 1 — caseworkers must meet a compliance obligation the primary normative instrument does not address.

REQUIREMENT 17 [MIXED — primary: INTERNAL CONTROL] A caseworker must include in each vedtak a specific account of what information, advice, and guidance was given. What must be written: a substantive description of the advisory content of the case within the formal decision document. For whom: the vedtak recipient (user) and supervisory audit. Transaction cost: moderate — the vedtak must contain narrative advisory content in addition to its standard legal elements, significantly increasing the drafting burden per decision. Derives from a § 17 veileder with no authority over § 1; caseworkers must satisfy a content standard for formal decisions that the circular does not specify.

REQUIREMENT 18 [INTERNAL CONTROL] A caseworker must, at the conclusion of each service engagement, produce a closing note and optionally a closing letter for the user. What must be written: a document confirming the closure of the service and summarizing what occurred. For whom: the case record, supervisory audit; optionally the user. Transaction cost: low per instance but constitutes an additional mandatory administrative step at every service conclusion. In offices processing low volumes of § 17 cases, the closing note routine cannot become habitual. Derives from a § 17 veileder with no authority over § 1; caseworkers must comply with a service-closure obligation the circular does not address.

REQUIREMENT 19 [INTERNAL CONTROL] A caseworker must document in the closing note: (a) all actions taken and (b) all solutions chosen. What must be written: a substantive retrospective account of the case. For whom: the case record, supervisory audit, internal quality control. Transaction cost: moderate — a substantive summary narrative, not a pro forma closure checkbox. Requires that the caseworker produce an audit-ready account of the entire service engagement at its conclusion. Derives from a § 17 veileder with no authority over § 1; caseworkers must produce documentation meeting a standard the primary normative instrument does not address.

REQUIREMENT 20 [INTERNAL CONTROL] A NAV leader/employer must conduct and document a structured risk assessment identifying all risks that may lead to violence or threats during user meetings, covering all forms of user meetings. What must be documented: the risk assessment itself (typically a ROS analysis), the identified risk categories, and the risk level. For whom: employees at the unit (made available to all), internal safety management, occupational safety supervisory authorities. Transaction cost: significant — a structured risk analysis is not a routine casework task; it requires dedicated management time and a formalized analytical process. The Anchor Document's internal control cluster finding is directly applicable: this obligation falls on the NAV leader who is simultaneously frontline caseworker, approver, and quality controller. This burden falls entirely outside the social services circular framework; caseworkers and leaders must comply with an AML obligation that the circular does not address and that belongs to a different legal domain.

REQUIREMENT 21 [INTERNAL CONTROL] A NAV leader/employer must document all established safety measures and ensure they are accessible to all employees at the unit. What must be documented: each specific safety measure, its nature, its implementation status, and its accessibility. For whom: all employees. Transaction cost: low to moderate — documentation of existing safety measures is less demanding than Req 20's risk mapping, but maintaining an accessible, up-to-date safety measures register requires ongoing

administrative attention. Same circular-framework absence applies: this burden falls entirely outside the social services circular framework and belongs to the AML domain.

STEP 6 — CATALOG ENTRIES

REQUIREMENT ID: § 1 / REQ-01

PROVISION TEXT: When choosing between different interpretive alternatives, the solution that best promotes the purposes of the Act shall be chosen.

SOURCE INSTRUMENT: Circular R-35 § 1

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: YES — standard purposive interpretation principle inherent in the statutory framework; no gap identified.

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: NO — no volume driver connection; this is a legal reasoning rule, not a procedural obligation.

PURPOSE: [USER NEED] — directly governs the substantive content of case decisions in the user's interest.

BURDEN DESCRIPTION: No transaction cost burden identified. This requirement governs legal reasoning, not administrative procedure.

KILL LIST CLASSIFICATION: No Kill List Action — sufficient authority, no disproportionate burden.

TRANSACTION COST CATEGORY: No Transaction Cost Identified

REQUIREMENT ID: § 1 / REQ-02

PROVISION TEXT: Services shall contribute to achieving the purposes of the Act and shall, as far as possible, be designed in cooperation with the recipient.

SOURCE INSTRUMENT: Circular R-35 § 1

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: PARTIAL — the cooperative design element is a circular elaboration of the statute's purpose-oriented service obligation; the methodology is not specified in the statute itself.

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: PARTIAL — documentation of co-design processes connects to [D] Documentation Apparatus; the expectation that co-design be demonstrable adds overhead to service planning in small offices.

PURPOSE: [MIXED] — primary: USER NEED (responsive service design); secondary: INTERNAL CONTROL (demonstrability of co-design).

BURDEN DESCRIPTION: Caseworkers must ensure service design occurs in cooperation with the recipient and must maintain a record showing how user preferences were incorporated. The circular supports the substantive co-design obligation but does not specify how co-design must be documented, creating an expectation gap between circular guidance and supervisory standards.

KILL LIST CLASSIFICATION: Category C — Clarification: the extent to which co-design must be formally documented versus demonstrated through the service outcome should be made explicit to reduce shadow compliance demands.

TRANSACTION COST CATEGORY: Documentation Inflation (secondary)

REQUIREMENT ID: § 1 / REQ-03

PROVISION TEXT: How the NAV office can best provide assistance must be assessed concretely and individually on the basis of all available means.

SOURCE INSTRUMENT: Circular R-35 § 1

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: PARTIAL — the Process Inflation Finding identifies that "the law's permissive framing regarding a capacity to give help is converted into a mandatory assessment methodology." The circular text is present; the mandatory-methodology interpretation eliminates discretion in a way the statute does not.

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: PARTIAL — connects to [K] Competence Sustainability; the mandatory individual methodology cannot become habitual in low-volume offices. The

mandatory-methodology dimension operates without full statutory support, meaning scale burden from that dimension lacks regulatory foundation.

PURPOSE: [MIXED] — primary: USER NEED (concrete individual assessment directly serves the user); secondary: INTERNAL CONTROL (the mandatory methodology creates an auditable standard).

BURDEN DESCRIPTION: Caseworkers must apply and be able to demonstrate a full-range assessment of all available means in each case, rather than exercising professional judgment about which means are relevant. In low-volume offices, this cannot become a habituated practice. The mandatory-methodology framing operates beyond what the statute requires; caseworkers must satisfy an administrative standard that goes beyond clear circular authority for its mandatory form.

KILL LIST CLASSIFICATION: Category C — Clarification: the room for maneuver between a mandatory fixed methodology and professional-judgment assessment should be made explicit in the circular. The current formulation generates shadow binding to a methodology the statute does not prescribe.

TRANSACTION COST CATEGORY: Documentation Inflation; Structural Disproportionality (partial)

REQUIREMENT ID: § 1 / REQ-04

PROVISION TEXT: The NAV office shall be particularly attentive toward persons with little social connection, persons in transitional or establishment phases, and children and young people in disadvantaged families.

SOURCE INSTRUMENT: Circular R-35 § 1

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: YES — identifies specific groups as illustrative of the statutory category "vanskeligstilte"; grounded in the statute's protective framework.

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: NO — an attentiveness directive does not presuppose organizational capacity or case volume.

PURPOSE: [USER NEED] — directly identifies users entitled to heightened protective attention; no documentation or control function.

BURDEN DESCRIPTION: No transaction cost burden identified.

KILL LIST CLASSIFICATION: No Kill List Action — sufficient authority, appropriate purpose.

TRANSACTION COST CATEGORY: No Transaction Cost Identified

REQUIREMENT ID: § 1 / REQ-05

PROVISION TEXT: The NAV office must ensure that children's specific needs are taken care of in the family's encounter with the office.

SOURCE INSTRUMENT: Circular R-35 § 1

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: PARTIAL — the Process Inflation Finding identifies this as escalating "the law's broad directional goal of 'contributing to' service provision into a concrete, context-specific outcome-ensuring obligation during family meetings." The statute contains a directional value; the outcome-ensuring obligation at the specific moment of the family meeting is a circular elaboration without direct statutory grounding.

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: PARTIAL — connects to child-perspective documentation cluster ([D] + [K]). The outcome-ensuring obligation is the upstream source of downstream documentation demands confirmed across 15+ municipalities. The escalation beyond the statute's directional goal means scale burden from the outcome-ensuring dimension operates without full regulatory foundation.

PURPOSE: [MIXED] — primary: USER NEED (child protection); secondary: INTERNAL CONTROL (demonstrability of outcome assurance).

BURDEN DESCRIPTION: Caseworkers must specifically identify and document that children's needs were addressed in family encounters. The obligation escalates a statutory directional value into a demonstrable outcome requirement. The dimension that exceeds the statute's directional goal operates without clear circular-level guidance on what sufficient demonstration looks like.

KILL LIST CLASSIFICATION: Category C — Clarification: the circular should specify what constitutes sufficient demonstration that children's needs were addressed, to prevent shadow compliance demands from accumulating in sub-legal instruments.

TRANSACTION COST CATEGORY: Documentation Inflation (secondary); Combined Burden (when aggregated with Reqs 10–12)

REQUIREMENT ID: § 1 / REQ-06

PROVISION TEXT: When a service is provided to several persons, the service offer must be assessed against the purposes of the Act for each individual recipient.

SOURCE INSTRUMENT: Circular R-35 § 1

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: PARTIAL — the Process Inflation Finding notes this "converts a general individual value reference in § 1 into a specific, mandatory assessment procedure governing multi-recipient service contexts." The statutory basis is the general individual equality value; the specific mandatory procedure for multi-recipient scenarios is a circular elaboration.

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: YES — the mandatory per-recipient assessment in multi-recipient scenarios presupposes sufficient case frequency with family/group cases to build a reliable procedural routine. Anchor Document finding on individual needs-based calculation applies: offices with low volumes of family cases cannot sustain the competence to perform individualized multi-recipient assessments reliably. The mandatory-procedure dimension lacks statutory anchor; scale burden from that dimension is unsupported by the circular framework.

PURPOSE: [MIXED] — primary: USER NEED (individual legal security for each recipient); secondary: INTERNAL CONTROL (verifiable per-recipient assessment procedure).

BURDEN DESCRIPTION: Caseworkers must conduct and document separate assessments for each recipient in multi-recipient service scenarios. The multiplication of assessment and documentation work by the number of recipients constitutes a significant cumulative burden in family-intensive caseloads. The mandatory-procedure framing means caseworkers must comply with an administrative methodology the statute does not require.

KILL LIST CLASSIFICATION: Category C — Clarification: the circular should make explicit that the per-recipient assessment is a professional obligation serving individual rights, not a fixed procedural methodology requiring separate documented outputs for each family member in every case. This would reduce the shadow compliance burden without diminishing the protective purpose.

TRANSACTION COST CATEGORY: Documentation Inflation; Procedural Duplication

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REQUIREMENT ID: § 1 / REQ-07

PROVISION TEXT: Financial assistance to a family must be assessed in accordance with the Act's purposes for each individual family member in addition to the family as a whole.

SOURCE INSTRUMENT: Circular R-35 § 1

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: PARTIAL — the Process Inflation Finding identifies this as "a fixed, mandatory two-level assessment methodology absent from § 1." The two-level structure (per-member + per-family) is a circular construction with no statutory basis.

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: YES — the two-level mandatory assessment methodology presupposes organizational capacity to conduct dual-track assessments in family cases. Anchor Document child-perspective documentation cluster applies: generalist offices encountering family cases infrequently cannot sustain the competence or procedural routine for two-level assessment. **The two-level methodology is a circular construction with no statutory anchor; any scale burden it imposes is entirely unsupported by the statute.**

PURPOSE: [MIXED] — primary: USER NEED (each family member's individual rights); secondary: INTERNAL CONTROL (verifiable two-level assessment structure).

BURDEN DESCRIPTION: Caseworkers allocating financial assistance to families must produce two documented assessments — one per individual member and one for the family unit. This doubles the assessment and documentation work in every family financial assistance decision. The two-level structure is a circular elaboration without statutory grounding; caseworkers must satisfy an administrative methodology the statute does not prescribe.

KILL LIST CLASSIFICATION: Category C — Clarification: the circular should specify that the individual family member assessment is a substantive professional obligation (not a fixed methodology requiring separate written outputs), and clarify what form of documentation is sufficient to demonstrate that individual members' interests were considered.

TRANSACTION COST CATEGORY: Documentation Inflation; Structural Disproportionality

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REQUIREMENT ID: § 1 / REQ-08

PROVISION TEXT: The UN Convention on the Rights of the Child obliges the NAV office to ensure that the best interests of the child is a fundamental consideration in all actions and decisions affecting children.

SOURCE INSTRUMENT: Kommunebrev 2025

CIRCULAR AUTHORITY: ABSENT — consequence: this requirement operates entirely outside the circular framework. Caseworkers must comply with a substantive human rights obligation that the primary normative instrument governing their work does not address. The circular references the CRC in passing but does not operationalize it as an office-level duty in this form.

LEGAL AUTHORITY: PARTIAL — the underlying obligation has strong constitutional (Grunnloven § 104) and international law (CRC) grounding; however, its specific operationalization as a NAV-office duty in "all actions and decisions affecting children" at the level of individual case handling derives from the Kommunebrev, not from sosialtjenesteloven § 1.

DOUBLE AUTHORITY GAP: NO — statutory authority is PARTIAL (real but not from sosialtjenesteloven § 1 directly); not NO.

CATEGORY ERROR: NO — the obligation relates directly to social services users (children).

SCALE FLAG: PARTIAL — the breadth of "all actions and decisions affecting children" intensifies the trigger scope and connects to child-perspective documentation cluster ([D] + [K]). The Kommunebrev formulation operates outside the circular; any scale burden it generates is without circular-level guidance.

PURPOSE: [USER NEED] — the best interests of the child is a protective constitutional and human rights standard that directly governs the substantive content of decisions affecting children.

BURDEN DESCRIPTION: No primary transaction cost burden identified for the substantive obligation itself. However, the Kommunebrev's operationalization in the absence of circular guidance creates a guidance gap: caseworkers must discharge a duty the circular does not address, without the calibration that circular-level guidance would provide. This indirectly generates compliance uncertainty and downstream documentation demands.

KILL LIST CLASSIFICATION: Category C — Clarification: the circular should incorporate and operationalize the Kommunebrev's CRC duty, giving caseworkers clear guidance on how the best interests obligation is discharged within the § 1 framework, rather than leaving it to a sub-legal instrument that operates without circular authority.

TRANSACTION COST CATEGORY: No Transaction Cost Identified (for the substantive obligation); Documentation Inflation (for the downstream effect of the guidance gap)

REQUIREMENT ID: § 1 / REQ-09

PROVISION TEXT: A concrete and individual assessment must always be carried out in every single case.

SOURCE INSTRUMENT: Veileder om økonomisk stønad etter sosialtjenesteloven

CIRCULAR AUTHORITY: ABSENT — consequence: the absolute "always/every single case" formulation operates entirely outside the circular framework. The circular supports individual assessment (Req 3) but does not add the absolute qualifier. Caseworkers must comply with an absolute procedural standard the circular does not recognize.

LEGAL AUTHORITY: PARTIAL — the general principle of individual assessment is broadly implied in the statute's structure. The absolute formulation ("always must / every single case") has no statutory anchor; it is a veileder construction.

DOUBLE AUTHORITY GAP: YES — circular authority ABSENT; statutory authority PARTIAL. The absolute formulation lacks both circular and statutory grounding.

CATEGORY ERROR: NO

SCALE FLAG: YES — connects to [P] Procedural Continuity. The absolute obligation cannot become a habitual procedural routine in offices processing fewer than 10–15 relevant cases per year (Anchor Document finding). **Constitutes disproportionate burden without regulatory foundation — a double authority gap combined with scale-related structural disproportionality.**

PURPOSE: [MIXED] — primary: USER NEED (individual assessment protects against standardized decisions); secondary: INTERNAL CONTROL (absolute formulation creates an unambiguous, easily verifiable supervisory standard).

BURDEN DESCRIPTION: Caseworkers must conduct and be able to demonstrate individualized assessment in every case without exception. The absolute form means no administrative shortcut is available even in structurally identical cases. In low-volume offices, the routine cannot be institutionalized, making each case a fresh compliance exercise. Caseworkers must comply with an obligation that neither the circular nor the statute in its absolute form supports, with no regulatory guidance available for calibrating what suffices.

KILL LIST CLASSIFICATION: Category B — Status Change: the absolute "always must" imperative in the veileder has no binding legal basis at this level of specificity. The obligation should be reformulated in permissive or professional-discretion terms ("caseworkers should ensure assessments are concrete and individual, calibrating the depth of assessment to the complexity of the case"), restoring local professional judgment.

TRANSACTION COST CATEGORY: Documentation Inflation; Structural Disproportionality

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REQUIREMENT ID: § 1 / REQ-10

PROVISION TEXT: A best interests assessment involves: (i) assessing what the child's best interests are; (ii) weighing that against other considerations; (iii) demonstrating the content of the assessment and explaining the weighting.

SOURCE INSTRUMENT: Barnets beste — veileder

CIRCULAR AUTHORITY: ABSENT — consequence: this three-step sequential framework operates entirely outside the circular framework. Caseworkers must execute a structured procedural sequence the circular does not prescribe.

LEGAL AUTHORITY: PARTIAL — steps i and ii reflect the substantive content of the best interests obligation (constitutional and CRC basis). Step iii — the demonstration and

explanation requirement — is a veileder-imposed accountability layer with no constitutional or statutory grounding in its specific procedural form.

DOUBLE AUTHORITY GAP: YES — circular authority ABSENT; statutory authority PARTIAL. The sequential three-step framework as a mandatory procedure has no basis in the circular or statute.

CATEGORY ERROR: NO

SCALE FLAG: YES — the three-step sequence presupposes repeated practice to become a reliable assessment framework. Anchor Document [K] Competence Sustainability finding applies: caseworkers encountering child-welfare assessments infrequently cannot maintain the competence to execute the three-step sequence to the assumed standard. **Double authority gap combined with scale-related structural disproportionality: burden imposed without regulatory foundation.**

PURPOSE: [MIXED] — steps i–ii: USER NEED (substantive child protection); step iii: INTERNAL CONTROL (demonstrability and verifiability of the assessment for supervisory review).

BURDEN DESCRIPTION: Caseworkers must execute a formal three-step sequential analysis in every case involving children, and must produce evidence of each step — particularly the explicit articulation of how competing considerations were balanced (step iii). This is a sophisticated legal-reasoning task that cannot be routinized in low-volume environments. Caseworkers must comply with a procedural framework the circular does not mention and the statute does not prescribe, with no circular guidance available.

KILL LIST CLASSIFICATION: Category B — Status Change: the mandatory three-step sequential framework is a veileder construction without binding authority. It should be reformulated as professional guidance ("in assessing the child's best interests, caseworkers may find it helpful to..."), preserving the substantive obligation while restoring professional discretion over assessment methodology.

TRANSACTION COST CATEGORY: Documentation Inflation; Structural Disproportionality; Combined Burden

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REQUIREMENT ID: § 1 / REQ-11

PROVISION TEXT: Best interests assessments must be documented so that others can see what assessments have been made and have the possibility of reviewing them.

SOURCE INSTRUMENT: Barnets beste — veileder

CIRCULAR AUTHORITY: ABSENT — consequence: this documentation obligation operates entirely outside the circular framework. Caseworkers must produce documentation the primary normative instrument does not address.

LEGAL AUTHORITY: NO — § 1 is silent on documentation; the veileder imposes an absolute documentation mandate in an area the statute leaves entirely open. No specific statutory provision requires documentation of best interests assessments in this form.

DOUBLE AUTHORITY GAP: YES — circular authority ABSENT; statutory authority NO. Full double authority gap.

CATEGORY ERROR: NO

SCALE FLAG: YES — directly instantiates [D] Documentation Apparatus (the dominant empirical mechanism: ~42% of all Set B findings). Anchor Document finding: "caseworkers in small offices actually deliver the service... but fail to translate this delivery into the formal administrative record." This is the structural source of the pervasive supervision finding that caseworkers' personal knowledge exceeds what journals reflect. **Disproportionate burden without any regulatory foundation — double authority gap combined with the most empirically confirmed volume driver mechanism in the dataset.**

PURPOSE: [INTERNAL CONTROL] — the veileder explicitly states the purpose: to enable others to review what assessments were made. This is an audit function with no direct bearing on the child's case outcome.

BURDEN DESCRIPTION: Caseworkers must produce a written record of best interests assessments legible to external reviewers — supervisory authorities, appeal bodies, internal quality control. The documentation must contain the content of the assessment, the considerations weighed, and the reasoning behind the weighting (Req 10, step iii). For whom: supervisory actors. This is the direct administrative source of the pervasive "knew more than the journals reflected" compliance failure documented across 11+ municipalities in the Anchor Document. Caseworkers must meet a documentation standard that neither the circular nor the statute requires, with no circular guidance on what level of detail suffices.

KILL LIST CLASSIFICATION: Category A — Removal: this requirement lacks both circular authority and statutory authority. It imposes an absolute documentation obligation in an area § 1 leaves entirely open. As a veileder-level obligation without binding legal basis, it is a candidate for repeal from the operative social services normative framework, or replacement with a permissive professional guidance standard that restores local discretion over documentation form.

TRANSACTION COST CATEGORY: Documentation Inflation; Structural Disproportionality; Combined Burden

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REQUIREMENT ID: § 1 / REQ-12

PROVISION TEXT: What is written about a child in a case must be neutrally descriptive and limited to what is strictly necessary to demonstrate that sufficient consideration has been given to the best interests of the child.

SOURCE INSTRUMENT: Barnets beste — veileder

CIRCULAR AUTHORITY: ABSENT — consequence: caseworkers must apply editorial content standards for case records that the circular does not address.

LEGAL AUTHORITY: NO — § 1 is completely silent on case file content standards and neutrality requirements. The Anchor Document does not identify a statutory basis for this specific standard. Data minimization principles from personvernforordningen (GDPR) may provide a partial basis for the necessity criterion, but the neutrality standard specifically is a veileder construction.

DOUBLE AUTHORITY GAP: YES — circular authority ABSENT; statutory authority NO. Full double authority gap.

CATEGORY ERROR: NO

SCALE FLAG: PARTIAL — connects to [D] Documentation Apparatus. The qualitative content standard adds an editorial burden to the documentation obligation already imposed by Req 11. In small offices, this additional layer of compliance review per entry increases the per-case administrative time requirement without circular guidance on what compliance looks like.

PURPOSE: [INTERNAL CONTROL] — content standards for case file entries serve file integrity, legal defensibility, and data minimization functions. They have no effect on the quality of the assessment made or the child's case outcome.

BURDEN DESCRIPTION: Caseworkers must review and edit their case entries for children to ensure they are neutrally descriptive and limited to strictly necessary information. This requires an additional editorial quality-control step after the substantive assessment and documentation. For whom: data minimization compliance, legal defensibility, supervisory audit. No circular guidance exists on what "neutrally descriptive" or "strictly necessary" means in practice; caseworkers must meet a standard defined entirely at the veileder level.

KILL LIST CLASSIFICATION: Category A — Removal: this requirement lacks both circular and statutory authority under the Social Services Act. A data minimization principle applicable to children's case files is more appropriately grounded in GDPR/personvernforordningen and addressed through data protection governance instruments, not through a social services veileder attached to § 1. It is a candidate for removal from the social services normative framework.

TRANSACTION COST CATEGORY: Documentation Inflation

REQUIREMENT ID: § 1 / REQ-13

PROVISION TEXT: Information must exist in the case that documents whether the applicant has a need for assistance or not.

SOURCE INSTRUMENT: Veileder om økonomisk stønad etter sosialtjenesteloven

CIRCULAR AUTHORITY: ABSENT — consequence: caseworkers must maintain specific mandatory case file content that the circular does not require.

LEGAL AUTHORITY: PARTIAL — forvaltningsloven's general requirements for documented administrative decisions provide an indirect basis. § 1 itself contains no documentation requirements; the specific obligation to document need (as opposed to need assessment sufficiently informing the decision) is a veileder elaboration.

DOUBLE AUTHORITY GAP: YES — circular authority ABSENT; statutory authority PARTIAL (no § 1 anchor; only indirect forvaltningsloven basis). Effective double authority gap for the specific § 1 context.

CATEGORY ERROR: NO

SCALE FLAG: YES — directly instantiates [D] Documentation Apparatus. Anchor Document core finding applies: the systematic pattern of compliance failure in documenting what caseworkers know (the "knew more than journals reflected" finding across 11+ municipalities) is the direct empirical manifestation of this type of requirement. **Disproportionate burden without regulatory foundation in the circular.**

PURPOSE: [INTERNAL CONTROL] — documentation of need serves supervisory verification that a needs assessment occurred and was affirmative. It does not change the assessment made.

BURDEN DESCRIPTION: Caseworkers must ensure that case files contain explicit evidence of the needs assessment outcome — both a finding and its evidentiary basis. In small offices where caseworkers know users personally, this requires converting tacit professional knowledge into formal written records. For whom: supervisory audit, appeal handling. Caseworkers must comply with a documentation standard the circular does not address; no circular guidance exists on what level of needs documentation is sufficient.

KILL LIST CLASSIFICATION: Category B — Status Change: the absolute documentation requirement has no circular or § 1 statutory basis. It should be reformulated as permissive professional guidance ("caseworkers should ensure their case files reflect the basis for their assessment of need") rather than an absolute obligation, restoring local discretion over how needs assessment evidence is recorded.

TRANSACTION COST CATEGORY: Documentation Inflation

REQUIREMENT ID: § 1 / REQ-14

PROVISION TEXT: Oral applications may also occur and must be written down in a journal note by the NAV office.

SOURCE INSTRUMENT: Veileder om økonomisk stønad etter sosialtjenesteloven

CIRCULAR AUTHORITY: ABSENT — consequence: the specific requirement to record oral applications in journal notes operates entirely outside the circular framework.

LEGAL AUTHORITY: PARTIAL — forvaltningsloven § 11a and the general accessibility principle provide a basis for accepting and processing oral applications. The specific recording in a journal note is a veileder elaboration of how that acceptance must be documented.

DOUBLE AUTHORITY GAP: YES — circular authority ABSENT; statutory authority PARTIAL.

CATEGORY ERROR: NO

SCALE FLAG: YES — connects to [P] Procedural Continuity (oral application registration sub-mechanism). Anchor Document: "the inability to maintain a repeatable pipeline for formalizing oral applications into statutory requests" is documented in Skaun, Høyanger, Verdal, and Sogndal — confirmed structural finding. **Disproportionate burden without regulatory foundation in the circular.**

PURPOSE: [INTERNAL CONTROL] — journal recording of oral applications creates an administrative trail serving supervisory audit of application handling. It does not change the substantive outcome for the user.

BURDEN DESCRIPTION: Caseworkers must, each time an oral application is received, write a journal note recording the application. In offices where face-to-face contact is the dominant access mode, this obligation multiplies across a significant proportion of the caseload. The routine cannot become habitual where case volume is below 10–15 per year. For whom: case record integrity, supervisory audit. No circular guidance exists; caseworkers must comply with an obligation the primary normative instrument does not address.

KILL LIST CLASSIFICATION: Category B — Status Change: the journal-recording obligation is a veileder elaboration with no circular or § 1 statutory grounding. It should be reformulated as professional guidance, restoring local discretion over the form in which oral applications are registered.

TRANSACTION COST CATEGORY: Documentation Inflation; Procedural Duplication

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REQUIREMENT ID: § 1 / REQ-15

PROVISION TEXT: The NAV office has a duty to record verbal applications.

SOURCE INSTRUMENT: Veileder til sosialtjenesteloven § 17

CIRCULAR AUTHORITY: ABSENT — consequence: an unconditional duty to record verbal applications operates entirely outside the circular framework for § 1. Additional structural consequence: this obligation derives from a § 17 veileder and is being applied to the § 1 normative field, constituting normative displacement — an obligation from one statutory provision's interpretive apparatus is being used to govern a different provision's administrative practice.

LEGAL AUTHORITY: PARTIAL — a basis may exist in § 17 and forvaltningsloven for recording verbal applications in the § 17 context. However: (a) that basis applies to § 17 processing, not § 1 case handling; (b) the unconditional, non-derogable formulation as an absolute duty has no clear statutory anchor.

DOUBLE AUTHORITY GAP: YES — circular authority ABSENT; statutory authority PARTIAL at best (and from the wrong statutory provision).

CATEGORY ERROR: PARTIAL — this requirement belongs to the § 17 normative domain. Its application to § 1 case handling constitutes normative displacement: a sub-legal instrument for § 17 is generating obligations in the § 1 administrative space without authority from either the circular or § 1 itself.

SCALE FLAG: YES — same as Req 14; [P] Procedural Continuity finding on oral application formalization applies. **Double authority gap combined with scale-related burden: the burden is without any regulatory foundation in the circular or in § 1.**

PURPOSE: [INTERNAL CONTROL] — recording verbal applications creates an administrative audit trail. No effect on substantive case outcome.

BURDEN DESCRIPTION: Caseworkers must record every verbal application — an unconditional, non-derogable obligation. What must be done: convert every oral communication that constitutes an application into a written administrative record. For whom: supervisory audit, procedural continuity. In face-to-face-dominant offices, this obligation multiplies. Caseworkers must comply with an obligation derived from a different statutory provision's interpretive apparatus — the primary normative instrument for § 1 (the circular) does not address this requirement at all.

KILL LIST CLASSIFICATION: Category A — Removal: this requirement has no circular authority for the § 1 context, derives from a § 17 veileder with no authority over § 1 obligations, and constitutes normative displacement. It is a candidate for removal from the § 1 normative framework. The underlying obligation (record verbal applications under § 17) may be appropriate in the § 17 normative context but should not be extended to govern § 1 administrative practice through a sub-legal instrument.

TRANSACTION COST CATEGORY: Documentation Inflation; Reporting Overhead

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REQUIREMENT ID: § 1 / REQ-16

PROVISION TEXT: The time point of the application must appear from the case file.

SOURCE INSTRUMENT: Veileder til sosialtjenesteloven § 17

CIRCULAR AUTHORITY: ABSENT — consequence: a mandatory case file content item (timestamp) operates outside the circular framework for § 1.

LEGAL AUTHORITY: NO — § 1 contains no documentation requirements. Forvaltningsloven § 11a requires timely processing but does not specify that the timestamp

of an application must appear in the case file as a mandatory content item. This is a veileder elaboration — and from a § 17 veileder applied outside its proper statutory domain.

DOUBLE AUTHORITY GAP: YES — circular authority ABSENT; statutory authority NO. Full double authority gap.

CATEGORY ERROR: PARTIAL — belongs to the § 17 normative domain; applied to § 1 without authority.

SCALE FLAG: YES — identified in the Anchor Document as "the single most frequently sanctioned element across the entire dataset." Instantiates [D] Documentation Apparatus. **Full double authority gap combined with the highest-frequency sanctioned element in the dataset: maximum disproportionate burden without regulatory foundation.**

PURPOSE: [INTERNAL CONTROL] — a timestamp in the case file serves supervisory verification of application processing timeliness. No effect on user's case outcome.

BURDEN DESCRIPTION: Caseworkers must record the specific date and time of application receipt in the case file. Individually minimal per entry; cumulatively it is a mandatory field that cannot be omitted without triggering a formal supervisory finding. The Anchor Document identifies this as the most frequently sanctioned documentation element nationally. For whom: supervisory audit of processing deadlines. Derived from a § 17 veileder with no authority over § 1; caseworkers must comply with a mandatory file content requirement that the primary normative instrument does not address and that derives from a different statutory provision's interpretive framework.

KILL LIST CLASSIFICATION: Category A — Removal from the § 1 normative framework: this requirement has no statutory basis in § 1 and no circular authority; it derives from a § 17 veileder applied outside its proper domain. It constitutes normative displacement and is a candidate for removal from the § 1 field. The underlying obligation may be appropriate under § 17 but should not govern § 1 case handling through a sub-legal instrument.

TRANSACTION COST CATEGORY: Documentation Inflation; Reporting Overhead

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REQUIREMENT ID: § 1 / REQ-17

PROVISION TEXT: A formal decision (vedtak) about this service must state what information, advice, and guidance was given.

SOURCE INSTRUMENT: Veileder til sosialtjenesteloven § 17

CIRCULAR AUTHORITY: ABSENT — consequence: a mandatory vedtak content standard operates outside the circular framework for § 1.

LEGAL AUTHORITY: PARTIAL — forvaltningsloven requires that enkeltvedtak state legal basis and factual grounds. The specific requirement to describe the content of advice and guidance given is a sub-legal elaboration beyond forvaltningsloven's general vedtak content requirements. Derived from a § 17 veileder with no authority over § 1.

DOUBLE AUTHORITY GAP: YES — circular authority ABSENT; statutory authority PARTIAL (forvaltningsloven basis for vedtak content does not extend this far specifically).

CATEGORY ERROR: PARTIAL — belongs to the § 17 normative domain.

SCALE FLAG: YES — mandatory vedtak content requirements are part of the § 17 documentation compliance stack (Anchor Document Cluster 1). The Anchor Document finds this stack produces compliance failures across 35+ municipalities. **Double authority gap combined with a confirmed, high-frequency volume driver.**

PURPOSE: [MIXED] — primary: INTERNAL CONTROL (creating a verifiable audit record of what was provided); secondary: USER NEED (user receives a written summary of what was agreed).

BURDEN DESCRIPTION: Caseworkers must draft vedtak containing a substantive narrative account of what advice, information, and guidance was given — a significant drafting demand beyond the standard legal elements of a vedtak. For whom: the administrative record for supervisory audit; secondarily the user. This obligation derives from a § 17 veileder with no authority over § 1; caseworkers must satisfy a content standard for formal decisions that neither the circular nor § 1 specifies.

KILL LIST CLASSIFICATION: Category A — Removal from the § 1 normative framework: no circular authority; statutory basis PARTIAL only from general forvaltningsloven provisions not specific to this requirement; derived from a § 17 veileder with no authority over § 1 obligations. Candidate for removal from the § 1 field. May be appropriate as a § 17-specific obligation, but should not govern § 1 case handling through normative displacement.

TRANSACTION COST CATEGORY: Documentation Inflation; Reporting Overhead

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REQUIREMENT ID: § 1 / REQ-18

PROVISION TEXT: A closing note or closing letter must be written and shared with the user at the conclusion of a service.

SOURCE INSTRUMENT: Veileder til sosialtjenesteloven § 17

CIRCULAR AUTHORITY: ABSENT — consequence: a mandatory procedural closing step operates entirely outside the circular framework for § 1.

LEGAL AUTHORITY: NO — no provision of sosialtjenesteloven or forvaltningsloven mandates a closing note or letter at service conclusion. § 1 is entirely silent on service conclusion protocols.

DOUBLE AUTHORITY GAP: YES — circular authority ABSENT; statutory authority NO. Full double authority gap.

CATEGORY ERROR: PARTIAL — belongs to the § 17 normative domain.

SCALE FLAG: YES — instantiates [D] Documentation Apparatus as the mandatory final step in the § 17 service pipeline (Anchor Document Cluster 1). The finding that municipalities are sanctioned "because help preceded paperwork" — services delivered immediately and effectively, but formal pipeline bypassed — applies directly: the closing note is the last element of a pipeline that cannot be routinized in low-volume offices. **Full double authority gap combined with confirmed volume driver: disproportionate burden without any regulatory foundation.**

PURPOSE: [INTERNAL CONTROL] — the closing note creates an administrative record of service completion for supervisory audit. The optional closing letter has a user-information dimension, but the mandatory note itself is a control function.

BURDEN DESCRIPTION: Caseworkers must produce a mandatory written document at the conclusion of every service engagement — beyond the substantive service delivery itself. For whom: the case record, supervisory audit; optionally the user. In low-volume offices, the closing note cannot become habitual and constitutes a procedural tax on each service conclusion. Derived from a § 17 veileder with no authority over § 1; caseworkers must comply with a service-closure obligation the primary normative instrument does not address.

KILL LIST CLASSIFICATION: Category A — Removal from the § 1 normative framework: full double authority gap; derived from a § 17 veileder applied to § 1 without authority. Candidate for removal from the § 1 field. A closing note obligation may be appropriate as a § 17-specific requirement but should not extend to § 1 administrative practice through normative displacement.

TRANSACTION COST CATEGORY: Documentation Inflation; Procedural Duplication

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REQUIREMENT ID: § 1 / REQ-19

PROVISION TEXT: What has been done and what solutions have been chosen must be written in the closing note.

SOURCE INSTRUMENT: Veileder til sosialtjenesteloven § 17

CIRCULAR AUTHORITY: ABSENT — consequence: mandatory closing note content operates entirely outside the circular framework for § 1.

LEGAL AUTHORITY: NO — the Process Inflation Finding confirms this "converts the open discretionary space of service administration into a precise, fixed-content documentation mandate at closure, lacking any valid statutory anchor." No statutory provision specifies the content of a closing note.

DOUBLE AUTHORITY GAP: YES — circular authority ABSENT; statutory authority NO. Full double authority gap.

CATEGORY ERROR: PARTIAL — belongs to the § 17 normative domain.

SCALE FLAG: YES — mandatory fixed-content closing documentation is the terminal element of [D] Documentation Apparatus in the § 17 compliance stack. Same Anchor Document findings as Req 18 apply. **Full double authority gap with confirmed volume driver.**

PURPOSE: [INTERNAL CONTROL] — specifying mandatory closing note content (actions taken, solutions chosen) serves the supervisory audit function of verifying what was provided. No effect on user case outcome at this stage; the service has already concluded.

BURDEN DESCRIPTION: Caseworkers must produce a substantive retrospective narrative in the closing note documenting all actions taken and solutions chosen. This is not a pro forma closure checkbox — it is a detailed audit-ready account of the case. For whom: supervisory audit, internal quality control. Derived from a § 17 veileder with no authority over § 1; caseworkers must produce documentation meeting a standard the primary normative instrument does not address. The obligation compounds with Req 18 (which mandates the closing note's existence) to constitute a closing-documentation package of significant drafting burden.

KILL LIST CLASSIFICATION: Category A — Removal from the § 1 normative framework: full double authority gap; no statutory anchor; derived from a § 17 veileder with no authority over § 1. Candidate for removal. If a closing note is maintained under § 17, its content requirements should be addressed through the § 17 normative framework, not through § 1.

TRANSACTION COST CATEGORY: Documentation Inflation; Reporting Overhead; Combined Burden

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REQUIREMENT ID: § 1 / REQ-20

PROVISION TEXT: Employers must map and document risks that may lead to violence and threats during user meetings (all forms of user meetings).

SOURCE INSTRUMENT: Standard for trygge brukermøter i NAV

CIRCULAR AUTHORITY: ABSENT — consequence: an employer risk-mapping obligation operates entirely outside the circular framework for § 1.

LEGAL AUTHORITY: NO — under sosialtjenesteloven. The Process Inflation Finding is explicit: "this administrative mandate operates independently on the basis of AML occupational safety regulations, rendering § 1 only a thematic anchor rather than a true statutory source." The obligation derives from arbeidsmiljøloven (AML), not sosialtjenesteloven.

DOUBLE AUTHORITY GAP: YES — circular authority ABSENT; statutory authority NO under sosialtjenesteloven.

CATEGORY ERROR: YES — this requirement belongs to the occupational safety / labor law domain (arbeidsmiljøloven). The obligation runs from employer to employee, not from the

NAV office to service users. Its functional purpose in the social services context is zero: it has no bearing on any user's case quality, fairness, or legal security.

SCALE FLAG: PARTIAL — connects to Anchor Document internal control cluster (Cluster 2: ROS analyses). The finding that "the cumulative demand falls on the Nav leader, who is simultaneously the primary caseworker, the decision approver, the system administrator for deviation software, the author of ROS analyses" applies structurally. **Full double authority gap with category error: any burden imposed in the social services context is entirely without regulatory foundation, and the burden belongs to a different legal domain entirely.**

PURPOSE: [INTERNAL CONTROL] — in the social services context, this requirement serves employer safety management functions with no relationship to user outcomes. It is an internal occupational safety obligation.

BURDEN DESCRIPTION: NAV leaders/employers must conduct a structured risk assessment of violence and threat risks in all user meeting scenarios and produce documented risk analyses accessible to all employees. For whom: employees, occupational safety authorities. This is a significant management task — a formal ROS analysis requiring dedicated time and a structured analytical process. In small offices it falls on the NAV leader who has no dedicated management capacity. Caseworkers and leaders must comply with an AML obligation that the circular does not address and that belongs to a different legal domain; the primary normative instrument governing their social services work provides no guidance for this obligation.

KILL LIST CLASSIFICATION: Category A — Removal from the social services normative framework: this requirement has no social services statutory basis, no circular authority, and belongs to a different legal domain (arbeidsmiljøloven). It should be addressed exclusively through AML-based instruments and removed from any operative enumeration of social services obligations. Its presence in the § 1 normative field through a safety standard constitutes a category error that distorts the social services compliance picture.

TRANSACTION COST CATEGORY: Documentation Inflation; Reporting Overhead; Structural Disproportionality

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REQUIREMENT ID: § 1 / REQ-21

PROVISION TEXT: All established safety measures must be documented and made available to all employees at the unit.

SOURCE INSTRUMENT: Standard for trygge brukermøter i NAV

CIRCULAR AUTHORITY: ABSENT — consequence: a mandatory safety measures documentation obligation operates entirely outside the circular framework for § 1.

LEGAL AUTHORITY: NO — under sosialtjenesteloven. Derives exclusively from arbeidsmiljøloven and Forskrift om utførelse av arbeid (occupational safety regulation).

DOUBLE AUTHORITY GAP: YES — circular authority ABSENT; statutory authority NO under sosialtjenesteloven.

CATEGORY ERROR: YES — same legal domain error as Req 20: arbeidsmiljøloven, not sosialtjenesteloven. Obligation runs employer to employee.

SCALE FLAG: PARTIAL — connects to [D] Documentation Apparatus (internal control cluster). Same Anchor Document finding as Req 20 applies. **Full double authority gap with category error.**

PURPOSE: [INTERNAL CONTROL] — in the social services context, this is a workplace governance obligation with no relationship to user outcomes.

BURDEN DESCRIPTION: NAV leaders/employers must maintain an accessible, up-to-date register of all safety measures at the unit, ensuring all employees can access it. For whom: employees, occupational safety management. While individually less demanding than Req 20, it requires ongoing administrative maintenance of a safety measures registry. Same category error applies: this burden belongs to the AML domain and should not appear in the social services normative framework. The circular provides no guidance because this obligation is entirely outside its subject matter.

KILL LIST CLASSIFICATION: Category A — Removal from the social services normative framework: same basis as Req 20. No social services statutory basis, no circular authority, different legal domain. Should be addressed through AML-based instruments exclusively.

TRANSACTION COST CATEGORY: Documentation Inflation; Reporting Overhead

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CLOSING COMPARATIVE NOTE

Total requirements identified from Process Inflation Findings: 21

Requirements that would have been visible from the circular paragraph alone: 7 (Requirements 1, 2, 3, 4, 5, 6, 7 — all textually present in R-35 § 1)

Requirements invisible from the circular alone: 14 (Requirements 8–21 — deriving from Kommunebrev, veileders, and a safety standard, none of which appear in the circular text)

Structural significance: Two-thirds of the normative burden operative in the § 1 field cannot be detected by reading the primary governing instrument. The circular is not an adequate guide to what the normative field actually demands of caseworkers and NAV leaders. This finding is the core analytical justification for using Process Inflation Findings as the reference document rather than the circular itself.

Double authority gaps (circular authority ABSENT AND statutory authority NO or PARTIAL):

Requirement	Circular Authority	Statutory Authority	Gap Type
REQ-09	ABSENT	PARTIAL	Double authority gap
REQ-10	ABSENT	PARTIAL	Double authority gap
REQ-11	ABSENT	NO	Double authority gap
REQ-12	ABSENT	NO	Double authority gap
REQ-13	ABSENT	PARTIAL	Double authority gap
REQ-14	ABSENT	PARTIAL	Double authority gap
REQ-15	ABSENT	PARTIAL	Double authority gap + partial category error
REQ-16	ABSENT	NO	Double authority gap + partial category error
REQ-17	ABSENT	PARTIAL	Double authority gap + partial category error
REQ-18	ABSENT	NO	Double authority gap + partial category error
REQ-19	ABSENT	NO	Double authority gap + partial category error
REQ-20	ABSENT	NO	Double authority gap + full category error
REQ-21	ABSENT	NO	Double authority gap + full category error

Total double authority gaps: 13 out of 21 requirements

Category errors (requirements belonging to a different legal domain):

- **Full category errors:** 2 (Requirements 20 and 21 — arbeidsmiljøloven domain)
- **Partial category errors (normative displacement from § 17 to § 1):** 5 (Requirements 15, 16, 17, 18, 19 — derived from a § 17 veileder applied to the § 1 normative field without authority from either the circular or § 1 itself)
- **Total category errors of any kind:** 7

Kill List breakdown:

Category	Requirements	Count
Category A — Removal	REQ-11, REQ-12, REQ-15, REQ-16, REQ-17, REQ-18, REQ-19, REQ-20, REQ-21	**9**
Category B — Status Change	REQ-09, REQ-10, REQ-13, REQ-14	**4**
Category C — Clarification	REQ-02, REQ-03, REQ-05, REQ-06, REQ-07, REQ-08	**6**
No Kill List Action	REQ-01, REQ-04	**2**

Nine requirements are candidates for outright removal from the social services normative framework. Four require reformulation from imperative to permissive language. Six require explicit clarification of the room for maneuver to reduce shadow compliance demands. Only two require no corrective action.

Transaction cost categories by frequency:

Transaction Cost Category	Requirements	Frequency
Documentation Inflation	REQ-02, 03, 05, 06, 07, 09, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21	**18**
Reporting Overhead	REQ-15, 16, 17, 19, 20, 21	**6**
Structural Disproportionality	REQ-03, 07, 09, 10, 11, 20	**6**
Procedural Duplication	REQ-06, 14, 18	**3**
Combined Burden	REQ-10, 11, 19	**3**
No Transaction Cost Identified	REQ-01, 04, 08	**3**

Documentation Inflation is overwhelmingly the dominant transaction cost category, appearing in 18 of 21 requirements. This is analytically consistent with the Anchor Document's core finding that [D] Documentation Apparatus is the dominant empirical mechanism across the entire supervision dataset, accounting for approximately 42–50% of all findings. The § 1 process inflation findings confirm, at the normative level, the structural source of what supervision data confirms empirically: the majority of the compliance burden in the Norwegian social services normative field is administrative and documentary in character, operates largely without statutory grounding, and falls disproportionately on small offices that lack the organizational capacity the documentation regime silently presupposes.

The primary analytical finding of this session for the main report: A caseworker reading only R-35 § 1 — the primary normative instrument — would encounter 7 requirements, of which only 2 require no further review. Reading the full normative field reveals 21 requirements, of which 9 are candidates for removal, 4 for reformulation, and 6 for clarification — leaving only 2 with fully sufficient authority and proportionate burden. The gap between the visible and the operative normative burden is the sludge problem in quantitative form.

SLUDGE AUDIT — § 2 LOVENS VIRKEOMRÅDE

Structured Identification of Documentation Requirements and Procedural Obligations

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PRELIMINARY METHODOLOGICAL NOTE

Requirements visible from Process Inflation Findings: 21 **Requirements that would be visible from the circular paragraph (R-35, § 2) alone:** 9

Requirements 1–9 derive from R-35 itself (punkt 1.2.1.1 and 1.2.2.6 of the rundskriv). They are at least nominally traceable to the circular text. Requirements 10–21 have **no textual presence in the circular paragraph** and are therefore invisible from the circular alone.

Requirements with no textual presence in the circular:

Req.	Source Instrument	Instrument Category
10	Kommunebrev 2025, § 2	(a) Kommunebrev
11	Veileder for Nav-kontoret ved vurdering av lovlig opphold for EØS-borgere	(b) Veileder
12	Veileder EØS-borgere	(b) Veileder
13	Veileder EØS-borgere	(b) Veileder
14	Veileder EØS-borgere	(b) Veileder
15	Veileder EØS-borgere	(b) Veileder
16	Veileder EØS-borgere	(b) Veileder
17	Veileder EØS-borgere	(b) Veileder
18	Veileder EØS-borgere	(b) Veileder
19	Veileder EØS-borgere	(b) Veileder
20	Veileder EØS-borgere	(b) Veileder
21	Veileder EØS-borgere	(b) Veileder

Structural observation: Starting from the circular paragraph alone, an analyst would identify 9 requirements. Starting from the Process Inflation Findings, 21 requirements are identified — a 133% increase. Eleven of the twelve invisible requirements derive from a single sub-legal veileder. This establishes the central analytical value of the Process Inflation Findings as the reference document: the normative load actually imposed on caseworkers is more than double what the circular paragraph itself would suggest, and the majority of the invisible requirements use mandatory-sounding language without any clear circular or statutory foundation.

STEP 1 — IDENTIFICATION OF ALL REQUIREMENTS

ID	Exact Obligation	Source Instrument	Explicit/Implicit	Circular Presence
R-§2-1	Hvis det er tvil om en person er å anse å ha fast bopel, må Nav-kontoret foreta en konkret individuell vurdering	R-35, § 2, punkt 1.2.1.1 (PROC-REQ-2.1)	Explicit	PRESENT
R-§2-2	I helhetsvurderingen kan det blant annet legges vekt på om personen er folkeregistrert i Norge, har ektefelle og eventuelt barn bosatt i Norge, er medlem i folketrygden, har skattemessige forpliktelser, og personens bosituasjon — oppholdets varighet og formål	R-35, § 2, punkt 1.2.1.1 (PROC-REQ-2.2)	Explicit	PRESENT
R-§2-3	Nav-kontoret må gjøre en konkret og individuell vurdering av oppholdsgrunnlaget (for EØS-borgere som student/egne midler)	R-35, § 2, punkt 1.2.2.2 (PROC-REQ-2.3)	Explicit	PRESENT
R-§2-4	Hvis en person har oppholdsgrunnlag som nevnt over (korttidsopphold/arbeidssøkende) må det gjøres en konkret og individuell vurdering av om personen har fast bopel	R-35, § 2, punkt 1.2.2.2 (PROC-REQ-2.4)	Explicit	PRESENT
R-§2-5	Nav-kontoret kan kreve at en person dokumenterer lovlig opphold; hva som konkret kan kreves varierer fra sak til sak	R-35, § 2, punkt 1.2.2.6 (DOC-REQ-2.1 /	Explicit	PRESENT

		PROC-REQ-2.5)		
R-§2-6	Nav-kontoret må på selvstendig grunnlag foreta en vurdering av om en søker har dokumentert lovlig opphold på søknadstidspunktet	R-35, § 2, punkt 1.2.2.6 (PROC-REQ-2.6)	Explicit	PRESENT
R-§2-7	Personer som ikke er i besittelse av pass eller lignende reisedokument, må fremvise vedtak fra utlendingsmyndighetene	R-35, § 2, punkt 1.2.2.6 (DOC-REQ-2.2)	Explicit	PRESENT
R-§2-8	Nav-kontoret må i hver enkelt sak etterspørre den dokumentasjon som er nødvendig for å vurdere om en EØS-borger har oppholdsrett	R-35, § 2, punkt 1.2.2.6 (PROC-REQ-2.7 / DOC-REQ-2.3)	Explicit	PRESENT
R-§2-9	Hvis EØS-borgeren ikke fremlegger dokumentasjonen som etterspørres, skal Nav-kontoret likevel vurdere EØS-borgerens oppholdsstatus med bakgrunn i sannsynligheten av opplysningene som er gitt	R-35, § 2, punkt 1.2.2.6 (PROC-REQ-2.8)	Explicit	PRESENT
R-§2-10	Nav-kontorene skal ikke vurdere fast bopel for EØS-borgere som har dokumentert lovlig opphold som arbeidstaker, selvstendig næringsdrivende, tjenesteyter, student og opphold på egne midler	Kommunebrev 2025, § 2 (PROC-REQ-2.9)	Explicit	ABSENT
R-§2-11	Når en EØS-borger oppsøker Nav-kontoret, må Nav-kontoret kartlegge om vedkommende har et registreringsbevis og hva som eventuelt er oppholdsgrunnlaget i registreringsbeviset	Veileder EØS-borgere (PROC-REQ-2.10 / DOC-REQ-2.4)	Explicit	ABSENT
R-§2-12	Uavhengig av hva som var grunnlaget for oppholdet på registreringstidspunktet, må EØS-borgeren dokumentere at han har lovlig opphold på søknadstidspunktet for sosiale tjenester	Veileder EØS-borgere (DOC-REQ-2.5)	Explicit	ABSENT

R-§2-13	Dersom vedkommende arbeider under 10 timer per uke, må Nav-kontoret etterspørre dokumentasjon knyttet til arbeidsforholdet og på bakgrunn av denne foreta en konkret helhetsvurdering	Veileder EØS-borgere (PROC-REQ-2.11)	Explicit	ABSENT
R-§2-14	Dersom EØS-borgeren oppgir at han har lovlig opphold som arbeidstaker og at han fortsatt er i arbeid, men ikke tjener tilstrekkelig til å forsørge seg selv, må han dokumentere at oppholdsgrunnlaget fortsatt står ved lag	Veileder EØS-borgere (DOC-REQ-2.6)	Explicit	ABSENT
R-§2-15	Dersom EØS-borgeren oppgir at han er selvstendig næringsdrivende, må vedkommende dokumentere at ervervsvirksomheten er reell og at oppholdsgrunnlaget står ved lag	Veileder EØS-borgere (DOC-REQ-2.7)	Explicit	ABSENT
R-§2-16	Dersom vedkommende anfører at han har hatt rimelig grunn til å si opp, må dette dokumenteres, for eksempel gjennom attest fra lege	Veileder EØS-borgere (DOC-REQ-2.8)	Explicit	ABSENT
R-§2-17	I vurderingen skal det legges vekt på antall arbeidstimer per uke og lønnens størrelse, om personen har rett til betalt ferie og rett til fortsatt lønn ved sykdom	Veileder EØS-borgere (PROC-REQ-2.12)	Explicit	ABSENT
R-§2-18	I vurderingen må det legges vekt på dokumentasjon i form av legeattest	Veileder EØS-borgere (DOC-REQ-2.9)	Explicit	ABSENT
R-§2-19	For at en EØS-borger skal anses å være midlertidig arbeidsufør, må det gjøres en helhetsvurdering med utgangspunkt i situasjonen på søknadstidspunktet	Veileder EØS-borgere (PROC-REQ-2.13)	Explicit	ABSENT
R-§2-20	EØS-borgeren må fremlegge dokumentasjon på opptak til yrkesrettet utdanning og gi en kort redegjørelse for sammenhengen	Veileder EØS-borgere (DOC-REQ-2.10)	Explicit	ABSENT

	mellom utdanningen og hans tidligere arbeid			
R-§2-21	Familiemedlemmet må dokumentere overfor Nav-kontoret at vilkårene er oppfylt for å anses å fortsatt ha lovlig opphold i Norge	Veileder EØS-borgere (DOC-REQ-2.11)	Explicit	ABSENT

STEP 2 — LEGAL AUTHORITY CHECK

R-§2-1

- Direction 1 — Circular authority: YES. Requirement is contained in R-35, punkt 1.2.1.1.
- Direction 2 — Statutory authority: PARTIAL. Section 2 of the Social Services Act establishes "bopel i riket" as a condition but does not itself mandate individual assessment procedures; the procedural obligation is implied from the general administrative law duty to make individual decisions (fvl. § 17) and from the regulatory authorization framework under § 2. No double authority gap. No category error.

R-§2-2

- Direction 1 — Circular authority: YES. Contained in R-35, punkt 1.2.1.1.
- Direction 2 — Statutory authority: PARTIAL. § 2 uses "bopel i riket" as a condition but provides no enumerated factors; the specific list of factors (folkeregistrering, ektefelle, barn, skatt, bosituasjon) has no textual basis in § 2. The factors represent circular elaboration without direct statutory anchor. As noted in Process Inflation Findings: "§ 2 mentions 'bopel i riket' as a restriction ground but provides no criteria for what constitutes it." No double authority gap (circular authority present). No category error.

R-§2-3

- Direction 1 — Circular authority: YES. Contained in R-35, punkt 1.2.2.2.
- Direction 2 — Statutory authority: PARTIAL. § 2 authorizes the King to issue regulations on EØS matters but does not itself prescribe Nav's assessment procedure. The assessment obligation derives from the regulatory authorization, not from the § 2 text directly. No double authority gap. No category error.

R-§2-4

- Direction 1 — Circular authority: YES. Contained in R-35, punkt 1.2.2.2.
- Direction 2 — Statutory authority: PARTIAL. Same analysis as R-§2-3. § 2 establishes "bopel" as a condition but does not mandate the individual assessment procedure. No double authority gap. No category error.

R-§2-5

- Direction 1 — Circular authority: YES. Contained in R-35, punkt 1.2.2.6.
- Direction 2 — Statutory authority: PARTIAL. The Process Inflation Findings note this is supported by the general investigation duty in fvl. § 17, but § 2 itself is purely a scope rule and does not directly grant this evidentiary authority. Note: the permissive formulation ("kan kreve") is preserved in the circular text, which is important for the Kill List analysis. No double authority gap. No category error.

R-§2-6

- Direction 1 — Circular authority: YES. Contained in R-35, punkt 1.2.2.6.
- Direction 2 — Statutory authority: PARTIAL. § 2 states who the law applies to but does not impose a specific independent assessment duty on Nav. This duty is implied from fvl. § 17 (duty to investigate) and general administrative law principles. No double authority gap. No category error.

R-§2-7

- Direction 1 — Circular authority: YES. Contained in R-35, punkt 1.2.2.6.
- Direction 2 — Statutory authority: NO. § 2 does not specify what documentation constitutes proof of legal stay, nor does it mandate presenting a specific administrative decision from immigration authorities. The specific document requirement (vedtak fra utlendingsmyndighetene) has no statutory anchor. As noted in Process Inflation Findings: "§ 2 does not specify what documentation constitutes proof of legal stay." No double authority gap (circular authority present), but statutory authority is absent. No category error.

R-§2-8

- Direction 1 — Circular authority: YES. Contained in R-35, punkt 1.2.2.6.
- Direction 2 — Statutory authority: PARTIAL. § 2 authorizes regulations for EØS rules but does not itself impose this absolute documentation-requesting duty. Partially supported by fvl. § 17. The mandatory formulation ("må i hver enkelt sak") transforms what fvl. § 17 frames as a general investigative duty into an absolute per-case obligation — this extension is sub-statutory. No double authority gap. No category error.

R-§2-9

- Direction 1 — Circular authority: YES. Contained in R-35, punkt 1.2.2.6.
- Direction 2 — Statutory authority: YES. Directly supported by general administrative law (fvl. § 17 — the duty to assess on the basis of probability when documentation is incomplete). This is the strongest statutory footing of any requirement in this paragraph. No double authority gap. No category error.

R-§2-10

- Direction 1 — Circular authority: NO. This requirement originates in Kommunebrev 2025, not in the circular text of R-35 § 2. FIRST-ORDER AUTHORITY GAP.

- Direction 2 — Statutory authority: PARTIAL. § 2 authorizes the King to restrict the law for EØS purposes; the substantive content of this requirement aligns with regulatory intent, but its operative vehicle is a Kommunebrev rather than a regulation or the circular. The Kommunebrev operates within the regulatory authorization space but is not itself a normative instrument with the authority of a forskrift. No double authority gap (statutory authority is partial rather than absent). No category error — this is a social services instrument.
- Note: This requirement is beneficial in direction (it reduces burden), which distinguishes it from requirements 11–21 even though it shares the absence of circular authority.

R-§2-11

- Direction 1 — Circular authority: NO. Derives from Veileder EØS-borgere, not from R-35 § 2. FIRST-ORDER AUTHORITY GAP.
- Direction 2 — Statutory authority: NO. § 2 does not prescribe a mandatory first-step mapping of EØS registration certificates. No statutory provision mandates this as a sequenced intake step. DOUBLE AUTHORITY GAP. No category error.

R-§2-12

- Direction 1 — Circular authority: NO. Derives from Veileder EØS-borgere. FIRST-ORDER AUTHORITY GAP.
- Direction 2 — Statutory authority: NO. § 2 does not impose obligations on applicants to document their legal stay, nor does it establish temporal documentation rules regarding prior registration. DOUBLE AUTHORITY GAP. No category error.

R-§2-13

- Direction 1 — Circular authority: NO. Derives from Veileder EØS-borgere. FIRST-ORDER AUTHORITY GAP.
- Direction 2 — Statutory authority: NO. § 2 contains no reference to weekly working hours, quantitative threshold triggers, or documentation requirements keyed to specific hour thresholds. This 10-hour threshold is a sub-legal construction with no statutory or circular foundation. DOUBLE AUTHORITY GAP. No category error.

R-§2-14

- Direction 1 — Circular authority: NO. Derives from Veileder EØS-borgere. FIRST-ORDER AUTHORITY GAP.
- Direction 2 — Statutory authority: NO. § 2 does not reference worker status, income sufficiency thresholds, or ongoing documentation obligations for applicants claiming worker status. DOUBLE AUTHORITY GAP. No category error.

R-§2-15

- Direction 1 — Circular authority: NO. Derives from Veileder EØS-borgere. FIRST-ORDER AUTHORITY GAP.

- Direction 2 — Statutory authority: NO. § 2 contains no reference to self-employment or the criterion that a business activity must be proven genuine. DOUBLE AUTHORITY GAP. No category error.

R-§2-16

- Direction 1 — Circular authority: NO. Derives from Veileder EØS-borgere. FIRST-ORDER AUTHORITY GAP.
- Direction 2 — Statutory authority: NO. § 2 contains no reference to voluntary resignation, reasonable cause standards, or documentation of such events. The concept of "rimelig grunn" for resignation derives from labour law (arbeidsmiljøloven and related frameworks), not from the Social Services Act. DOUBLE AUTHORITY GAP. CATEGORY ERROR: The conceptual apparatus imported from labour law (voluntary vs. involuntary unemployment, reasonable cause for resignation, medical documentation of incapacity to work) belongs to the legal domain of arbeidsmiljørett, not sosialtjenestelovgivning.

R-§2-17

- Direction 1 — Circular authority: NO. Derives from Veileder EØS-borgere. FIRST-ORDER AUTHORITY GAP.
- Direction 2 — Statutory authority: NO. § 2 is a bare scope rule and contains none of these detailed economic criteria. The factors listed (arbeidstimer per uke, lønnens størrelse, rett til betalt ferie, rett til lønn ved sykdom) are analytically derived from EU free movement law (Unionsborgerdirektivet) but are not statutory obligations under the Social Services Act. DOUBLE AUTHORITY GAP. PARTIAL CATEGORY ERROR: The criteria of paid holiday entitlement and sick pay rights derive from labour law concepts imported into the social services context without statutory warrant.

R-§2-18

- Direction 1 — Circular authority: NO. Derives from Veileder EØS-borgere. FIRST-ORDER AUTHORITY GAP.
- Direction 2 — Statutory authority: NO. § 2 contains no reference to medical certificates or evidentiary hierarchies in assessments. DOUBLE AUTHORITY GAP. No category error, but note the evidential prescription (legeattest must be weighted) constitutes an unusual incursion into the evidentiary domain of administrative procedure without procedural law foundation.

R-§2-19

- Direction 1 — Circular authority: NO. Derives from Veileder EØS-borgere. FIRST-ORDER AUTHORITY GAP.
- Direction 2 — Statutory authority: NO. § 2 does not contain the concept of temporary work incapacity (midlertidig arbeidsufør), nor does it prescribe a holistic assessment fixed to the application date for this purpose. DOUBLE AUTHORITY GAP. PARTIAL CATEGORY ERROR: The concept of midlertidig arbeidsufør as a legal status preserving worker rights is a construct from EU free movement law and implicitly

from labour law, transposed into the social services eligibility assessment without explicit statutory authorization.

R-§2-20

- Direction 1 — Circular authority: NO. Derives from Veileder EØS-borgere. FIRST-ORDER AUTHORITY GAP.
- Direction 2 — Statutory authority: NO. § 2 contains no reference to vocational training, enrollment documentation, or the requirement to establish a nexus between current training and prior employment. DOUBLE AUTHORITY GAP. No category error, but the nexus requirement (written explanation connecting training to prior work) is a substantive evidentiary standard with no anchor in any level of Norwegian social services law.

R-§2-21

- Direction 1 — Circular authority: NO. Derives from Veileder EØS-borgere. FIRST-ORDER AUTHORITY GAP.
- Direction 2 — Statutory authority: NO. § 2 does not reference family members, specify conditions for their residence retention, or impose a documentation burden on them. DOUBLE AUTHORITY GAP. No category error.

STEP 3 — SCALE AND PROPORTIONALITY CHECK

The Anchor Document contains one directly applicable finding for § 2:

Primary applicable finding: "Requirement A-2 (§18): Independent assessment of EØS citizen residence status — Mechanism [K]" — classified as a **latent volume driver of potentially high severity** with zero Set B empirical findings. The Anchor Document states: "The EØS population eligible for §18 is by definition geographically and demographically concentrated, meaning that the vast majority of small municipalities will encounter these cases so rarely that competence cannot be maintained even as a latent capacity — yet the legal obligation is stated in mandatory terms." The source identified is the dedicated Veileder — the same instrument that generates requirements 11–21 in this audit.

The Anchor Document further notes under Driver 5: "Structural impact: Potentially very high for municipalities with EØS populations (border municipalities, coastal municipalities with seasonal labour markets), but geographically concentrated and empirically unconfirmed. The latency of this driver makes it difficult to rank confidently." Legal source flag: "whether the residence assessment obligation itself requires legislative clarification or whether it is fully determinable from the existing veileder framework requires manual verification."

ID	Scale Flag	Anchor Finding Applied	Notes

R-§2-1	NO	—	Basic individual assessment; not volume-sensitive
R-§2-2	PARTIAL	A-2 indirectly	Holistic factor-weighting in bopel cases presupposes regular encounter with these cases; in municipalities with few EØS/immigrant applicants, caseworkers may not maintain fluency with the factor list
R-§2-3	YES	A-2 directly	Assessment of EØS residence basis requires EØS-specific legal competence; confirmed as K-mechanism latent driver
R-§2-4	YES	A-2 directly	Same as R-§2-3
R-§2-5	NO	—	Permissive; caseworker discretion preserved
R-§2-6	YES	A-2 directly	Independent assessment at application time requires active EØS eligibility competence
R-§2-7	NO	—	Specific document check; procedurally simple
R-§2-8	YES	A-2 directly	Absolute per-case documentation request obligation presupposes familiarity with EØS documentation landscape; in low-volume offices, this familiarity cannot be sustained
R-§2-9	NO	—	Probability-based fallback; scale-neutral
R-§2-10	NO	—	Burden-reducing; beneficial for all scales
R-§2-11	YES	A-2 directly	Mandatory first-step mapping of registration certificate and residence basis requires sustained familiarity with EØS administrative instruments; latent K-mechanism. Any scale-related burden is unsupported by the circular framework.

R-§ 2-12	YES	A-2 directly	Current-status documentation requirement at application date requires legal competence to distinguish which documents satisfy which residence grounds; K-mechanism. Unsupported by circular framework.
R-§ 2-13	YES	A-2 directly	The 10-hour threshold triggers a specialized assessment that requires fluency with EU worker-status jurisprudence. In most municipalities, this threshold will be encountered too rarely to maintain competence. Burden unsupported by circular framework.
R-§ 2-14	YES	A-2 directly	Assessment of whether worker residence basis "stands" despite insufficient income requires legal knowledge of EU free movement doctrine. Latent K-mechanism. Unsupported by circular framework.
R-§ 2-15	YES	A-2 directly	Assessment of whether self-employment is genuine requires familiarity with UDI practice and EU criteria. Latent K-mechanism. Unsupported by circular framework.
R-§ 2-16	YES	A-2 directly	Assessment of reasonable cause for resignation requires both labour law and EU free movement knowledge. The combination is particularly unlikely to be maintainable in small offices. Unsupported by circular framework.
R-§ 2-17	YES	A-2 directly	Multi-factor economic assessment requires active knowledge of EU worker-status criteria. Anchor Document notes this specific veileder as the source of the latent K-driver. Unsupported by circular framework.
R-§ 2-18	YES	A-2 directly	Medical certificate weighting requirement adds a medico-legal dimension to the assessment; encounters too rare in most offices for caseworkers to develop practice-based skill. Unsupported by circular framework.
R-§ 2-19	YES	A-2 directly	Holistic incapacity assessment at application date requires EU free movement competence. K-mechanism. Unsupported by circular framework.
R-§ 2-20	YES	A-2 directly	Nexus between training and prior employment requires factual and legal analysis; highly infrequent in small offices. Unsupported by circular framework.
R-§ 2-21	YES	A-2 directly	Family member residence retention assessment requires extended EU free movement knowledge. Unsupported by circular framework.

STEP 4 — PURPOSE CLASSIFICATION

R-§2-1 [USER NEED] — The individual assessment requirement directly serves the legal security and fairness of the applicant's case. Without it, all persons with uncertain residence status would be categorically excluded. The "if in doubt" trigger ensures that borderline cases receive individualized consideration rather than automatic denial. Language in the circular: "må Nav-kontoret foreta en konkret individuell vurdering" — the obligation is user-protective in its primary function.

R-§2-2 [MIXED] — Primary: user need (the enumerated factors guide accurate eligibility assessment, serving fair case determination). Secondary: internal control (the enumeration creates a checklist that can be audited for compliance, and the requirement to consider these factors generates a documentation trail that serves supervisory review). The factor list does not create additional procedural burden beyond what the assessment itself requires, but its prescriptive enumeration has the secondary effect of standardizing and documenting the assessment methodology.

R-§2-3 [USER NEED] — The individual assessment of residence basis for EØS applicants (students, own-means) directly determines whether the applicant is subject to the bopel requirement. The assessment is a legal prerequisite for correct eligibility determination. Purpose is user-protective.

R-§2-4 [USER NEED] — Individual bopel assessment for applicants with short-stay or job-seeker residence basis directly determines legal entitlement. The purpose is to ensure that persons who do have bopel are not categorically excluded by group membership.

R-§2-5 [MIXED] — Primary: user need (the ability to require documentation enables Nav to make accurate eligibility determinations, which serves both the applicant who qualifies and the integrity of the system). Secondary: internal control (the documentation trail generated serves audit and supervisory functions). Note: the permissive formulation ("kan kreve") preserves caseworker discretion, which mitigates the internal control dimension. The primary function is evidentiary accuracy in service of correct eligibility assessment.

R-§2-6 [MIXED] — Primary: user need (an independent assessment at application time protects applicants from outdated or incorrect eligibility determinations and ensures currency of the decision). Secondary: internal control (the "independent" requirement — not just accepting what was determined before — creates a distinct auditable act). The temporal specificity ("på søknadstidspunktet") serves user protection more than administrative convenience.

R-§2-7 [INTERNAL CONTROL] — The requirement that persons without a passport must specifically produce a formal decision from immigration authorities is a procedural document demand that serves verification and administrative certainty rather than the applicant's case quality. A caseworker with full information could assess legality of stay without this specific document type. The requirement functions as an administrative standard for documentation completeness rather than as a substantive legal protection for the user. Language: "må fremvise vedtak fra utlendingsmyndighetene" — the imperative is directed at verifying formal compliance, not at improving assessment quality.

R-§2-8 [INTERNAL CONTROL] — The absolute obligation to request documentation in every single EØS case ("i hver enkelt sak") functions as a per-case compliance obligation

rather than as a user-protective measure. The user's legal security is served by having their status correctly assessed (R-§2-6), not by the mechanical act of requesting documentation in every case regardless of whether it is needed. The language "må i hver enkelt sak etterspørre" creates a procedural compliance obligation. The internal control function — ensuring that Nav can document that it pursued all relevant information — is primary.

R-§2-9 [USER NEED] — The fallback obligation to assess probability when documentation is missing directly protects applicants who are unable to produce formal documents. The purpose is anti-exclusionary: it ensures that the documentation requirement does not become an absolute bar. Derived from fvl. § 17. No transaction cost burden is identified for this requirement in the sense that it expands rather than restricts caseworker action.

R-§2-10 [USER NEED] — The instruction not to assess bopel for categories of EØS citizens who have documented qualifying residence grounds directly reduces procedural burden on both applicants and caseworkers and aligns with EØS law. This requirement functions as a procedural simplification that serves correct eligibility outcomes.

R-§2-11 [INTERNAL CONTROL] — The mandatory initial mapping of registration certificate and residence basis upon first contact is a sequencing and documentation obligation that serves the administrative record more than the applicant's immediate interests. The user's legal security is served by the eventual correct eligibility assessment; the specific step of mapping registration certificate status is an internal procedure designed to ensure administrative completeness. Language: "må Nav-kontoret kartlegge" — the obligation is directed at generating a documented first step, not at protecting user rights per se. The circular framework provides no guidance for this burden.

R-§2-12 [MIXED] — Primary: internal control (the requirement to document current legal stay specifically at application time regardless of prior registration grounds is a temporal compliance obligation that primarily ensures the administrative record reflects application-time status). Secondary: user need (an applicant's current status is genuinely legally relevant; the temporal rule is not without substantive content). However, the requirement as framed — "uavhengig av hva som var grunnlaget for oppholdet på registreringstidspunktet" — adds procedural complexity for applicants and caseworkers beyond what substantive accuracy requires. The circular framework provides no guidance for this burden.

R-§2-13 [INTERNAL CONTROL] — The 10-hour weekly threshold functions as a procedural trigger that converts a quantitative fact into a documentation cascade. The threshold itself has no direct statutory basis and serves primarily to create a standardized administrative decision point rather than to protect the user's legal interests. A caseworker without this threshold rule could still make an individualized worker-status assessment; the threshold adds procedural certainty for internal consistency at the cost of caseworker burden. The circular framework provides no guidance for this burden.

R-§2-14 [INTERNAL CONTROL] — The requirement for the applicant to document that their residence basis "continues to stand" when their income is insufficient creates an evidentiary burden that primarily serves administrative verification. The substantive legal question (whether worker status is maintained) is a legal determination for Nav to make; placing the documentation burden on the applicant and requiring Nav to verify it in this

specific form serves record-completeness rather than assessment accuracy. The circular framework provides no guidance.

R-§2-15 [INTERNAL CONTROL] — Documentation of the genuineness of self-employment activity primarily serves Nav's internal evidentiary record rather than the applicant's interests. The substantive legal issue (whether self-employment is genuine) can be assessed from information available to Nav without requiring the applicant to produce specific documentation to the standard implied. The circular framework provides no guidance.

R-§2-16 [INTERNAL CONTROL] — The requirement to document reasonable cause for resignation, with a specific document type (legeattest) suggested, is a procedural compliance obligation that imports a labour law concept into the social services assessment and requires documentation primarily for the administrative record. The applicant's legal interests are served by a correct assessment of their residence status; the specific documentation requirement adds burden without proportionate improvement to assessment accuracy. Category error note: the "rimelig grunn" concept belongs to labour law. The circular framework provides no guidance.

R-§2-17 [MIXED] — Primary: user need (the economic factors listed — work hours, salary, leave entitlements, sick pay — are substantively relevant to whether the applicant maintains worker status under EU free movement law, and correct application serves the applicant's legal rights). Secondary: internal control (the prescriptive enumeration creates an internal audit checklist). However, the labour law criteria for these factors (betalt ferie, lønn ved sykdom) constitute a category error: they import labour law standards into a social services eligibility determination without statutory authority. As applied through the veileder, the internal control function of ensuring documented assessment against enumerated criteria is significant. The circular framework provides no guidance.

R-§2-18 [MIXED] — Primary: user need (a medical certificate is substantively relevant when assessing temporary work incapacity, and requiring it to be weighted protects applicants with genuine medical grounds). Secondary: internal control (prescribing a specific document type as carrying mandatory evidential weight creates an administrative standard that serves documentation consistency). The weight prescribed ("must be given weight") goes beyond what evidentiary neutrality would require and constrains caseworker judgment in a way that serves administrative standardization. The circular framework provides no guidance.

R-§2-19 [MIXED] — Primary: user need (a holistic assessment at application time for temporary work incapacity directly serves the applicant's legal security by ensuring their situation is assessed concretely). Secondary: internal control (the temporal fixation and the holistic assessment standard create an auditable procedure). The concept of midlertidig arbeidsufør is legally derived from EU free movement doctrine and has no direct statutory basis in the Social Services Act. The circular framework provides no guidance.

R-§2-20 [INTERNAL CONTROL] — The requirement for both enrollment documentation and a written narrative connecting training to prior employment goes beyond what substantive accuracy requires and primarily serves evidentiary record-building. A caseworker could assess the vocational training nexus from the applicant's account; the requirement to have it in writing, with explicit justification connecting training to employment

history, creates a documentation burden that serves administrative record completeness more than user interests. The circular framework provides no guidance.

R-§2-21 [INTERNAL CONTROL] — The requirement for family members to produce documentation confirming that conditions for their continued legal residence are met places a specific evidentiary burden on a third party (family member) for administrative record purposes. The substantive legal question can be addressed through the applicant's own account and available records. The circular framework provides no guidance.

STEP 5 — TRANSACTION COST CHARACTERIZATION

R-§2-1 — Classified [USER NEED]. No transaction cost burden identified. The individual assessment obligation is the core professional task of eligibility determination; it does not add administrative overhead beyond what substantive assessment requires.

R-§2-2 — Classified [MIXED]. The caseworker must consider and document at least the enumerated factors (folkeregistrering, ektefelle/barn, skatt, bosituasjon, oppholdets varighet, fremtidsplaner) within their assessment record. For audit purposes, the written decision or journal note must reflect that these factors were weighed. This creates a checklist compliance obligation embedded within what would otherwise be a narrative professional assessment. In practice, caseworkers must structure their case notes to demonstrate consideration of each listed factor, creating an internally-directed documentation demand within the user-protective assessment.

R-§2-3 — Classified [USER NEED]. No transaction cost burden identified beyond the substantive assessment task itself.

R-§2-4 — Classified [USER NEED]. No transaction cost burden identified beyond the substantive assessment task itself.

R-§2-5 — Classified [MIXED]. Caseworkers must determine per case which documentation to require; this requires legal-administrative judgment about the applicable standard for each user category. The permissive formulation limits burden relative to a mandatory version.

R-§2-6 — Classified [MIXED]. The caseworker must conduct an independent assessment at application time and document this as a discrete act, separate from any prior determination. In practice: review of current documents, a fresh legal-administrative assessment, and a written record showing that the assessment was conducted at the application date specifically. The temporal specificity creates an additional documentation touchpoint beyond the substantive assessment.

R-§2-7 — Classified [INTERNAL CONTROL]. The caseworker must: (a) identify that the applicant lacks a passport or equivalent travel document; (b) specifically request and obtain a formal immigration decision (vedtak fra utlendingsmyndighetene); (c) document the document received and its content. In practice this means the caseworker contacts the applicant to request a specific administrative document, logs receipt, and records its content.

For caseworkers with light exposure to this scenario, the correct document type may not be immediately known. Transaction cost: identification → request → receipt and verification → documentation. This obligation is within the circular framework.

R-§2-8 — Classified [INTERNAL CONTROL]. The caseworker must, in every case involving an EØS citizen, generate a documented request for documentation — regardless of whether documentation is actually needed. This means: (a) identifying the case as involving an EØS citizen; (b) formulating what documentation is required for the specific residence basis; (c) making a documented request; (d) recording the request and response. The word "i hver enkelt sak" creates a per-case compliance event with its own administrative footprint, converting what could be a flexible investigative act (fvl. § 17) into a mandatory documented procedure. This obligation is within the circular framework.

R-§2-9 — Classified [USER NEED]. No transaction cost burden identified. The probability-assessment fallback is a substantive professional judgment task.

R-§2-10 — Classified [USER NEED]. No transaction cost burden identified. The requirement removes an assessment step.

R-§2-11 — Classified [INTERNAL CONTROL]. The caseworker must, upon first contact with any EØS citizen, map: (a) whether a registration certificate exists; (b) the residence basis stated in the registration certificate; (c) document this mapping in the case record. This is an obligatory first-step administrative act that must appear in the case file to demonstrate compliance. The obligation falls outside any framework the circular provides guidance for — caseworkers must comply with an intake obligation that R-35 § 2 does not address. In offices with rare EØS applicants, caseworkers may not be routinely familiar with registration certificate format or residence basis categories, adding a competence dimension to the burden.

R-§2-12 — Classified [MIXED]. The caseworker must: (a) identify what the registration certificate states; (b) determine whether the registration basis is still operative at application time; (c) request updated documentation demonstrating current residence basis; (d) document the assessment. The "uavhengig av" formulation requires an active re-assessment regardless of prior registration, creating a distinct second administrative event. This obligation falls outside any framework the circular provides guidance for.

R-§2-13 — Classified [INTERNAL CONTROL]. The caseworker must: (a) establish weekly working hours (through documentation request); (b) compare against the 10-hour threshold; (c) if triggered, initiate a documented holistic assessment of worker status; (d) record the threshold decision and the assessment. The threshold-based trigger converts a continuous factual inquiry into a binary decision point with discrete administrative consequences, creating an additional documented procedural event. This obligation falls outside any framework the circular provides guidance for. Caseworkers without regular exposure to EU worker-status assessment will struggle to perform step (c) correctly.

R-§2-14 — Classified [INTERNAL CONTROL]. The caseworker must: (a) receive the applicant's claim of worker status; (b) note that income is insufficient; (c) request and receive documentation that the residence basis "continues to stand" (documentation of ongoing employment, pay slips, employment contracts); (d) document receipt and assessment. This

creates a specific evidentiary sub-process within the broader eligibility assessment. This obligation falls outside any framework the circular provides guidance for.

R-§2-15 — Classified [INTERNAL CONTROL]. The caseworker must: (a) identify the applicant as claiming self-employed status; (b) request documentation of both the reality of the business activity and the ongoing validity of the residence basis (business registration, accounts, evidence of active trading); (c) assess genuineness; (d) document the assessment. "Genuineness" of business activity is a legal assessment requiring knowledge of UDI practice and EU criteria that most generalist caseworkers will not routinely maintain. This obligation falls outside any framework the circular provides guidance for.

R-§2-16 — Classified [INTERNAL CONTROL]. The caseworker must: (a) note the applicant's claim of having had reasonable cause for resignation; (b) specifically request a medical certificate or equivalent documentation; (c) assess the claim against the rimelig grunn standard; (d) document the assessment and the evidentiary basis. This imports a labour law assessment (whether cause for resignation was legally reasonable) into the social services eligibility procedure, requiring the caseworker to apply a legal standard from a different domain. This obligation falls outside any framework the circular provides guidance for. The category error (labour law standard in a social services context) compounds the administrative burden because the standard is not defined in any social services normative instrument.

R-§2-17 — Classified [MIXED]. The caseworker must explicitly assess and document: (a) work hours per week; (b) wage level; (c) whether the applicant has paid holiday entitlement; (d) whether the applicant has sick pay rights. These four factors must appear in the assessment record. Paid holiday and sick pay entitlements are labour law concepts that require the caseworker to acquire and document employment-contract information, adding a documentary sub-process. This obligation falls outside any framework the circular provides guidance for.

R-§2-18 — Classified [MIXED]. The caseworker must: (a) identify that a medical certificate has been or should be produced; (b) weight it explicitly in the assessment record; (c) document that weight was given. The prescriptive evidential weight ("must be given weight") means the medical certificate must appear as a named element in the assessment record, not merely as one document among others. This obligation falls outside any framework the circular provides guidance for.

R-§2-19 — Classified [MIXED]. The caseworker must: (a) frame the assessment as a holistic evaluation specifically fixed to the application date; (b) assess the temporary work-incapacity question; (c) document the holistic character of the evaluation and its temporal anchor. The "holistic assessment" standard, when specified as a procedural requirement, creates an audit-facing documentation obligation: the caseworker must demonstrate that the assessment was holistic and temporally anchored. This obligation falls outside any framework the circular provides guidance for.

R-§2-20 — Classified [INTERNAL CONTROL]. The caseworker must obtain and verify: (a) formal documentation of enrollment in vocational training (admission letter or equivalent); (b) a written statement from the applicant explaining the connection between current training and prior work. The written explanation is an unusual documentary requirement —

applicants are expected to produce a narrative document — which must then be assessed and filed. This obligation falls outside any framework the circular provides guidance for.

R-§2-21 — Classified [INTERNAL CONTROL]. The caseworker must: (a) identify the applicant as a family member relying on a primary EØS citizen's residence rights; (b) require the family member to produce documentation that all conditions for retained residence are met; (c) assess those conditions; (d) document the assessment. The burden is on the family member, not Nav, but Nav must manage the documentation process and assess its sufficiency. This obligation falls outside any framework the circular provides guidance for.

STEP 6 — CATALOG ENTRIES

REQUIREMENT ID: R-§2-1 **PROVISION TEXT:** Nav must conduct a concrete individual assessment when there is doubt about whether a person has permanent residence (fast bopel) in Norway. **SOURCE INSTRUMENT:** Circular — R-35, § 2, punkt 1.2.1.1 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — § 2 establishes bopel as a condition but does not itself prescribe individual assessment procedures; procedural obligation derives from fvl. § 17 and administrative law principles **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. Individual assessment is the core professional task; the obligation does not add overhead beyond substantive eligibility determination. **KILL LIST CLASSIFICATION:** No Kill List Action — requirement has sufficient authority and serves the user's legal security directly. **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: R-§2-2 **PROVISION TEXT:** In the holistic bopel assessment, the caseworker may emphasize specific enumerated factors: national registry status, spouse and children in Norway, national insurance membership, tax obligations, housing situation, duration and purpose of stay, future plans. **SOURCE INSTRUMENT:** Circular — R-35, § 2, punkt 1.2.1.1 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — the specific factor list has no textual basis in § 2; derives from circular elaboration of the undefined "bopel" concept **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — latent competence issue in municipalities with very few bopel-borderline cases; factor list may not be actively maintained **PURPOSE:** MIXED — primary: user need (fair assessment criteria); secondary: internal control (creates an auditable checklist) **BURDEN DESCRIPTION:** Caseworkers must structure assessment records to demonstrate consideration of the enumerated factors, creating a checklist documentation obligation within the otherwise narrative assessment task. Circular guidance is present. **KILL LIST CLASSIFICATION:** Category C — Clarification. The permissive "kan blant annet legges vekt på" language in the circular correctly reflects advisory rather than mandatory status, but supervisory practice may treat the list as a compliance checklist.

Clarification is needed that the list is illustrative and does not create individual mandatory documentation items. **TRANSACTION COST CATEGORY:** Documentation Inflation (minor)

REQUIREMENT ID: R-§2-3 **PROVISION TEXT:** Nav must make a concrete and individual assessment of the basis for residence when an EØS citizen has student or own-means residence status and applies for social services. **SOURCE INSTRUMENT:** Circular — R-35, § 2, punkt 1.2.2.2 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — § 2 authorizes regulations for EØS rules but does not itself mandate this assessment procedure; derived from the Unionsborgerdirektivet framework as applied through research **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** YES — Anchor Document, A-2 (§18): EØS residence assessment flagged as latent volume driver with K-mechanism; caseworkers in small municipalities cannot maintain EU free movement law competence without regular exposure to these cases **PURPOSE:** USER NEED — correct assessment of residence basis directly determines the applicant's rights **BURDEN DESCRIPTION:** No transaction cost burden identified beyond the substantive assessment task. Circular guidance is present. **KILL LIST CLASSIFICATION:** No Kill List Action — sufficient authority; however, the competence sustainability concern (Scale Flag) warrants systemic attention outside this audit's scope. **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: R-§2-4 **PROVISION TEXT:** For EØS citizens with short-stay (up to three months) or job-seeker residence basis, Nav must conduct a concrete and individual assessment of whether the person has fast bopel. **SOURCE INSTRUMENT:** Circular — R-35, § 2, punkt 1.2.2.2 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — same analysis as R-§2-3; § 2 establishes bopel as a condition but does not prescribe the individual assessment procedure **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** YES — Anchor Document, A-2: EØS residence assessment as latent K-mechanism volume driver **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified beyond substantive assessment. Circular guidance is present. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: R-§2-5 **PROVISION TEXT:** Nav may require that a person documents their legal stay; what specifically can be required varies case by case. **SOURCE INSTRUMENT:** Circular — R-35, § 2, punkt 1.2.2.6 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — supported by fvl. § 17 generally; § 2 does not directly grant this evidentiary authority **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** MIXED — primary: user need (accurate eligibility determination); secondary: internal control (evidentiary record) **BURDEN DESCRIPTION:** Caseworker must exercise judgment about what documentation to require per case; permissive formulation preserves discretion and limits burden. Circular guidance is present. **KILL LIST CLASSIFICATION:** No Kill List Action — permissive language is appropriately

calibrated. No action needed. **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: R-§2-6 **PROVISION TEXT:** Nav must independently assess whether an applicant has documented legal stay at the time of application, regardless of prior determinations. **SOURCE INSTRUMENT:** Circular — R-35, § 2, punkt 1.2.2.6 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — implies from § 2 and fvl. § 17 but § 2 does not impose a specific independent assessment duty **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** YES — Anchor Document, A-2: active EU free movement law competence required for current-status assessment; K-mechanism **PURPOSE:** MIXED — primary: user need (ensures currency of assessment); secondary: internal control (temporal specificity creates an auditable act) **BURDEN DESCRIPTION:** Caseworker must conduct and document a fresh independent assessment at application time, creating an additional documented step. The temporal specificity ("på søknadstidspunktet") adds a discrete administrative event to the workflow. Circular guidance is present. **KILL LIST CLASSIFICATION:** Category C — Clarification. The temporal specificity requirement, while substantively defensible, creates a per-case compliance event that may be interpreted more strictly than the user-protective purpose requires. Clarification of what "independent assessment" demands in practice — and what adequate documentation of it looks like — would reduce administrative shadow-binding. **TRANSACTION COST CATEGORY:** Documentation Inflation (minor)

REQUIREMENT ID: R-§2-7 **PROVISION TEXT:** Persons who lack a passport or equivalent travel document must present a formal decision from immigration authorities (vedtak fra utlendingsmyndighetene). **SOURCE INSTRUMENT:** Circular — R-35, § 2, punkt 1.2.2.6 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** NO — § 2 does not specify what documentation proves legal stay; the specific document-type requirement (immigration authority decision) has no statutory anchor **DOUBLE AUTHORITY GAP:** NO (circular authority present) **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** INTERNAL CONTROL — specific document-type requirement serves administrative verification and record-completeness rather than improving assessment accuracy **BURDEN DESCRIPTION:** Caseworker must identify the absence of passport, request the specific administrative document (vedtak fra UDI/utlendingsmyndighetene), receive and log it. In practice: contact with applicant → specific document request → receipt and verification → file documentation. For caseworkers with infrequent exposure, identifying the correct document type may require guidance. Circular guidance is present. **KILL LIST CLASSIFICATION:** Category B — Status Change. The imperative formulation ("må fremvise") lacks statutory authority and converts a permissive evidentiary principle into a mandatory specific-document requirement. Reformulation to permissive language ("kan be om å fremvise") would restore caseworker discretion while preserving the evidential guidance function. **TRANSACTION COST CATEGORY:** Documentation Inflation; Procedural Duplication (overlap with general investigation duty under fvl. § 17)

REQUIREMENT ID: R-§2-8 **PROVISION TEXT:** Nav must in every single case involving an EØS citizen request the documentation necessary to assess whether the person has residence rights. **SOURCE INSTRUMENT:** Circular — R-35, § 2, punkt 1.2.2.6 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — supported by fvl. § 17 generally; the "i hver enkelt sak" absolute formulation goes beyond what fvl. § 17 requires and has no specific statutory anchor **DOUBLE AUTHORITY GAP:** NO (circular authority present) **CATEGORY ERROR:** NO **SCALE FLAG:** YES — Anchor Document, A-2: K-mechanism; EØS documentation landscape requires sustained familiarity; per-case absolute obligation compounds the knowledge requirement **PURPOSE:** INTERNAL CONTROL — the absolute per-case formulation converts a flexible investigative duty into a compliance event; primary function is to ensure documented evidence-seeking rather than to improve assessment quality **BURDEN DESCRIPTION:** Caseworker must in every EØS case generate a documented documentation request, constituting a discrete administrative act with its own case-file footprint regardless of whether documentation is actually needed or already available. The "i hver enkelt sak" formulation means no discretionary waiver is possible even when documentation is obviously unnecessary. Circular guidance is present. **KILL LIST CLASSIFICATION:** Category B — Status Change. The absolute formulation ("må i hver enkelt sak") lacks statutory authority for its per-case mandatory character. The fvl. § 17 duty is flexible and judgment-based. Reformulation to "skal som utgangspunkt etterspørre" or equivalent would restore proportionate caseworker discretion. **TRANSACTION COST CATEGORY:** Documentation Inflation; Reporting Overhead

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REQUIREMENT ID: R-§2-9 **PROVISION TEXT:** If the EØS citizen does not produce the requested documentation, Nav must still assess the person's residence status based on the probability of the information provided. **SOURCE INSTRUMENT:** Circular — R-35, § 2, punkt 1.2.2.6 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — directly supported by fvl. § 17 (duty to assess on basis of probability when documentation is incomplete) **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED — anti-exclusionary fallback that protects applicants who cannot produce formal documents **BURDEN DESCRIPTION:** No transaction cost burden identified. This requirement expands rather than restricts caseworker action and protects users who would otherwise be excluded by documentation requirements. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: R-§2-10 **PROVISION TEXT:** Nav offices shall not assess fast bopel for EØS citizens who have documented legal stay as workers, self-employed persons, service providers, students, or persons with own means. **SOURCE INSTRUMENT:** Kommunebrev 2025, § 2 (PROC-REQ-2.9) — (a) Kommunebrev **CIRCULAR AUTHORITY:** ABSENT — this requirement operates outside R-35 § 2. Consequence: the instruction is delivered through an instrument of lower normative clarity than the circular; its relationship to the circular framework is undefined and Nav offices may be uncertain whether it overrides or supplements the circular text. **LEGAL AUTHORITY:** PARTIAL — aligns with EØS law and the regulatory authorization in § 2; substantive content is legally defensible, but the vehicle

(Kommunebrev) does not have the normative force of a regulation or circular amendment **DOUBLE AUTHORITY GAP:** NO (legal authority is partial, not absent) **CATEGORY ERROR:** NO **SCALE FLAG:** NO — this requirement reduces burden and does not create scale-sensitive compliance demands **PURPOSE:** USER NEED — reduces procedural burden on both applicants and caseworkers; aligns eligibility procedures with EØS law **BURDEN DESCRIPTION:** No transaction cost burden identified; this requirement removes an assessment step. However, the absence of circular authority means caseworkers may be uncertain about the relationship between this instruction and the circular text, creating interpretive overhead. Caseworkers must resolve a potential apparent conflict between two normative instruments. **KILL LIST CLASSIFICATION:** Category C — Clarification. This beneficial requirement should be incorporated formally into R-35 § 2 to resolve the normative gap created by its current delivery via Kommunebrev. The absence of circular authority creates interpretive uncertainty that reduces the requirement's effectiveness. **TRANSACTION COST CATEGORY:** No Transaction Cost Identified (as applied); minor interpretive overhead from normative fragmentation

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REQUIREMENT ID: R-§2-11 **PROVISION TEXT:** When an EØS citizen contacts Nav, Nav must map whether the person has a registration certificate (registreringsbevis) and what the residence basis stated in the certificate is. **SOURCE INSTRUMENT:** Veileder for Nav-kontoret ved vurdering av lovlig opphold for EØS-borgere — (b) Veileder **CIRCULAR AUTHORITY:** ABSENT — this requirement has no presence in R-35 § 2. Consequence: caseworkers must comply with an intake obligation that the primary normative instrument governing their work does not address. **LEGAL AUTHORITY:** NO — § 2 does not prescribe a mandatory first-step registration-certificate mapping procedure **DOUBLE AUTHORITY GAP:** YES **CATEGORY ERROR:** NO **SCALE FLAG:** YES — Anchor Document, A-2: K-mechanism; familiarity with registration certificate format and residence basis categories requires regular EØS case exposure that small municipalities cannot sustain **PURPOSE:** INTERNAL CONTROL — mandatory initial mapping serves administrative record-completeness; the user's eligibility is not determined by whether Nav maps the certificate but by whether Nav correctly assesses actual residence status **BURDEN DESCRIPTION:** Caseworker must at first contact: (a) identify the person as an EØS citizen; (b) inquire about registration certificate; (c) establish and document the residence basis stated. This creates a mandatory documented first-step event that falls entirely outside the circular framework. In small municipalities where EØS applicants are rare, caseworkers may not know registration certificate categories or how to interpret residence basis entries, adding competence burden to the documentation burden. **KILL LIST CLASSIFICATION:** Category A — Removal. The requirement lacks both circular and statutory authority (double authority gap), derives from a veileder using mandatory-sounding language, and its primary function is internal administrative record-building rather than user protection. The substantive content can be preserved through permissive guidance without mandatory formulation. **TRANSACTION COST CATEGORY:** Documentation Inflation; Structural Disproportionality (competence burden in small offices with rare EØS cases)

REQUIREMENT ID: R-§2-12 **PROVISION TEXT:** Regardless of what the residence basis was at the time of registration, the EØS citizen must document that they have legal stay at the time of application for social services. **SOURCE INSTRUMENT:** Veileder EØS-borgere — (b) Veileder **CIRCULAR AUTHORITY:** ABSENT — no presence in R-35 § 2. Consequence: the temporal documentation obligation falls outside any framework the circular provides guidance for. **LEGAL AUTHORITY:** NO — § 2 does not impose obligations on applicants to document their legal stay in temporally specific terms, nor does it establish that prior registration bases are legally irrelevant at application time **DOUBLE AUTHORITY GAP:** YES **CATEGORY ERROR:** NO **SCALE FLAG:** YES — Anchor Document, A-2: K-mechanism; current-status EØS documentation assessment requires active legal competence **PURPOSE:** MIXED — primary: internal control (temporal compliance event for administrative record); secondary: user need (current legal status is genuinely relevant to eligibility) **BURDEN DESCRIPTION:** Caseworker must manage a two-step documentation process: (a) establish what the registration certificate shows; (b) independently establish and document current residence status at application time regardless of prior registration. The "uavhengig av" formulation creates an additional documented assessment act. This burden falls outside any circular guidance framework. **KILL LIST CLASSIFICATION:** Category B — Status Change. The requirement has substantive defensibility (current status is legally relevant) but lacks circular and statutory authority in its current mandatory formulation. Reformulation to reflect that current-status assessment is the correct goal — without creating a specific re-documentation obligation per case — would restore proportionality. **TRANSACTION COST CATEGORY:** Documentation Inflation; Procedural Duplication

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REQUIREMENT ID: R-§2-13 **PROVISION TEXT:** If the EØS citizen works fewer than 10 hours per week, Nav must request employment documentation and conduct a concrete holistic assessment. **SOURCE INSTRUMENT:** Veileder EØS-borgere — (b) Veileder **CIRCULAR AUTHORITY:** ABSENT — no presence in R-35 § 2. Consequence: the threshold-triggered documentation cascade falls outside any circular guidance framework. **LEGAL AUTHORITY:** NO — § 2 contains no reference to weekly working hours, quantitative threshold triggers, or documentation requirements keyed to hour thresholds **DOUBLE AUTHORITY GAP:** YES **CATEGORY ERROR:** NO — but note the 10-hour threshold derives from EU free movement doctrine (specifically the CJEU's minimum hours interpretation of worker status) without statutory anchor in the Social Services Act **SCALE FLAG:** YES — Anchor Document, A-2: K-mechanism; assessment of EU worker status below the 10-hour threshold requires active EU free movement law competence; small municipalities encounter these cases too rarely to maintain this competence **PURPOSE:** INTERNAL CONTROL — the threshold creates a mechanically triggered compliance event; the substantive question (whether the applicant is a worker) should be assessed individually without a binary threshold serving as the primary procedural trigger **BURDEN DESCRIPTION:** Caseworker must: (a) establish weekly working hours; (b) apply the 10-hour threshold; (c) if threshold triggered, initiate a documented holistic assessment with employment documentation. The threshold creates two discrete administrative events (threshold decision + assessment) where one holistic assessment would suffice. This burden falls entirely outside the circular framework. Caseworkers in small municipalities will typically lack the EU free movement law competence to execute the holistic assessment correctly. **KILL LIST CLASSIFICATION:** Category A — Removal. The 10-hour threshold requirement

lacks both circular and statutory authority (double authority gap), creates a mechanically triggered compliance event that overrides the individual assessment principle, and imposes a volume-sensitive competence burden without regulatory foundation. The underlying substantive need (assessing whether worker status is genuine) is met by R-§2-4 (individual bopel assessment) and R-§2-3 (individual residence basis assessment). **TRANSACTION COST CATEGORY:** Documentation Inflation; Structural Disproportionality; Combined Burden

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REQUIREMENT ID: R-§2-14 **PROVISION TEXT:** If an EØS citizen claims worker status but earns insufficient income to support themselves, they must document that the basis for their residence continues to stand. **SOURCE INSTRUMENT:** Veileder EØS-borgere — (b) Veileder **CIRCULAR AUTHORITY:** ABSENT — no presence in R-35 § 2. Consequence: the evidentiary burden imposed on the applicant falls outside any circular guidance framework. **LEGAL AUTHORITY:** NO — § 2 does not reference worker status, income sufficiency thresholds, or ongoing documentation obligations for applicants claiming worker status **DOUBLE AUTHORITY GAP:** YES **CATEGORY ERROR:** NO — though the income sufficiency standard is implicitly derived from EU free movement law **SCALE FLAG:** YES — Anchor Document, A-2: K-mechanism; assessment of whether residence basis "continues to stand" in the context of insufficient income requires active EU free movement law competence **PURPOSE:** INTERNAL CONTROL — the requirement primarily serves administrative verification (ensuring the file contains evidence that Nav pursued the question) rather than improving the substantive assessment quality **BURDEN DESCRIPTION:** Caseworker must: (a) note the income insufficiency; (b) specifically request documentation of ongoing residence basis (employment contract, pay slips, UDI correspondence); (c) assess whether the basis continues; (d) document the assessment. This creates an evidentiary sub-process distinct from the core eligibility assessment. The burden falls entirely outside the circular framework. The competence to assess whether a residence basis "continues to stand" in complex EU free movement scenarios is not maintainable in small offices. **KILL LIST CLASSIFICATION:** Category A — Removal. Double authority gap; the specific obligation to demand documentation of ongoing residence basis lacks both circular and statutory foundation. The substantive question is addressed by the general individual assessment obligations (R-§2-3, R-§2-6). **TRANSACTION COST CATEGORY:** Documentation Inflation; Structural Disproportionality

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REQUIREMENT ID: R-§2-15 **PROVISION TEXT:** If an EØS citizen claims self-employed status, they must document that their business activity is genuine and that their residence basis continues to stand. **SOURCE INSTRUMENT:** Veileder EØS-borgere — (b) Veileder **CIRCULAR AUTHORITY:** ABSENT — no presence in R-35 § 2. Consequence: the genuineness assessment falls outside any circular guidance framework. **LEGAL AUTHORITY:** NO — § 2 contains no reference to self-employment or the requirement that business activity be proven genuine **DOUBLE AUTHORITY GAP:** YES **CATEGORY ERROR:** NO — the "genuine self-employment" criterion derives from EU free movement doctrine; it is not a Social Services Act concept **SCALE FLAG:** YES — Anchor Document, A-2: K-mechanism; assessment of whether self-employment is genuine requires familiarity

with UDI practice and CJEU jurisprudence; not maintainable in low-volume offices **PURPOSE:** INTERNAL CONTROL — the requirement to document "genuineness" primarily serves evidentiary record-building; the substantive legal assessment is what matters, and the specific documentation demand is layered on top **BURDEN DESCRIPTION:** Caseworker must: (a) identify the claim of self-employment; (b) request business registration documentation, accounts, evidence of active trading; (c) assess genuineness against an undefined standard; (d) document the assessment. The concept of "genuineness" is not defined in any social services instrument, requiring the caseworker to apply criteria from EU law without guidance. This burden falls entirely outside the circular framework. **KILL LIST CLASSIFICATION:** Category A — Removal. Double authority gap; assessment of self-employment genuineness requires application of EU free movement law criteria that have no statutory or circular basis in the social services framework. The requirement imposes a legal assessment from a different domain without regulatory authorization. **TRANSACTION COST CATEGORY:** Documentation Inflation; Structural Disproportionality; Combined Burden

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REQUIREMENT ID: R-§2-16 **PROVISION TEXT:** If the EØS citizen claims to have had reasonable cause (rimelig grunn) for resignation, this must be documented, for example through a medical certificate from a doctor. **SOURCE INSTRUMENT:** Veileder EØS-borgere — (b) Veileder **CIRCULAR AUTHORITY:** ABSENT — no presence in R-35 § 2. Consequence: this labour law-derived assessment falls entirely outside any circular guidance framework. **LEGAL AUTHORITY:** NO — § 2 contains no reference to voluntary resignation, reasonable cause standards, or documentation of such events **DOUBLE AUTHORITY GAP:** YES **CATEGORY ERROR:** YES — the "rimelig grunn" standard for resignation is a labour law concept (derived from arbeidsmiljøloven and related frameworks) imported into the social services eligibility assessment without statutory authorization. The Social Services Act does not govern the circumstances under which termination of employment is legally excusable. **SCALE FLAG:** YES — Anchor Document, A-2: K-mechanism; applying a labour law assessment standard within a social services eligibility procedure requires dual-domain competence not maintainable in small offices **PURPOSE:** INTERNAL CONTROL — in its social services application, this requirement primarily serves administrative record-building; the substantive social services eligibility question (whether the person needs assistance) is separate from the labour law question of whether resignation was for good reason **BURDEN DESCRIPTION:** Caseworker must: (a) identify the resignation claim; (b) request documentary evidence of reasonable cause; (c) apply a labour law standard (rimelig grunn) to assess the claim; (d) document the assessment. The "for example a medical certificate" formulation implies but does not exhaust the document types accepted, leaving the caseworker uncertain about the evidentiary standard. This burden falls entirely outside the circular framework, requires application of labour law concepts, and constitutes a category error in domain. **KILL LIST CLASSIFICATION:** Category A — Removal. Double authority gap plus category error: the requirement belongs to the labour law domain, not to the social services normative framework. Its presence in a social services veileder is unauthorized and imposes an alien legal standard on caseworkers without regulatory foundation. **TRANSACTION COST CATEGORY:** Documentation Inflation; Structural Disproportionality; Combined Burden

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REQUIREMENT ID: R-§2-17 **PROVISION TEXT:** In the worker-status assessment, weight must be given to: number of working hours per week, wage level, whether the person has the right to paid holiday, and whether the person has the right to continued salary during illness. **SOURCE INSTRUMENT:** Veileder EØS-borgere — (b) Veileder **CIRCULAR AUTHORITY:** ABSENT — no presence in R-35 § 2. Consequence: the enumerated assessment factors fall outside any circular guidance framework. **LEGAL AUTHORITY:** NO — § 2 contains none of these detailed economic assessment criteria **DOUBLE AUTHORITY GAP:** YES **CATEGORY ERROR:** PARTIAL — paid holiday entitlement (rett til betalt ferie) and sick pay rights (rett til lønn ved sykdom) are labour law concepts (derived from ferieloven and arbeidsmiljøloven) imported into the social services assessment without authorization. Their presence in this list constitutes a partial category error. **SCALE FLAG:** YES — Anchor Document, A-2: K-mechanism; multi-factor economic assessment of worker status using EU and labour law criteria requires active specialized competence **PURPOSE:** MIXED — primary: user need (the factors are substantively relevant to EU worker status and correct application serves the applicant's rights); secondary: internal control (the prescriptive enumeration creates an audit checklist of factors that must appear documented in the assessment record). Note: the partial category error (labour law factors) means the internal control dimension is dominant for those specific sub-criteria. **BURDEN DESCRIPTION:** Caseworker must explicitly assess and document each of the four factors, including labour law concepts (betalt ferie, lønn ved sykdom) that require knowledge of employment law. The veileder creates a per-factor documentation obligation — all four must appear in the assessment record. This burden falls entirely outside the circular framework and requires dual-domain competence (EU free movement law + labour law) not maintainable in small offices. **KILL LIST CLASSIFICATION:** Category A — Removal as to the labour-law criteria (betalt ferie, lønn ved sykdom); Category B — Status Change as to the remaining criteria (arbeidstimer, lønn). The labour law factors should be removed from the social services assessment framework entirely (category error). The remaining factors should be reformulated as permissive guidance rather than mandatory assessment criteria. **TRANSACTION COST CATEGORY:** Documentation Inflation; Structural Disproportionality; Combined Burden

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REQUIREMENT ID: R-§2-18 **PROVISION TEXT:** In the assessment, weight must be given to documentation in the form of a medical certificate (legeattest). **SOURCE INSTRUMENT:** Veileder EØS-borgere — (b) Veileder **CIRCULAR AUTHORITY:** ABSENT — no presence in R-35 § 2. Consequence: the prescriptive evidential weight falls outside any circular guidance framework. **LEGAL AUTHORITY:** NO — § 2 contains no reference to medical certificates or prescriptive evidentiary hierarchies **DOUBLE AUTHORITY GAP:** YES **CATEGORY ERROR:** NO — but the medico-legal dimension (mandatory weight to be given to medical documentation) creates an unusual intersection between administrative law evidentiary principles and medical documentation that lacks any procedural law basis **SCALE FLAG:** YES — Anchor Document, A-2: K-mechanism; medico-legal assessment of EØS worker incapacity requires sustained competence **PURPOSE:** MIXED — primary: user need (medical evidence is substantively relevant to incapacity claims and correct weighting protects the applicant); secondary: internal control (the "must be given weight" formulation

creates a prescribed evidential hierarchy that constrains caseworker judgment and creates an auditable compliance standard) **BURDEN DESCRIPTION:** Caseworker must explicitly note in the assessment record that a medical certificate was received and weighted. The prescribed mandatory weight (as opposed to discretionary consideration) creates a distinct compliance obligation: the caseworker cannot simply acknowledge the document but must demonstrate documented evidential weighting. This burden falls entirely outside the circular framework. **KILL LIST CLASSIFICATION:** Category B — Status Change. The mandatory weight prescription ("må det legges vekt på") has no circular or statutory authority and constrains caseworker evidential judgment unnecessarily. Reformulation to "kan legges vekt på" (may be given weight) would restore proportionate professional discretion while preserving the guidance value of the evidentiary indication. **TRANSACTION COST CATEGORY:** Documentation Inflation

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REQUIREMENT ID: R-§2-19 **PROVISION TEXT:** To assess whether an EØS citizen is to be considered temporarily unable to work (midlertidig arbeidsufør), a holistic assessment must be conducted based on the situation at the time of application. **SOURCE INSTRUMENT:** Veileder EØS-borgere — (b) Veileder **CIRCULAR AUTHORITY:** ABSENT — no presence in R-35 § 2. Consequence: the midlertidig arbeidsufør assessment obligation falls outside any circular guidance framework. **LEGAL AUTHORITY:** NO — § 2 does not contain the concept of temporary work incapacity, nor does it prescribe a holistic assessment fixed to the application date for this purpose **DOUBLE AUTHORITY GAP:** YES **CATEGORY ERROR:** PARTIAL — the concept of midlertidig arbeidsufør as a status preserving worker residence rights is derived from EU free movement law (Unionsborgerdirektivet art. 7(3)) and implicitly from labour/insurance law; its application as a social services eligibility criterion constitutes a partial category error **SCALE FLAG:** YES — Anchor Document, A-2: K-mechanism; EU free movement assessment of temporary incapacity requires specialized competence **PURPOSE:** MIXED — primary: user need (correct assessment of incapacity status protects the applicant's residence rights and thereby eligibility); secondary: internal control (the holistic + temporal anchor formulation creates an auditable procedural standard) **BURDEN DESCRIPTION:** Caseworker must: (a) frame the assessment as a holistic evaluation; (b) temporally anchor it to the application date specifically; (c) document both the holistic character and the temporal anchor. The procedural specification ("holistic," "at the time of application") creates documentation obligations beyond what substantive accuracy requires. This burden falls entirely outside the circular framework. **KILL LIST CLASSIFICATION:** Category B — Status Change. The mandatory formulation of the holistic + temporal anchor standard lacks circular and statutory authority. The substantive assessment is legally defensible, but its procedural specification should be reformulated as guidance rather than obligation. **TRANSACTION COST CATEGORY:** Documentation Inflation

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REQUIREMENT ID: R-§2-20 **PROVISION TEXT:** The EØS citizen must present documentation of enrollment in vocational training and provide a short written explanation of the connection between the training and their prior employment. **SOURCE INSTRUMENT:** Veileder EØS-borgere — (b) Veileder **CIRCULAR AUTHORITY:** ABSENT — no presence in R-35 § 2. Consequence: both the enrollment documentation requirement and the written

narrative requirement fall outside any circular guidance framework. **LEGAL AUTHORITY:** NO — § 2 contains no reference to vocational training, enrollment documentation, or the requirement to establish a nexus to prior employment **DOUBLE AUTHORITY GAP:** YES **CATEGORY ERROR:** NO **SCALE FLAG:** YES — Anchor Document, A-2: K-mechanism; assessment of vocational training nexus requires knowledge of EU free movement criteria that is not maintainable without regular exposure **PURPOSE:** INTERNAL CONTROL — the written narrative requirement (explaining the connection between training and prior work) is unusual in the administrative documentation context and primarily serves record-building; the caseworker can assess the substantive connection without a written statement from the applicant **BURDEN DESCRIPTION:** Caseworker must: (a) request enrollment documentation; (b) specifically request a written narrative from the applicant explaining the training-employment nexus; (c) receive and assess both documents; (d) document the assessment. The written narrative requirement is an unusual evidentiary demand — applicants must produce an authored explanatory document — that falls entirely outside the circular framework and has no equivalent in any other eligibility assessment domain. **KILL LIST CLASSIFICATION:** Category A — Removal. Double authority gap; the written narrative requirement has no statutory or circular basis and constitutes an unusual documentary burden on applicants with no normative foundation. Enrollment documentation (less the narrative) may be retained as permissive guidance. **TRANSACTION COST CATEGORY:** Documentation Inflation; Reporting Overhead

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REQUIREMENT ID: R-§2-21 **PROVISION TEXT:** Family members must document to Nav that the conditions are met for them to be considered to retain legal residence in Norway for social services purposes. **SOURCE INSTRUMENT:** Veileder EØS-borgere — (b) Veileder **CIRCULAR AUTHORITY:** ABSENT — no presence in R-35 § 2. Consequence: the third-party documentation burden falls outside any circular guidance framework. **LEGAL AUTHORITY:** NO — § 2 does not reference family members, specify conditions for their residence retention, or impose a documentation burden on them **DOUBLE AUTHORITY GAP:** YES **CATEGORY ERROR:** NO — the EU free movement family member retention criteria are substantively applicable; the category error is the absence of statutory authorization for this specific documentation demand in the social services context **SCALE FLAG:** YES — Anchor Document, A-2: K-mechanism; family member EØS residence retention assessments require sustained EU free movement law competence **PURPOSE:** INTERNAL CONTROL — the documentation burden is placed on the family member primarily to satisfy Nav's evidentiary record; the substantive eligibility question (whether the family member retains residence rights) can be assessed without requiring specific documentation to be produced in this form **BURDEN DESCRIPTION:** Caseworker must: (a) identify the applicant as a family member relying on a primary EØS citizen's rights; (b) determine what conditions apply for retention; (c) require the family member to produce documentation; (d) assess sufficiency; (e) document the assessment. The obligation to impose a specific documentary burden on a third party (the family member) falls entirely outside the circular framework. Caseworkers must apply EU free movement retention criteria without circular guidance. **KILL LIST CLASSIFICATION:** Category A — Removal. Double authority gap; documentation burden on family members lacks circular and statutory authority. The substantive requirement to assess whether family member rights are retained is preserved by R-§2-3 and R-§2-4 as applied to family members; this additional specific

obligation adds burden without normative foundation. **TRANSACTION COST CATEGORY:** Documentation Inflation; Structural Disproportionality

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CLOSING COMPARATIVE NOTE

Summary Statistics

Metric	Count
Total requirements identified from Process Inflation Findings	21
Requirements visible from circular paragraph alone	9
Requirements invisible from circular alone	12
Double authority gaps	11 (R-§2-11 through R-§2-21, excluding R-§2-10)
Category errors (different legal domain)	3 full (R-§2-16, R-§2-17 partial, R-§2-19 partial) — 3 requirements with confirmed category error designation
Kill List Category A (Removal)	6 (R-§2-11, R-§2-13, R-§2-14, R-§2-15, R-§2-16, R-§2-20, R-§2-21) — 7 total
Kill List Category B (Status Change)	5 (R-§2-7, R-§2-8, R-§2-12, R-§2-17 partial, R-§2-18, R-§2-19) — 6 total
Kill List Category C (Clarification)	3 (R-§2-2, R-§2-6, R-§2-10)
No Kill List Action	5 (R-§2-1, R-§2-3, R-§2-4, R-§2-5, R-§2-9)

Note: R-§2-17 carries both Category A (for the labour-law sub-criteria) and Category B (for the remaining criteria); counted once in the primary category (A) above.

Kill List Breakdown

Category A — Removal (7 requirements): R-§2-11, R-§2-13, R-§2-14, R-§2-15, R-§2-16, R-§2-20, R-§2-21. These requirements are candidates for repeal from the social services normative framework. All derive from the EØS veileder, all carry double authority gaps, and several (R-§2-16, R-§2-17) involve category errors importing labour law standards without statutory warrant. R-§2-17 is partially Category A for the labour-law sub-criteria.

Category B — Status Change (6 requirements): R-§2-7, R-§2-8, R-§2-12, R-§2-17 (remaining criteria), R-§2-18, R-§2-19. These requirements use imperative language ("må,"

"skal") without binding authority at the relevant normative level. Reformulation to permissive language would restore local discretion and proportionate professional judgment.

Category C — Clarification (3 requirements): R-§2-2, R-§2-6, R-§2-10. These requirements have defensible authority but create shadow binding through ambiguous formulation or normative fragmentation (Kommunebrev vs. circular).

No Kill List Action (5 requirements): R-§2-1, R-§2-3, R-§2-4, R-§2-5, R-§2-9. These requirements have sufficient legal grounding and serve user protection as their primary function.

Transaction Cost Categories by Frequency

Category	Occurrences
Documentation Inflation	14 (present in almost every requirement outside the No Action group)
Structural Disproportionality	8 (all requirements with double authority gap + scale flag)
Combined Burden	4 (R-§2-13, R-§2-15, R-§2-16, R-§2-17)
Procedural Duplication	3 (R-§2-7, R-§2-8, R-§2-12)
Reporting Overhead	2 (R-§2-8, R-§2-20)
No Transaction Cost Identified	6 (R-§2-1, R-§2-3, R-§2-4, R-§2-5, R-§2-9, R-§2-10)

Principal Findings for Main Report

The § 2 analysis reveals a two-layer normative structure. The first layer — requirements 1–9 in the circular — is largely defensible in authority terms, with the partial exception of R-§2-7 and R-§2-8 where imperative formulations exceed their statutory foundation. The second layer — requirements 10–21, invisible from the circular — represents a substantially heavier normative load that operates without circular authority and in eleven cases without statutory authority either.

The EØS veileder (requirements 11–21) constitutes the single most significant source of unauthorized normative inflation in this paragraph. It converts a statutory scope provision (§ 2) into an elaborate eligibility-assessment procedure for EØS citizens, importing EU free movement law criteria and in several instances labour law standards, without any statutory or circular authorization. The Anchor Document confirms that this entire procedural apparatus — which presupposes active EU free movement law competence — qualifies as a latent volume driver of potentially high severity that is structurally unmaintainable in small municipalities with rare EØS cases.

The primary recommendation flowing from this audit is the repeal or fundamental reformulation of requirements R-§2-11 through R-§2-21 as currently expressed in the

veileder, with the substantive content of user-protective requirements redistributed into the circular framework under permissive rather than mandatory language.

SLUDGE AUDIT — § 3 KOMMUNENS ANSVAR

Complete Analytical Record

PRELIMINARY METHODOLOGICAL NOTE

Visibility comparison: The Process Inflation Findings enumerate **18 requirements** for § 3. Starting from the circular paragraph alone (R-35, sections 2.3.2.1–2.3.2.6 in the Context Document), only **8 requirements** are directly visible — specifically Requirements 1 through 8, all of which are sourced to R-35 itself and appear verbatim or in close paraphrase in the circular text.

Requirements with no textual presence in the circular (10 requirements):

Req.	Source Instrument	Instrument Type
9	Veileder for samarbeid mellom kriminalomsorgen og Nav	(b) veileder
10	Kommunebrev 2025	(a) Kommunebrev
11	Veileder til sosialtjenesteloven § 17	(b) veileder
12	Veileder til sosialtjenesteloven § 17	(b) veileder
13	Veileder for Nav-kontoret ved vurdering av lovlig opphold for EØS-borgere	(b) veileder
14	Veileder for Nav-kontoret ved vurdering av lovlig opphold for EØS-borgere	(b) veileder
15	Veileder for Nav-kontoret ved vurdering av lovlig opphold for EØS-borgere	(b) veileder
16	Veileder om økonomisk stønad etter sosialtjenesteloven	(b) veileder
17	Veileder om økonomisk stønad etter sosialtjenesteloven	(b) veileder
18	Nasjonal veileder for samarbeidet mellom kriminalomsorgen og Nav	(b) veileder

Structural implication: Ten of eighteen requirements governing caseworker behavior under § 3 originate entirely in sub-legal guidance instruments. A circular-only reading of R-35 § 3

would miss 56% of the normative obligations actually enforced in practice. This gap — between what the circular says and what the sub-legal layer imposes — is the core analytical target for Steps 2 through 6 below.

STEP 1 — IDENTIFICATION OF ALL REQUIREMENTS

Requirement 1 (PROC-REQ 3.1) *Obligation:* Nav-kontoret har plikt til å ta imot og vurdere alle skriftlige og muntlige henvendelser som gjelder et behov for sosiale tjenester, uavhengig av hvor personen som henvender seg bor. *Source:* R-35, § 3 / 2.3.2.1 *Nature:* Explicit *Circular presence:* YES — verbatim in section 2.3.2.1

Requirement 2 (PROC-REQ 3.2) *Obligation:* Behovet for tjenester skal vurderes ut fra personens situasjon her og nå. *Source:* R-35, § 3 / 2.3.2.1 *Nature:* Explicit *Circular presence:* YES — verbatim in section 2.3.2.1

Requirement 3 (PROC-REQ 3.3) *Obligation:* Hjelp og omfang vurderes ut fra tre faktorer: den enkeltes situasjon, hva det søkes om, og om oppholdet er fast eller midlertidig. *Source:* R-35, § 3 / 2.3.2.2 *Nature:* Explicit *Circular presence:* YES — verbatim in section 2.3.2.2

Requirement 4 (PROC-REQ 3.4) *Obligation:* Ved uassistert flytting mellom kommuner må Nav-kontoret i den nye kommunen kartlegge og vurdere hjelpebehovet proaktivt. *Source:* R-35, § 3 / 2.3.2.3 *Nature:* Explicit *Circular presence:* YES — verbatim in section 2.3.2.3

Requirement 5 (PROC-REQ 3.5) *Obligation:* Dersom personen har vedtak om livsopphold fra annen kommune, skal det vurderes om det foreligger behov for livsopphold når vedtaket utløper. *Source:* R-35, § 3 / 2.3.2.3 *Nature:* Explicit *Circular presence:* YES — verbatim in section 2.3.2.3

Requirement 6 (PROC-REQ 3.6) *Obligation:* Tre-delt vurdering: (i) behov for midlertidig botilbud, (ii) dekning av boutgifter, (iii) bistand til å avvikle boforholdet i annen kommune. *Source:* R-35, § 3 / 2.3.2.3 *Nature:* Explicit *Circular presence:* YES — verbatim in section 2.3.2.3

Requirement 7 (PROC-REQ 3.7) *Obligation:* Nav-kontoret må vurdere søknadene på vanlig måte etter §§ 18 og 19. *Source:* R-35, § 3 / 2.3.2.4 *Nature:* Explicit *Circular presence:* YES — verbatim in section 2.3.2.4

Requirement 8 (PROC-REQ 3.8) *Obligation:* Nav-kontoret bør kontakte og samarbeide med institusjonen eller boligen for forberedelser og tilrettelegging av tjenester ved utskriving. *Source:* R-35, § 3 / 2.3.2.5 *Nature:* Explicit (permissive — bør) *Circular presence:* YES — verbatim in section 2.3.2.5

Requirement 9 (PROC-REQ 3.S1) *Obligation:* Før avvisning og jurisdiksjonell henvisning skal Nav-kontoret foreta en vurdering av hva som er til beste for søkeren og eventuell familie. *Source:* Veileder for samarbeid mellom kriminalomsorgen og Nav *Nature:* Implicit (procedural standard imposed prior to a discretionary rejection step) *Circular presence:* NO — entirely absent from R-35 § 3

Requirement 10 (PROC-REQ 3.S2) *Obligation:* Dersom kommunen opplever økt pågang på de sosiale tjenestene, ligger det i kommunens ansvar å sørge for at tjenesten er dimensjonert for å ivareta dette. *Source:* Kommunebrev 2025 *Nature:* Explicit (classified as substantive legal obligation in Process Inflation Findings) *Circular presence:* NO — entirely absent from R-35 § 3

Requirement 11 (DOC-REQ 3.1) *Obligation:* Nav-kontoret har plikt til å nedtegne muntlige søknader. *Source:* Veileder til sosialtjenesteloven § 17 *Nature:* Explicit *Circular presence:* NO — entirely absent from R-35 § 3

Requirement 12 (DOC-REQ 3.2) *Obligation:* Det holder at søknaden fremgår av saken, som i et notat (minimumstandard for dokumentasjon). *Source:* Veileder til sosialtjenesteloven § 17 *Nature:* Explicit *Circular presence:* NO — entirely absent from R-35 § 3

Requirement 13 (DOC-REQ 3.3) *Obligation:* EØS-borger må dokumentere lovlig opphold, eventuelt varig oppholdsrett, på søknadstidspunktet. *Source:* Veileder for Nav-kontoret ved vurdering av lovlig opphold for EØS-borgere *Nature:* Explicit *Circular presence:* NO — entirely absent from R-35 § 3

Requirement 14 (DOC-REQ 3.4) *Obligation:* Nav-kontoret har et selvstendig ansvar for å sikre at saken er tilstrekkelig opplyst og at oppholdsstatus er dokumentert i saker der lovlig opphold er et inngangskriterium. *Source:* Veileder for Nav-kontoret ved vurdering av lovlig opphold for EØS-borgere *Nature:* Explicit *Circular presence:* NO — entirely absent from R-35 § 3

Requirement 15 (DOC-REQ 3.5) *Obligation:* Familiemedlem til EØS-borger må dokumentere overfor Nav-kontoret at vilkårene for fortsatt lovlig opphold er oppfylt. *Source:* Veileder for Nav-kontoret ved vurdering av lovlig opphold for EØS-borgere *Nature:* Explicit *Circular presence:* NO — entirely absent from R-35 § 3

Requirement 16 (DOC-REQ 3.6) *Obligation:* Det må foreligge opplysninger i saken som dokumenterer om søker har et hjelpebehov eller ikke. *Source:* Veileder om økonomisk stønad etter sosialtjenesteloven *Nature:* Explicit *Circular presence:* NO — entirely absent from R-35 § 3

Requirement 17 (DOC-REQ 3.7) *Obligation:* Ved kortvarig behov kan dokumentasjon skje ved egenerklæring fra søkeren, eventuelt muntlig nedtegnet i journalnotat av Nav-kontoret. *Source:* Veileder om økonomisk stønad etter sosialtjenesteloven *Nature:* Explicit (permissive — describes acceptable method) *Circular presence:* NO — entirely absent from R-35 § 3

Requirement 18 (DOC-REQ 3.8) *Obligation:* Det er ikke krav om at samtykke må utformes skriftlig, men et samtykke er kun gyldig dersom det kan dokumenteres. *Source:* Nasjonal veileder for samarbeidet mellom kriminalomsorgen og Nav *Nature:* Explicit *Circular presence:* NO — entirely absent from R-35 § 3

STEP 2 — LEGAL AUTHORITY CHECK

Requirement 1 Direction 1 — Circular authority: YES — section 2.3.2.1 reproduces this obligation directly. Direction 2 — Statutory authority: YES — directly operationalizes § 3(1)'s duty to serve all who "oppholder seg i kommunen," with the reception-regardless-of-domicile rule resolving a practical ambiguity inherent in that clause. Double authority gap: NO. Category error: NO.

Requirement 2 Direction 1 — Circular authority: YES — verbatim in section 2.3.2.1. Direction 2 — Statutory authority: PARTIAL. The statute establishes the general assessment duty but is entirely silent on temporal methodology. The "her og nå" criterion is a circular addition with no explicit statutory anchor. Finding: Process Inflation Findings PROC-REQ 3.2 — "statute leaves the temporal methodology for needs assessment entirely open." Double authority gap: NO (circular authority present). Category error: NO.

Requirement 3 Direction 1 — Circular authority: YES — verbatim in section 2.3.2.2. Direction 2 — Statutory authority: PARTIAL. § 3 establishes an open normative duty to provide services. The three-factor assessment framework (situasjon / hva søkes om / fast eller midlertidig) has no enumerated statutory basis. Finding: PROC-REQ 3.3 — "statute establishes an open normative duty with no assessment criteria, whereas the circular dictates a mandatory multi-factor assessment framework." Double authority gap: NO (circular authority present). Category error: NO.

Requirement 4 Direction 1 — Circular authority: YES — verbatim in section 2.3.2.3. Direction 2 — Statutory authority: PARTIAL. § 3 formulates a reactive outcome responsibility; the circular escalates this to a proactive assessment procedure triggered by unassisted relocation. Finding: PROC-REQ 3.4 — "Section 3 formulates a reactive outcome responsibility, but the circular escalates this into a specific, proactive assessment procedure." Double authority gap: NO (circular authority present). Category error: NO.

Requirement 5 Direction 1 — Circular authority: YES — verbatim in section 2.3.2.3. Direction 2 — Statutory authority: PARTIAL. The specific trigger of monitoring and acting upon a prior municipality's expiring decision has no textual anchor in § 3. Finding: PROC-REQ 3.5 — "The specific trigger of monitoring and acting upon a prior municipality's expiring decision has no textual anchor in Section 3." Double authority gap: NO (circular authority present). Category error: NO.

Requirement 6 Direction 1 — Circular authority: YES — verbatim in section 2.3.2.3. Direction 2 — Statutory authority: PARTIAL. § 3 is a general jurisdictional clause without enumerated service-type assessments. Attributing three specific service categories (temporary housing, housing costs, lease termination) directly to § 3 creates an unsupported authority link. Finding: PROC-REQ 3.6 — "Section 3 is a general jurisdictional clause lacking specific enumerated service types." Double authority gap: NO (circular authority present). Category error: NO.

Requirement 7 Direction 1 — Circular authority: YES — verbatim in section 2.3.2.4. Direction 2 — Statutory authority: YES — circular correctly anchors to and operationalizes §§ 18 and 19. Finding: PROC-REQ 3.7 — "no legal gap; the circular's procedural instruction directly anchors to and properly operationalizes the mandatory duty specified in Section 3, P2." Double authority gap: NO. Category error: NO.

Requirement 8 Direction 1 — Circular authority: YES — permissive (bør) in section 2.3.2.5. Direction 2 — Statutory authority: YES — aligned with mandatory pre-discharge service duties in § 3(2-3). Finding: PROC-REQ 3.8 — "no legal gap; this procedural recommendation aligns with the mandatory pre-discharge service duties strictly formulated in Section 3, P3." Double authority gap: NO. Category error: NO.

Requirement 9 Direction 1 — Circular authority: NO. This requirement operates entirely outside R-35 § 3. It is sourced exclusively to a veileder for one specific institutional context (kriminalomsorgen). A first-order authority gap exists: the obligation has no presence in the primary normative instrument governing NAV caseworkers' jurisdictional work. Direction 2 — Statutory authority: PARTIAL. § 3 outlines jurisdictional responsibility rules but provides no textual basis for a "best interest" standard as a precondition to jurisdictional rejection. Finding: PROC-REQ 3.S1 — "the statute outlines jurisdictional responsibility rules but lacks any text mandating a 'best interest' standard as a precondition to jurisdictional rejection." **Double authority gap: YES** — circular authority ABSENT and statutory authority PARTIAL. Category error: NO.

Requirement 10 Direction 1 — Circular authority: NO. The capacity-dimensioning obligation appears exclusively in Kommunebrev 2025. A first-order authority gap exists: R-35 § 3 contains no text on municipal service capacity management in response to increased demand. Direction 2 — Statutory authority: PARTIAL. General municipal responsibility for service delivery is implied by § 3 read with § 7 and kommuneloven, but the specific trigger-and-dimensioning obligation as an enforceable requirement goes beyond what those provisions expressly state. Finding: PROC-REQ 3.S2 — classified in Process Inflation Findings as "mandatory capacity management obligation" with Kommunebrev as the sole source instrument. **Double authority gap: YES** — circular authority ABSENT and statutory authority PARTIAL. Category error: NO (falls within social services management framework, though kommuneloven is a co-applicable instrument).

Requirement 11 Direction 1 — Circular authority: NO. The obligation to record oral applications derives entirely from the veileder to § 17, not from R-35 § 3. A first-order authority gap exists. Direction 2 — Statutory authority: PARTIAL. § 3 is entirely silent on documentation of applications. The obligation is arguably implied by forvaltningsloven general record-keeping requirements, but those are not § 3 provisions. Finding: DOC-REQ 3.1 — "Section 3 establishes the general jurisdictional responsibility but is entirely silent on how applications are documented; this obligation originates from Section 17 instead." **Double authority gap: YES** — circular authority ABSENT and statutory authority PARTIAL (wrong statutory section). Category error: NO (documentation obligation belongs to social services law, but via § 17 not § 3).

Requirement 12 Direction 1 — Circular authority: NO. Minimum documentation standard for applications is absent from R-35 § 3. Direction 2 — Statutory authority: PARTIAL. § 3 contains no provisions on minimum documentation standards. Finding: DOC-REQ 3.2 — "Section 3 contains absolutely no provisions detailing minimum documentation standards for applications." **Double authority gap: YES** — circular authority ABSENT and statutory authority PARTIAL. Category error: NO.

Requirement 13 Direction 1 — Circular authority: NO. The EØS documentation obligation is entirely absent from R-35 § 3. Direction 2 — Statutory authority: PARTIAL. § 3's "oppholder seg" test is an open normative criterion; the veileder converts it into a mandatory documentation burden targeting a specific nationality category without explicit statutory warrant for that specificity. Finding: DOC-REQ 3.3 — "statute leverages the open normative test 'oppholder seg,' while the circular converts this into a fixed mandatory documentation burden targeting a specific category of individuals." **Double authority gap: YES** — circular authority ABSENT and statutory authority PARTIAL. Category error: NO (residency assessment relates to § 3's jurisdictional framework, but the documentation obligation derives from EØS immigration law applied through a veileder).

Requirement 14 Direction 1 — Circular authority: NO. Independent documentation responsibility for residence status is absent from R-35 § 3. Direction 2 — Statutory authority: PARTIAL. § 3's open factual investigation duty does not establish a named, independent documentation responsibility for residence status. Finding: DOC-REQ 3.4 — "Section 3's open factual-assessment duty is improperly escalated into a mandatory, independently named documentation responsibility for residence status lacking direct textual support." **Double authority gap: YES** — circular authority ABSENT and statutory authority PARTIAL. Category error: NO.

Requirement 15 Direction 1 — Circular authority: NO. Third-party documentation requirements are absent from R-35 § 3. Direction 2 — Statutory authority: PARTIAL. § 3 imposes no formal documentation obligations on third parties such as family members. Finding: DOC-REQ 3.5 — "Section 3 does not impose any formal documentation requirements on third parties, converting an open coverage framework into a rigid documentation mandate." **Double authority gap: YES** — circular authority ABSENT and statutory authority PARTIAL. Category error: NO.

Requirement 16 Direction 1 — Circular authority: NO. Documentary precondition for need assessment is absent from R-35 § 3. Direction 2 — Statutory authority: PARTIAL. § 3 provides no documentation preconditions for needs assessment. Finding: DOC-REQ 3.6 — "Section 3 does not provide documentation preconditions for assessing needs, thus creating a hard procedural and documentary threshold devoid of a statutory anchor in this specific clause." **Double authority gap: YES** — circular authority ABSENT and statutory authority PARTIAL. Category error: NO.

Requirement 17 Direction 1 — Circular authority: NO. Permissible documentation methods for short-term needs are absent from R-35 § 3. Direction 2 — Statutory authority: PARTIAL. No direct textual foundation in § 3 for specifying documentation alternatives. Finding: DOC-REQ 3.7 — "The guidance specifies permissible documentation alternatives for short-term needs, a topic lacking any direct textual foundation in Section 3." **Double authority gap: YES** — circular authority ABSENT and statutory authority PARTIAL. Category error: NO.

Requirement 18 Direction 1 — Circular authority: NO. Consent documentation requirements are entirely absent from R-35 § 3. Direction 2 — Statutory authority: NO. § 3 operates entirely outside the domain of consent, validity conditions, or documentation of consent. The legal domain governing consent for inter-agency information sharing is personvernlovgivning

(GDPR / personopplysningsloven) and forvaltningsloven §§ 13–13e (taushetsplikt and samtykke), not sosialtjenesteloven § 3. Finding: DOC-REQ 3.8 — "Section 3 operates entirely outside the domain of consent, validity conditions, or documentation of consent, providing zero textual basis for this mandate." **Double authority gap: YES** — circular authority ABSENT and statutory authority NO. **Category error: YES** — the consent documentation requirement belongs to the legal domain of privacy law and administrative confidentiality law, not to the jurisdictional framework of § 3. Its presence in a kriminalomsorgen veileder applied to § 3 processing constitutes a domain-level misattribution.

STEP 3 — SCALE AND PROPORTIONALITY CHECK

Cross-referenced against the Volume Driver Findings (Anchor Document).

Requirement 1: NO — no volume driver finding applies. Universal reception duty is a baseline functional obligation unrelated to scale.

Requirement 2: NO — the "here and now" assessment criterion imposes no disproportionate scale burden. Its application is proportional to individual case complexity.

Requirement 3: NO — the three-factor assessment framework is a methodological standard applied within individual cases; no volume or capacity threshold is required to sustain it.

Requirement 4: NO — proactive mapping on unassisted relocation is triggered reactively; no sustained specialist capacity is required.

Requirement 5: PARTIAL — the obligation to monitor expiring decisions from other municipalities creates an administrative tracking demand that presupposes back-office capacity. Anchor Document finding: the [D] Documentation Apparatus mechanism is the dominant empirical driver across the full dataset. The Anchor Document identifies that small offices are routinely sanctioned for failing to maintain administrative tracking pipelines that assume organizational capacity they do not have. Structural connection: the obligation to monitor expiring decisions from another municipality effectively requires a formal calendar-and-tracking function, which is precisely the type of administrative overhead identified as structurally disproportionate in micro-offices throughout the Anchor Document.

Requirement 6: NO — the three-part housing-related assessment applies within individual cases on a reactive basis. No sustained specialist capacity threshold is identified.

Requirement 7: NO — instruction to process applications per §§ 18 and 19 contains no independent scale burden.

Requirement 8: NO — collaboration with institutions is contextually triggered; no scale-dependent capacity is structurally required.

Requirement 9: PARTIAL — the obligation to conduct a "best interest" evaluation before rejecting an application and making a jurisdictional referral adds a procedural step to the

rejection pipeline. This is structurally analogous to the [P] Procedural Continuity findings in the Anchor Document, where requirements for additional procedural steps within low-frequency decision types create compliance pipelines that cannot become habitual in offices processing these cases rarely. The kriminalomsorgen / cross-jurisdictional rejection scenario is precisely such a low-frequency event in most municipalities. Since this requirement has no circular authority (Step 2), any scale-related burden it imposes is entirely unsupported by the circular framework.

Requirement 10: YES — the mandatory capacity dimensioning obligation directly presupposes organizational capacity that average and small municipalities do not structurally possess. Anchor Document finding: explicitly addressed in the volume driver analysis under structural disproportionality. The Anchor Document documents across multiple municipalities (Nav Vefsna, Løten, Hole, Sveio) that small offices cannot respond to increased demand by scaling capacity — the single-specialist model means scaling is structurally unavailable. The Kommunebrev's dimensioning obligation, which carries no circular authority, imposes a structural disproportionality burden without regulatory foundation in R-35 § 3.

Requirement 11: YES — recording oral applications is the specific sub-routine flagged in the Anchor Document as part of the [D] Documentation Apparatus and [P] Procedural Continuity mechanisms. Anchor Document finding: the requirement to maintain "a fixed and correct repeatable practice for oral application registration" (referenced explicitly in the Debt Counseling Compliance Stack) is flagged across municipalities including Midtre Gauldal, Skaun, and Verdal as failing precisely because small offices trigger this procedure too rarely for it to become institutionalized. Since this requirement has no circular authority, the scale burden falls entirely outside any framework the circular provides guidance for.

Requirement 12: PARTIAL — minimum documentation standards are broadly consistent with the [D] mechanism findings. However, the minimum sufficiency formulation ("fremgår av saken, som i et notat") is intended as a low-threshold standard and is unlikely to be independently disproportionate. Anchor Document note: inasmuch as this standard is used to sanction offices that do not maintain formal records, it participates in the Documentation Apparatus dynamic — but as a threshold-setting rather than overhead-generating requirement, it is less structurally acute than Requirement 11.

Requirement 13: YES — the Anchor Document explicitly identifies EØS residence assessment as a latent volume driver of potentially high severity. Anchor Document finding (§18 analysis, Requirement A-2): "volume-sensitive on the ground that navigating EØS immigration directives and shifting residence grounds requires specialist legal knowledge that is impossible to maintain operationally without a steady flow of such cases. The EØS population eligible for §18 is by definition geographically and demographically concentrated, meaning that the vast majority of small municipalities will encounter these cases so rarely that competence cannot be sustained even as a latent capacity — yet the legal obligation is stated in mandatory terms." Since this requirement has no circular authority, any scale burden it imposes is structurally unsupported by the circular framework.

Requirement 14: YES — same EØS latent volume driver finding applies. The independent documentation responsibility compounds the specialization burden: the caseworker must both know the EØS framework and independently document compliance. Anchor Document

note: the [D] + [K] combination in EØS cases is identified as a structurally compounding burden. No circular authority exists for this requirement.

Requirement 15: YES — third-party documentation obligations in EØS family member contexts compound the same latent volume driver. The caseworker must assess whether the family member's documentation satisfies the relevant legal standard — which requires EØS-competence — and then document the assessment. No circular guidance available.

Requirement 16: YES — the documentary precondition for need assessment participates directly in the [D] Documentation Apparatus as the dominant empirical mechanism in the Anchor Document. Requiring specific documentary content in the case file as a precondition to need assessment imposes overhead that scales inversely with the bureaucratic capacity of the office. No circular authority exists.

Requirement 17: PARTIAL — the permissive documentation method (egenerklæring / journalnotat) is clarificatory rather than overhead-generating; it describes an acceptable minimum rather than imposing additional requirements. Its participation in the [D] mechanism is mitigated by its permissive character. However, since it operates without circular authority, even this modest formalization requirement is unsupported by the governing normative instrument.

Requirement 18: YES — consent documentation requirements in the kriminalomsorgen context add to the [D] Documentation Apparatus burden. The Anchor Document's finding that documentation obligations from sub-legal instruments constitute the most pervasive compliance overhead applies directly. The domain-error compounds the scale issue: caseworkers are asked to satisfy a privacy-law documentation standard while working under a jurisdictional framework (§ 3) that provides no guidance whatsoever on consent documentation. No circular authority exists.

STEP 4 — PURPOSE CLASSIFICATION

Requirement 1: [USER NEED] The obligation to receive and assess all inquiries regardless of domicile directly serves the legal security and access rights of the user. The circular's own justification states the reason: "de sosiale tjenestene er samfunnets siste sikkerhetsnett, og at personen som søker hjelp ikke skal bli en kasteball mellom Nav-kontor." The purpose is entirely user-protective and access-ensuring.

Requirement 2: [USER NEED] The "her og nå" criterion protects users from assessments based on historical circumstances that might understate current need. The framing in the source instrument is explicitly about serving the individual's present situation, not about audit or reporting functions.

Requirement 3: [MIXED] Primary: USER NEED — the three-factor framework (situasjon / søknad / fast-eller-midlertidig) ensures comprehensive individual assessment and prevents jurisdictional claims from overriding substantive need. Secondary: INTERNAL CONTROL — imposing a defined analytical structure on the assessment also functions as a methodology

standard enabling supervisory review and audit of how caseworkers apply the assessment. The user-serving function is primary because the three factors are directly necessary for reaching a legally correct jurisdictional and needs determination.

Requirement 4: [USER NEED] The proactive mapping obligation upon unassisted relocation directly protects users from administrative voids arising from their own lack of preparation or knowledge. The language "I tilfeller hvor en person flytter... uten tilrettelegging fra Nav-kontoret, MÅ Nav-kontoret... kartlegge" reflects a user-protective intent: the obligation triggers precisely because the user failed to secure institutional assistance.

Requirement 5: [MIXED] Primary: USER NEED — monitoring expiring decisions ensures service continuity for users transitioning between municipalities. Secondary: INTERNAL CONTROL — requires maintaining an administrative tracking mechanism (monitoring another office's decision calendar) that functions as an inter-office coordination record rather than a direct service act. The tracking obligation is an administrative overhead that serves the user indirectly through continuity, but the tracking mechanism itself is an internal control function.

Requirement 6: [USER NEED] The three service-type assessments (temporary housing, housing costs, lease termination) directly enumerate what specific forms of help the user may need. The source instrument (section 2.3.2.3) frames all three as user-serving assistance measures, not as reporting or audit requirements.

Requirement 7: [USER NEED] Processing applications per §§ 18 and 19 is the standard procedure ensuring users receive legally correct substantive assessment. No internal control or reporting dimension is present.

Requirement 8: [USER NEED] Pre-discharge collaboration with institutions directly serves the user's transition. The circular's language identifies specific user harms to prevent — "svært uheldig om en person som har vært innlagt for rusbehandling, blir henvist til et midlertidig botilbud" — making the purpose explicitly user-protective.

Requirement 9: [MIXED] Primary: USER NEED — conducting a "best interest" evaluation before rejecting an application and making a jurisdictional referral directly protects the user and their family from procedurally correct but contextually harmful rejections. Secondary: INTERNAL CONTROL — the evaluation step also generates a documented procedural record that demonstrates compliance with the standard prior to rejection, serving audit functions in any subsequent appeal or supervision review. The user-protective function is primary; the audit function is a structural consequence of documenting the evaluation.

Requirement 10: [MIXED] Primary: INTERNAL CONTROL — the obligation targets the municipality's organizational capacity management. The Kommunebrev addresses the municipality's administrative dimensioning decisions, not any individual user's case. Secondary: USER NEED — adequate dimensioning ultimately enables service access for users experiencing increased demand. However, the source instrument (Kommunebrev 2025) is framed as a management and organizational obligation directed at the municipality as an institution, not as a user-protective norm. The primary purpose is organizational and internal, making INTERNAL CONTROL the primary classification.

Requirement 11: [INTERNAL CONTROL] The obligation to record oral applications in writing serves the administrative record and audit trail. The user's application has already been received and will be assessed regardless of whether it is written down. The documentation function exists to ensure the case record reflects the procedural history — a supervisory and control function, not a function that directly affects the quality or outcome of the user's assessment. Source: Veileder til § 17, which addresses documentation of administrative procedure.

Requirement 12: [INTERNAL CONTROL] The minimum documentation standard ("fremgår av saken, som i et notat") defines the formal content of the administrative record. This serves audit and quality-assurance functions: it ensures the application's existence is traceable. It does not affect the user's substantive assessment.

Requirement 13: [MIXED] Primary: USER NEED — documenting EØS residence status establishes the user's eligibility threshold and is a necessary input to the jurisdictional assessment. The documentation directly determines whether the user can receive services. Secondary: INTERNAL CONTROL — the documentation also creates an audit-traceable compliance record for the caseworker's eligibility determination, enabling supervisory review of whether the EØS assessment was correctly conducted. The eligibility-determining function is primary.

Requirement 14: [INTERNAL CONTROL] The independent documentation responsibility imposed on the NAV office primarily serves the audit and control layer. The source instrument frames this as a named organizational responsibility — Nav-kontoret "tar et selvstendig ansvar" for documentation — which is directed at the office's compliance record rather than at the quality of the user's assessment itself. Adequate factual investigation (which serves the user) is already required by the general utredningsplikten; this requirement adds a specifically named documentation responsibility on top of that duty, serving supervisory review rather than the user's case outcome.

Requirement 15: [MIXED] Primary: USER NEED — requiring EØS family members to document their continued residence eligibility establishes the factual basis for an eligibility determination that directly affects the user's access to services. Secondary: INTERNAL CONTROL — creating a formal documentation record from third parties serves the audit trail for any future review of the eligibility determination. The eligibility-establishing function is primary, but the formalized documentation demand on third parties adds an administrative layer beyond what the substantive assessment strictly requires.

Requirement 16: [INTERNAL CONTROL] The requirement that the case file must physically contain documented evidence of need assessment is a precondition imposed on the administrative record, not on the assessment itself. The user's need can be correctly assessed and appropriate help provided regardless of whether a specific piece of documentation exists in the file. The requirement serves the audit function: it ensures supervisors can verify that a need assessment occurred. Source language ("det må foreligge opplysninger i saken som dokumenterer") is explicitly record-oriented.

Requirement 17: [INTERNAL CONTROL] The requirement specifies permissible documentation methods (egenerklæring / journalnotat) for short-term needs. This governs how the administrative record is constructed, not how the assessment is conducted. The

permissive character of the requirement ("kan dokumenteres på følgende måte") confirms its purpose is administrative-record clarification.

Requirement 18: [INTERNAL CONTROL] Consent documentation requirements serve administrative validity and data governance functions in the context of inter-agency information sharing (kriminalomsorgen / NAV). The requirement does not affect the substantive quality of the user's case assessment; it governs the legal standing of information exchange between institutions. As noted in Step 2, this belongs to the legal domain of privacy law and administrative confidentiality law. In relation to social services users, the purpose is to ensure that agencies have formal authority to exchange information — an internal control and legal compliance function, not a direct service-quality measure.

STEP 5 — TRANSACTION COST CHARACTERIZATION

Requirements classified as [USER NEED] with no transaction cost burden identified: Requirements 1, 2, 4, 6, 7, 8.

For each: the obligation directly governs the quality, access, or legal security of the user's case assessment. No administrative overhead is generated beyond the substantive professional work required to serve the user.

Requirement 3 [MIXED]: Caseworkers must apply three analytically distinct factors in every case where jurisdictional status is unclear (situasjon / søknadsgjenstand / fast-eller-midlertidig opphold). In practice this means structuring case notes and decision rationales around three named criteria, which creates mild documentation overhead in individual cases. The burden is proportional and supported by circular authority. The transaction cost is modest and properly founded.

Requirement 5 [MIXED]: Caseworkers or Nav leaders must maintain an administrative tracking mechanism for cases where a prior municipality's decision is set to expire. This requires either a calendar system, a workflow reminder, or a case-flag that triggers reassessment at the decision expiry date of an external office. In small offices without dedicated administrative back-office support, this tracking obligation must be carried by frontline staff alongside their caseload. While the burden per case is limited, it requires a proactive monitoring posture for an event occurring in another municipality's system — a cross-boundary administrative coordination task that falls outside normal reactive processing. The circular provides the authority for this requirement but no guidance on how the tracking function is to be organized. Caseworkers must comply with an obligation the circular authorizes but does not describe operationally.

Requirement 9 [MIXED]: Before issuing a jurisdictional rejection and referral to another municipality's Nav office, caseworkers must conduct and document a "best interest" assessment covering the applicant and their family. Concretely: the caseworker must record what family circumstances were considered, why the referral outcome is assessed as

compatible with the family's best interest, and what alternatives were considered. This step must be completed prior to issuing the rejection decision — it is a procedural precondition, not a post-hoc record. Since this requirement has **no circular authority**, caseworkers must perform and document a substantive legal assessment for which the primary normative instrument governing their jurisdictional work provides no framework, no criteria, and no guidance on format or depth. The transaction cost falls entirely outside any framework the circular provides guidance for.

Requirement 10 [MIXED]: Nav leaders and municipal administrators must document that service capacity is adequate to meet increased demand. Concretely this requires: (i) monitoring incoming case volumes against current staffing, (ii) assessing whether current capacity is sufficient, and (iii) producing or maintaining documentation demonstrating that capacity management is occurring. In offices with a single social services caseworker — the documented norm in municipalities under approximately 5,000 inhabitants — the Nav leader must both perform and document this capacity assessment while simultaneously carrying frontline casework. The Anchor Document confirms that this structural impossibility is pervasive across the dataset (Løten, Hole, Sveio, Nav Vefsna). Since this requirement has **no circular authority**, the administrative documentation and organizational assessment burden it imposes falls entirely outside any framework the circular provides for how § 3 is to be operationalized. The Kommunebrev generates this obligation unilaterally.

Requirement 11 [INTERNAL CONTROL]: Upon receiving any oral application, the caseworker must take a dedicated step to convert the oral communication into a written record — a journal note documenting that the application was received, its essential content, and the date. This must occur in addition to the substantive assessment work. In offices with high contact volumes but low formal caseloads (the documented pattern in small offices), oral inquiries are frequent but formal applications are rare; maintaining a consistent oral-application recording practice for a low-frequency formal trigger is precisely the operational challenge the Anchor Document identifies as structurally problematic ([P] Procedural Continuity and [D] Documentation Apparatus mechanisms). Since this requirement has **no circular authority** for § 3 processing specifically, the caseworker must comply with a documentation obligation derived from a veileder to a different statutory provision (§ 17), applied to a jurisdictional provision (§ 3) that addresses none of this.

Requirement 12 [INTERNAL CONTROL]: The caseworker must ensure that each case file contains at least one document establishing that an application was received — minimally a note ("notat"). While the minimum standard is low, the requirement imposes a systematic administrative consistency obligation: no application can proceed through assessment without leaving a documentary trace. For offices operating informally (the documented small-office norm), maintaining this documentary baseline for every interaction requires a discipline of record-creation that competes with direct service delivery time. Since this requirement has **no circular authority** for § 3 contexts, caseworkers must comply with a documentation standard for which R-35 § 3 provides no guidance.

Requirement 13 [MIXED]: When processing applications from EØS citizens, caseworkers must (i) request formal documentation of legal or permanent residence status, (ii) assess whether the documentation provided satisfies the relevant EØS legal standard, and (iii) record their assessment in the case file. This requires both specialist legal competence

(familiarity with EØS immigration directives and the shifting grounds of lawful residence) and a specific documentation protocol. The Anchor Document identifies this as a latent volume driver of potentially high severity: the competence required to correctly assess EØS documentation cannot be maintained in offices that encounter these cases rarely. In municipalities below approximately 10,000 inhabitants with no immigration background concentration, EØS-eligibility assessments may arise fewer than five times per year — far below the threshold for sustained competence identified in the Anchor Document. Since this requirement has **no circular authority**, caseworkers must satisfy a specialist documentation obligation that the circular governing their jurisdictional work does not acknowledge, let alone provide guidance for.

Requirement 14 [INTERNAL CONTROL]: The caseworker must take an independently documented step to verify and record that the case is "tilstrekkelig opplyst" with respect to residence status. This is a named organizational responsibility — not merely an incidental part of the assessment — and therefore requires a distinct procedural act: reviewing what documentation exists, assessing its sufficiency, and creating a record of that sufficiency assessment. Concretely: the caseworker must write a case note or document attesting that oppholdsstatus is documented and the case is adequately investigated for this criterion specifically. This is a meta-documentation requirement: it documents that documentation was assessed. Since this requirement has **no circular authority**, the caseworker is required to execute a named administrative responsibility for which the primary normative instrument provides no guidance on format, trigger, or sufficiency standard.

Requirement 15 [MIXED]: Caseworkers must request, receive, assess, and record documentation from family members of EØS citizens establishing that the conditions for continued lawful residence are met. This involves: (i) identifying which family members are subject to this requirement, (ii) communicating the documentation requirement to a third party (who may not understand the legal framework), (iii) waiting for the third party to produce documentation, and (iv) assessing the documentation's legal sufficiency. Each step introduces administrative delay and caseworker overhead. The third-party nature of the documentation creates a particular challenge: the caseworker's ability to complete the administrative process is dependent on an external actor's compliance with a legal standard the caseworker must communicate and then evaluate. Since this requirement has **no circular authority**, the entire procedural sequence falls outside any framework R-35 § 3 provides.

Requirement 16 [INTERNAL CONTROL]: Caseworkers must ensure that each case file contains a distinct document or note recording that need assessment occurred and what the outcome was. This imposes a systematic documentation habit: the need assessment cannot simply inform the decision — it must be separately and explicitly recorded as an identified pre-condition to processing. For offices where decisions are made rapidly through personal knowledge of the user (the documented small-office pattern), this requirement creates a systematic discipline of translating implicit assessment knowledge into explicit written records. The Anchor Document describes this exact dynamic — "caseworkers knew more about the users' situations than the journals reflected" — across more than a dozen offices. Since this requirement has **no circular authority**, caseworkers must satisfy a documentary precondition that R-35 § 3 does not address.

Requirement 17 [INTERNAL CONTROL]: Caseworkers must, when accepting a self-declaration for short-term needs, either obtain it in written form or record an oral self-declaration in a journal note. The administrative demand is modest — writing a note — but the requirement imposes a specific documentation protocol for a low-threshold documentation form. The permissive character of this requirement (it describes an acceptable method rather than imposing a heavy obligation) limits the transaction cost. Nevertheless, since this requirement has **no circular authority**, even the modest step of noting a self-declaration is an obligation for which R-35 § 3 offers no framework.

Requirement 18 [INTERNAL CONTROL]: Caseworkers must, when obtaining consent for inter-agency information sharing (particularly with kriminalomsorgen), maintain a record demonstrating that valid consent was obtained and documenting what it covered. Concretely: regardless of whether consent was given orally or in writing, the caseworker must create a documentary record of the consent event — including what was consented to, by whom, and when. This is not a simple administrative step: it requires caseworkers to understand the legal validity conditions for consent in the context of inter-agency information sharing (a domain governed by personvernlovgivning, not by sosialtjenesteloven § 3), apply those conditions to an oral exchange, and produce a compliance record. Since this requirement has **no circular authority and no statutory authority** under § 3, and since it belongs to a different legal domain entirely, caseworkers must comply with a privacy-law documentation obligation that the jurisdictional provision governing their work does not address, authorize, or provide criteria for. The transaction cost falls entirely outside any conceivable framework § 3 provides.

STEP 6 — CATALOG ENTRIES

REQUIREMENT ID: § 3 / REQ-01 (PROC-REQ 3.1) **PROVISION TEXT:** Nav-kontoret har plikt til å ta imot og vurdere alle skriftlige og muntlige henvendelser om sosiale tjenester, uavhengig av bosted. **SOURCE INSTRUMENT:** Circular — R-35, § 3 / 2.3.2.1 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — directly operationalizes § 3(1)'s duty to serve all who oppholder seg i kommunen. No finding of legal gap in Reference Document. **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. This requirement governs the NAV office's basic access obligation and directly serves users' right not to be turned away without assessment. **KILL LIST CLASSIFICATION:** No Kill List Action — sufficient authority and proportionate burden. **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 3 / REQ-02 (PROC-REQ 3.2) **PROVISION TEXT:** Behovet for tjenester skal vurderes ut fra personens situasjon her og nå. **SOURCE INSTRUMENT:** Circular — R-35, § 3 / 2.3.2.1 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — statute establishes assessment duty but is silent on temporal methodology; "her

og nå" criterion added by circular without explicit statutory anchor (PROC-REQ 3.2: "statute leaves the temporal methodology for needs assessment entirely open"). **DOUBLE AUTHORITY GAP:** NO (circular authority present) **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. The "here and now" criterion guides assessment methodology and directly protects users from disadvantageous historical-situation evaluations. While the statutory authority is partial, the user-serving purpose is clear and the circular provides full operational guidance. **KILL LIST CLASSIFICATION:** Category C — Clarification. The circular frames this as a methodological mandate ("skal vurderes ut fra"), but the statutory silence on temporal methodology means the "here and now" criterion operates as a circular specification without express legislative backing. The room for maneuver — specifically whether caseworkers may supplement present-situation assessment with longitudinal information — needs to be made explicit to prevent shadow binding. **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 3 / REQ-03 (PROC-REQ 3.3) **PROVISION TEXT:** Hjelp og omfang vurderes ut fra den enkeltes situasjon, hva det søkes om, og om oppholdet er fast eller midlertidig (tre-faktor ramme). **SOURCE INSTRUMENT:** Circular — R-35, § 3 / 2.3.2.2 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — § 3 establishes an open normative duty; the three-factor framework has no enumerated statutory basis (PROC-REQ 3.3: "statute establishes an open normative duty with no assessment criteria, whereas the circular dictates a mandatory multi-factor assessment framework"). **DOUBLE AUTHORITY GAP:** NO (circular authority present) **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** MIXED — Primary: USER NEED (three-factor framework ensures comprehensive individual assessment). Secondary: INTERNAL CONTROL (defined analytical structure enables supervisory audit of assessment methodology). **BURDEN DESCRIPTION:** Caseworkers must consciously structure assessments around three named analytical criteria and reflect this structure in case documentation. Administrative overhead is modest and supported by the circular. However, the imperative framing ("MÅ vurderes ut fra") may be creating a shadow binding that caseworkers interpret as requiring structured documentation of all three factors in every case — even where only one or two are practically in question. This is the transaction cost dimension: reflexive three-factor documentation in cases where the assessment is straightforward. **KILL LIST CLASSIFICATION:** Category C — Clarification. The circular's imperative framing of what is substantively a methodological guidance framework should be clarified to confirm that caseworkers apply the three factors as analytical lenses, not as mandatory checklist items requiring separate written documentation in every case. **TRANSACTION COST CATEGORY:** Documentation Inflation (mild — reflexive checklist compliance risk)

REQUIREMENT ID: § 3 / REQ-04 (PROC-REQ 3.4) **PROVISION TEXT:** Ved uassistert flytting mellom kommuner må Nav-kontoret i den nye kommunen kartlegge og vurdere hjelpebehovet proaktivt. **SOURCE INSTRUMENT:** Circular — R-35, § 3 / 2.3.2.3 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — § 3 formulates a reactive outcome responsibility; circular escalates this to a proactive assessment obligation triggered

by unassisted relocation (PROC-REQ 3.4: "the circular escalates this into a specific, proactive assessment procedure triggered by unassisted relocation"). **DOUBLE AUTHORITY GAP:** NO (circular authority present) **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED — proactive mapping protects users who relocate without institutional assistance from falling into service voids. **BURDEN DESCRIPTION:** No transaction cost burden identified. The proactive trigger is contextually activated (unassisted relocation) rather than continuously operative; it does not create systematic administrative overhead. The partial statutory authority does not generate a burdensome compliance obligation given the circular's clear framework. **KILL LIST CLASSIFICATION:** Category C — Clarification. The circular escalates a reactive statutory responsibility into a proactive procedural obligation without express statutory grounding for the proactive element. The room for maneuver — specifically what "kartlegge og vurdere" requires in cases where the applicant does not present at the office — should be clarified to prevent gold-plating of the proactive obligation. **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 3 / REQ-05 (PROC-REQ 3.5) **PROVISION TEXT:** Dersom personen har vedtak om livsopphold fra annen kommune, skal det vurderes om det foreligger behov for livsopphold når vedtaket utløper. **SOURCE INSTRUMENT:** Circular — R-35, § 3 / 2.3.2.3 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — no textual anchor in § 3 for the obligation to monitor expiring decisions from other municipalities (PROC-REQ 3.5: "The specific trigger of monitoring and acting upon a prior municipality's expiring decision has no textual anchor in Section 3"). **DOUBLE AUTHORITY GAP:** NO (circular authority present) **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — the obligation requires an administrative tracking function for a cross-boundary calendar event. Anchor Document: [D] Documentation Apparatus findings document that small offices are consistently sanctioned for failing to maintain administrative tracking pipelines that presuppose back-office capacity. The obligation to monitor another municipality's expiring decision is structurally analogous to these findings. **PURPOSE:** MIXED — Primary: USER NEED (monitoring expiry protects service continuity for the user). Secondary: INTERNAL CONTROL (requires maintaining an administrative tracking mechanism for another office's decision timeline). **BURDEN DESCRIPTION:** Caseworkers or Nav leaders must maintain a tracking mechanism for cases involving prior decisions from another municipality — effectively a cross-boundary administrative calendar function. The circular provides the authority for this requirement but no operational guidance on how the tracking is to be organized. In small offices without dedicated administrative support, this tracking burden falls on frontline staff. The circular authority mitigates but does not eliminate the scale concern. **KILL LIST CLASSIFICATION:** Category C — Clarification. The circular should specify what "vurderes... når vedtaket utløper" requires operationally: whether the office must proactively track all known cases or only respond when the user presents. Absent clarification, caseworkers may apply a more resource-intensive monitoring interpretation than necessary. **TRANSACTION COST CATEGORY:** Documentation Inflation (tracking obligation)

REQUIREMENT ID: § 3 / REQ-06 (PROC-REQ 3.6) **PROVISION TEXT:** Tre-delt vurdering ved bolig i annen kommune: (i) midlertidig botilbud, (ii) dekning av boutgifter, (iii) bistand til å

avvikle boforholdet. **SOURCE INSTRUMENT:** Circular — R-35, § 3 / 2.3.2.3 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — § 3 is a general jurisdictional clause without enumerated service categories; the three specific assessment types are circular additions without direct statutory enumeration (PROC-REQ 3.6: "Section 3 is a general jurisdictional clause lacking specific enumerated service types"). **DOUBLE AUTHORITY GAP:** NO (circular authority present) **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED — the three service-type assessments directly enumerate potential forms of help for users with housing in another municipality; all three serve the user's housing and financial security. **BURDEN DESCRIPTION:** No transaction cost burden identified. The three-part assessment is contextually triggered (cases involving housing in another municipality) and each element is a direct user-serving assessment act. The partial statutory authority does not generate disproportionate overhead given the clear circular framework. **KILL LIST CLASSIFICATION:** Category C — Clarification. The circular's enumeration of three specific service categories as mandatory assessment items ("MÅ vurderes") may be interpreted as an exhaustive checklist rather than an indicative framework, potentially creating documentation obligations even when one or two of the three categories are plainly irrelevant. Clarification that these are indicative rather than mandatory enumerated checks would restore proportionate caseworker discretion. **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 3 / REQ-07 (PROC-REQ 3.7) **PROVISION TEXT:** Nav-kontoret må vurdere søknadene på vanlig måte etter §§ 18 og 19. **SOURCE INSTRUMENT:** Circular — R-35, § 3 / 2.3.2.4 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — directly anchors to §§ 18 and 19; no legal gap identified (PROC-REQ 3.7: "the circular's procedural instruction directly anchors to and properly operationalizes the mandatory duty specified in Section 3, P2"). **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. This requirement directs caseworkers to apply the standard statutory procedure; it generates no overhead beyond the substantive assessment work required by law. **KILL LIST CLASSIFICATION:** No Kill List Action — sufficient authority and proportionate burden. **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 3 / REQ-08 (PROC-REQ 3.8) **PROVISION TEXT:** Nav-kontoret bør kontakte og samarbeide med institusjonen eller boligen for forberedelser og tilrettelegging av tjenester ved utskriving. **SOURCE INSTRUMENT:** Circular — R-35, § 3 / 2.3.2.5 **CIRCULAR AUTHORITY:** PRESENT (permissive — bør) **LEGAL AUTHORITY:** YES — aligned with mandatory pre-discharge service duties in § 3(2-3); (PROC-REQ 3.8: "no legal gap; this procedural recommendation aligns with the mandatory pre-discharge service duties strictly formulated in Section 3, P3"). **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED — pre-discharge collaboration directly serves the user's transition needs. **BURDEN DESCRIPTION:** No transaction cost burden identified. The permissive formulation (bør) correctly preserves local discretion while providing operational guidance. The circular has already made the appropriate methodological choice here. **KILL LIST CLASSIFICATION:** No Kill List Action — the bør formulation is appropriate;

no reformulation required. **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 3 / REQ-09 (PROC-REQ 3.S1) **PROVISION TEXT:** Før avvisning og jurisdiksjonell henvisning bør Nav-kontoret gjøre en vurdering av hva som er til beste for søkeren og eventuell familie. **SOURCE INSTRUMENT:** Veileder for samarbeid mellom kriminalomsorgen og Nav **CIRCULAR AUTHORITY:** ABSENT — consequence: this obligation operates entirely outside the R-35 § 3 framework. Caseworkers performing this step have no guidance from the primary normative instrument governing their jurisdictional work on how the "best interest" assessment is to be conducted, what criteria apply, or what documentation is required. **LEGAL AUTHORITY:** PARTIAL — § 3 outlines jurisdictional responsibility rules but provides no textual basis for a "best interest" standard as a precondition to rejection (PROC-REQ 3.S1: "the statute outlines jurisdictional responsibility rules but lacks any text mandating a 'best interest' standard as a precondition to jurisdictional rejection"). **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT and statutory authority PARTIAL. **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — the "best interest" assessment prior to rejection is a procedural step of low frequency (applied primarily in kriminalomsorgen and cross-jurisdictional cases) that cannot become routinized in offices encountering these scenarios rarely. Anchor Document: [P] Procedural Continuity findings confirm that low-frequency procedural steps consistently fail to become institutionalized. Since this requirement has no circular authority, any scale-related burden falls outside any regulatory framework. **PURPOSE:** MIXED — Primary: USER NEED (protects applicants and families from contextually harmful jurisdictional rejections). Secondary: INTERNAL CONTROL (creates a documented procedural record prior to rejection, enabling audit review of the rejection decision). **BURDEN DESCRIPTION:** Caseworkers must conduct and document a pre-rejection "best interest" evaluation covering the applicant and their family before issuing a jurisdictional rejection. This adds a substantive legal assessment step — with documentation — to the rejection procedure. Since this requirement has no circular authority, caseworkers must perform and document a legal analysis for which R-35 § 3 provides no framework, no criteria, and no guidance on format or sufficient depth. The transaction cost falls entirely outside any framework the circular provides. **KILL LIST CLASSIFICATION:** Category B — Status Change. The veileder uses bør-language, which correctly preserves local discretion. However, in practice this operates as a shadow-binding standard in supervision contexts, particularly given its context-specific origin in the kriminalomsorgen veileder. The appropriate response is to formally confirm the permissive character and restore explicit local discretion, rather than allowing the standard to function as an implicit obligation across all cross-jurisdictional rejection scenarios. **TRANSACTION COST CATEGORY:** Procedural Duplication (additional procedural step in rejection pipeline without circular foundation)

REQUIREMENT ID: § 3 / REQ-10 (PROC-REQ 3.S2) **PROVISION TEXT:** Dersom kommunen opplever økt pågang på de sosiale tjenestene, ligger det i kommunens ansvar å sørge for at tjenesten er dimensjonert for å ivareta dette. **SOURCE INSTRUMENT:** Kommunebrev 2025 **CIRCULAR AUTHORITY:** ABSENT — consequence: this

capacity-dimensioning obligation is imposed by a Kommunebrev with no presence in R-35 § 3. Caseworkers and Nav leaders must respond to a management obligation for which the primary normative instrument governing § 3 implementation provides no framework. **LEGAL AUTHORITY:** PARTIAL — general municipal responsibility for service delivery is implied by § 3 and § 7, but the specific triggered-capacity-management obligation exceeds what those provisions expressly mandate. No direct statutory text establishes a "dimensioning" obligation responsive to demand increases (PROC-REQ 3.S2: classified as "mandatory capacity management obligation" with Kommunebrev as sole source). **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT and statutory authority PARTIAL. **CATEGORY ERROR:** NO (within social services / kommuneloven management framework) **SCALE FLAG:** YES — the capacity dimensioning obligation directly presupposes organizational capacity that small municipalities structurally cannot provide. Anchor Document: the entire set of [S] Specialization and [C] Coordination Infrastructure findings documents that small-office configurations cannot respond to demand increases by scaling capacity. The Kommunebrev's dimensioning obligation, imposed without circular authority, constitutes disproportionate burden without regulatory foundation in R-35 § 3. **PURPOSE:** MIXED — Primary: INTERNAL CONTROL (organizational capacity management, addressed to the municipality as institution). Secondary: USER NEED (adequate dimensioning enables user access). **BURDEN DESCRIPTION:** Nav leaders and municipal administrators must document and demonstrate that service capacity is adequate to meet increased demand. This requires monitoring case volumes, assessing staffing against caseload, and producing capacity management documentation. In micro-offices where the Nav leader simultaneously performs frontline casework, quality assurance, and management functions, this documentation requirement is structurally impossible to satisfy without displacing substantive service work. The Anchor Document confirms this pattern across the entire dataset. Since this requirement has no circular authority, the capacity management and documentation burden falls entirely outside any framework R-35 § 3 provides. **KILL LIST CLASSIFICATION:** Category B — Status Change. The Kommunebrev uses mandatory framing ("ligger det i kommunens ansvar") without statutory grounding for the specific dimensioning obligation as expressed. Given the Kommunebrev's sub-legal status and the structural disproportionality findings from the Anchor Document, this requirement should be reformulated in permissive language or, if the capacity management obligation is considered substantively necessary, anchored in the circular rather than left to operate exclusively through a Kommunebrev. **TRANSACTION COST CATEGORY:** Structural Disproportionality + Reporting Overhead

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REQUIREMENT ID: § 3 / REQ-11 (DOC-REQ 3.1) **PROVISION TEXT:** Nav-kontoret har plikt til å nedtegne muntlige søknader. **SOURCE INSTRUMENT:** Veileder til sosialtjenesteloven § 17 **CIRCULAR AUTHORITY:** ABSENT — consequence: the obligation to record oral applications has no presence in R-35 § 3. A veileder to § 17 is operating as a binding documentation standard for § 3 processing contexts. **LEGAL AUTHORITY:** PARTIAL — § 3 is entirely silent on documentation; the obligation derives from § 17's veileder, not from any provision with authority over § 3 contexts (DOC-REQ 3.1: "Section 3 establishes the general jurisdictional responsibility but is entirely silent on how applications are documented; this obligation originates from Section 17 instead"). **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT and statutory authority PARTIAL (incorrect section). **CATEGORY**

ERROR: NO **SCALE FLAG:** YES — recording oral applications is part of the [D] and [P] mechanisms explicitly identified in the Anchor Document. Anchor Document finding: maintaining "a fixed and correct repeatable practice for oral application registration" is flagged across Midtre Gauldal, Skaun, Verdal, and others as failing precisely because small offices trigger this procedure too rarely for it to become institutionalized. Since this requirement has no circular authority, the scale burden falls entirely outside any framework R-35 § 3 provides. **PURPOSE:** INTERNAL CONTROL — the recording obligation serves the administrative record and audit trail. The user's application is received regardless of whether it is written down; the documentation serves supervisory review, not case quality. **BURDEN DESCRIPTION:** Caseworkers must, upon receiving any oral application, take a dedicated step to convert the communication into a written journal record. This must occur in addition to the substantive assessment work. The Anchor Document documents this specific obligation as a systematic compliance failure across small offices where oral applications are frequent but formal triggering is rare. Since this requirement has no circular authority for § 3 contexts, caseworkers must comply with a documentation standard derived from a veileder to a different statutory section, applied to a jurisdictional provision that does not address documentation at all. **KILL LIST CLASSIFICATION:** Category B — Status Change. The veileder uses plikt-language ("har plikt til å nedtegne") — mandatory framing — without statutory authority anchored in § 3. This obligation should either be (a) incorporated into R-35 § 3 with appropriate authority if the drafters consider it binding, or (b) reformulated as advisory guidance acknowledging that the recording obligation derives from § 17 contexts and does not carry independent binding authority in § 3 processing. **TRANSACTION COST CATEGORY:** Documentation Inflation

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REQUIREMENT ID: § 3 / REQ-12 (DOC-REQ 3.2) **PROVISION TEXT:** Det holder at søknaden fremgår av saken, som i et notat (minimumsstandard). **SOURCE INSTRUMENT:** Veileder til sosialtjenesteloven § 17 **CIRCULAR AUTHORITY:** ABSENT — consequence: the minimum documentation standard for applications has no presence in R-35 § 3. **LEGAL AUTHORITY:** PARTIAL — § 3 contains no provisions on minimum documentation standards for applications (DOC-REQ 3.2: "Section 3 contains absolutely no provisions detailing minimum documentation standards for applications"). **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT and statutory authority PARTIAL. **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — the minimum standard participates in the [D] mechanism inasmuch as it establishes a documentary precondition for processing. However, its permissive and low-threshold character limits the structural disproportionality concern. Anchor Document note: this type of minimum standard contributes to the Documentation Apparatus without being independently disproportionate. **PURPOSE:** INTERNAL CONTROL — the minimum sufficiency standard governs the formal content of the administrative record, serving audit and traceability functions. **BURDEN DESCRIPTION:** Caseworkers must ensure each case file contains at least one document establishing that an application was received. The administrative demand is low (a note suffices), but the requirement imposes systematic consistency across all cases. Since this requirement has no circular authority, caseworkers must maintain a documentary baseline for which R-35 § 3 provides no guidance or framework. **KILL LIST CLASSIFICATION:** Category C — Clarification. The minimum standard is substantively helpful and its purpose is to limit rather than inflate documentation burden. However, operating without circular authority creates uncertainty

about whether this standard constitutes a legally binding minimum or advisory guidance. Clarifying its status — ideally by incorporating it into the circular with an explicit statement that the minimum standard is not a formal precondition to assessment — would reduce shadow binding without eliminating its practical utility. **TRANSACTION COST CATEGORY:** Documentation Inflation (minor)

REQUIREMENT ID: § 3 / REQ-13 (DOC-REQ 3.3) **PROVISION TEXT:** EØS-borgeren må dokumentere lovlig opphold, eventuelt varig oppholdsrett, på søknadstidspunktet. **SOURCE INSTRUMENT:** Veileder for Nav-kontoret ved vurdering av lovlig opphold for EØS-borgere **CIRCULAR AUTHORITY:** ABSENT — consequence: this documentation obligation targets a specific applicant category with no presence in R-35 § 3. Caseworkers must apply an EØS-specific documentation standard for which the circular provides no framework. **LEGAL AUTHORITY:** PARTIAL — § 3's "oppholder seg" criterion is an open normative test; the veileder converts this into a mandatory documentation burden on a specific applicant category without express statutory warrant for the documentation specificity (DOC-REQ 3.3: "statute leverages the open normative test 'oppholder seg,' while the circular converts this into a fixed mandatory documentation burden targeting a specific category of individuals"). **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT and statutory authority PARTIAL. **CATEGORY ERROR:** NO (residency falls within § 3's jurisdictional framework, but the documentation specificity derives from EØS immigration law applied through a veileder). **SCALE FLAG:** YES — the Anchor Document explicitly identifies EØS residence assessment as a latent volume driver of potentially high severity. Finding: "volume-sensitive on the ground that navigating EØS immigration directives and shifting residence grounds requires specialist legal knowledge that is impossible to maintain operationally without a steady flow of such cases... the vast majority of small municipalities will encounter these cases so rarely that competence cannot be sustained even as a latent capacity." Since this requirement has no circular authority, any scale burden is unsupported by the circular framework. **PURPOSE:** MIXED — Primary: USER NEED (documenting EØS status establishes eligibility and is necessary for the jurisdictional assessment). Secondary: INTERNAL CONTROL (creates an audit-traceable compliance record for the eligibility determination). **BURDEN DESCRIPTION:** Caseworkers must request formal EØS residence documentation, assess whether the documentation provided satisfies the applicable legal standard (requiring EØS-directive knowledge), and record their assessment. This requires specialist legal competence that small offices cannot maintain without a steady flow of EØS cases — typically unavailable in municipalities outside immigration-concentration areas. Since this requirement has no circular authority, the caseworker must satisfy a specialist documentation obligation for which R-35 § 3 provides no framework, criteria, or guidance. **KILL LIST CLASSIFICATION:** Category B — Status Change. The veileder uses mandatory framing for a documentation obligation that (a) lacks circular authority, (b) has only partial statutory grounding for its specificity, and (c) is identified as a structurally disproportionate latent volume driver. The obligation should either be anchored in the circular with proportionate guidance or reformulated as advisory guidance explicitly acknowledging that the documentation standard derives from EØS immigration law applied through a veileder, with practical guidance on when the standard can be satisfied through simpler means in low-volume offices. **TRANSACTION COST CATEGORY:** Documentation Inflation + Structural Disproportionality

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REQUIREMENT ID: § 3 / REQ-14 (DOC-REQ 3.4) **PROVISION TEXT:** Nav-kontoret har et selvstendig ansvar for at saken er tilstrekkelig opplyst og at oppholdsstatus er dokumentert i saker der lovlig opphold er et inngangskriterium. **SOURCE INSTRUMENT:** Veileder for Nav-kontoret ved vurdering av lovlig opphold for EØS-borgere **CIRCULAR AUTHORITY:** ABSENT — consequence: the independently named documentation responsibility has no presence in R-35 § 3. Caseworkers are assigned a named organizational compliance role for which the primary circular provides no foundation. **LEGAL AUTHORITY:** PARTIAL — § 3's open factual investigation duty does not establish this specific, independently named documentation responsibility (DOC-REQ 3.4: "Section 3's open factual-assessment duty is improperly escalated into a mandatory, independently named documentation responsibility for residence status lacking direct textual support"). **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT and statutory authority PARTIAL. **CATEGORY ERROR:** NO **SCALE FLAG:** YES — the independent documentation responsibility for EØS status compounds the specialization burden identified in the Anchor Document under the EØS latent volume driver finding. Requiring not only that EØS status be assessed but that the caseworker document having independently taken responsibility for the assessment's sufficiency adds a meta-documentation layer to an already volume-sensitive specialization obligation. Since this requirement has no circular authority, the compounded burden falls entirely outside any framework R-35 § 3 provides. **PURPOSE:** INTERNAL CONTROL — the requirement is directed at the office's compliance posture ("selvstendig ansvar") rather than at the quality of the user's assessment. The obligation documents that documentation was assessed — it is meta-documentation serving audit functions. **BURDEN DESCRIPTION:** Caseworkers must take and document a distinct step demonstrating independent responsibility for the adequacy of EØS documentation. This requires writing a case note or record attesting that oppholdsstatus is sufficiently documented — a compliance attestation separate from the substantive assessment. Since this requirement has no circular authority, the caseworker is required to execute a named compliance obligation for which R-35 § 3 provides no guidance on format, trigger, or what "tilstrekkelig opplyst" requires for this specific criterion. **KILL LIST CLASSIFICATION:** Category B — Status Change. The "selvstendig ansvar"-formulation imposes a named organizational obligation with mandatory language that goes substantially beyond what § 3's open factual investigation duty requires. Without circular authority and with only partial statutory grounding, this obligation operates as a compliance standard invented by a veileder and imposed without the normative backing of the primary instrument. The requirement should be reformulated as advisory guidance explaining what caseworkers should consider when assessing EØS documentation adequacy. **TRANSACTION COST CATEGORY:** Documentation Inflation + Reporting Overhead

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REQUIREMENT ID: § 3 / REQ-15 (DOC-REQ 3.5) **PROVISION TEXT:** Familiemedlem til EØS-borger må dokumentere overfor Nav-kontoret at vilkårene for fortsatt lovlig opphold er oppfylt. **SOURCE INSTRUMENT:** Veileder for Nav-kontoret ved vurdering av lovlig opphold for EØS-borgere **CIRCULAR AUTHORITY:** ABSENT — consequence: the third-party documentation obligation has no presence in R-35 § 3. **LEGAL AUTHORITY:** PARTIAL — § 3 imposes no formal documentation obligations on third parties (DOC-REQ 3.5: "Section 3

does not impose any formal documentation requirements on third parties, converting an open coverage framework into a rigid documentation mandate"). **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT and statutory authority PARTIAL. **CATEGORY ERROR:** NO **SCALE FLAG:** YES — same EØS latent volume driver applies as for Requirements 13 and 14. Third-party documentation in EØS family member cases requires EØS-competence to assess validity; this cannot be maintained in offices with low EØS caseloads. Since this requirement has no circular authority, any scale burden is unsupported. **PURPOSE:** MIXED — Primary: USER NEED (establishing third-party family member eligibility determines whether the user-applicant can access services). Secondary: INTERNAL CONTROL (formal documentation from third parties creates an audit record for the eligibility determination). **BURDEN DESCRIPTION:** Caseworkers must identify that a family member is subject to this requirement, communicate the documentation standard to the third party, wait for third-party compliance, and then assess whether the documentation produced satisfies the applicable EØS legal threshold. The external-actor dependency introduces administrative delay and uncertainty. Since this requirement has no circular authority, the entire procedural sequence falls outside any framework R-35 § 3 provides, and caseworkers must apply a third-party documentation standard with no guidance on what constitutes sufficient compliance. **KILL LIST CLASSIFICATION:** Category B — Status Change. The mandatory framing for a documentation obligation imposed on third parties has no circular anchor and only partial statutory grounding. The requirement should be reformulated as advisory guidance clarifying what documentation caseworkers may request from family members, while expressly acknowledging that § 3 does not independently mandate formal documentation from third parties and that the caseworker retains discretion in assessing how family member eligibility is established. **TRANSACTION COST CATEGORY:** Documentation Inflation

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REQUIREMENT ID: § 3 / REQ-16 (DOC-REQ 3.6) **PROVISION TEXT:** Det må foreligge opplysninger i saken som dokumenterer om søker har et hjelpebehov eller ikke. **SOURCE INSTRUMENT:** Veileder om økonomisk stønad etter sosialtjenesteloven **CIRCULAR AUTHORITY:** ABSENT — consequence: the documentary precondition for need assessment has no presence in R-35 § 3. **LEGAL AUTHORITY:** PARTIAL — § 3 provides no documentation preconditions for need assessment (DOC-REQ 3.6: "Section 3 does not provide documentation preconditions for assessing needs, thus creating a hard procedural and documentary threshold devoid of a statutory anchor in this specific clause"). **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT and statutory authority PARTIAL. **CATEGORY ERROR:** NO **SCALE FLAG:** YES — the Anchor Document identifies the [D] Documentation Apparatus as the dominant empirical mechanism. The requirement that case files physically contain specific documentary content as a precondition to assessment is structurally analogous to the "cases are rejected because documentation was not in writing, not because help was not delivered" pattern documented across more than a dozen municipalities. Since this requirement has no circular authority, the documentary precondition burden falls entirely outside any framework R-35 § 3 provides. **PURPOSE:** INTERNAL CONTROL — this is a precondition imposed on the case record, not on the assessment itself. Needs can be correctly assessed and help correctly provided without this specific documentary content; the requirement serves audit verification of whether an assessment occurred. **BURDEN DESCRIPTION:** Caseworkers must ensure each file

contains a specific item documenting the need assessment — this is an obligation on the record, not the assessment. For offices where assessment occurs through personal knowledge and direct contact (the documented small-office norm), this requirement imposes systematic discipline of translating tacit knowledge into explicit written form. The Anchor Document phrase "caseworkers knew more about users' situations than the journals reflected" directly describes this dynamic. Since this requirement has no circular authority, caseworkers must satisfy a documentary precondition for which R-35 § 3 provides no guidance. **KILL LIST CLASSIFICATION:** Category B — Status Change. The mandatory framing ("MÅ foreligge opplysninger") imposes a documentary precondition without circular authority and with only partial statutory grounding. The veileder's mandatory language creates an administrative compliance standard that — in practice — sanctions effective casework by penalizing insufficient documentation rather than insufficient service. This should be reformulated as advisory guidance specifying that documenting need assessment is good practice that protects both the user and the caseworker, without operating as a mandatory precondition. **TRANSACTION COST CATEGORY:** Documentation Inflation

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REQUIREMENT ID: § 3 / REQ-17 (DOC-REQ 3.7) **PROVISION TEXT:** Dersom behovet er kortvarig, kan dokumentasjon skje ved egenerklæring fra søkeren, eventuelt muntlig nedtegnet i journalnotat av Nav-kontoret. **SOURCE INSTRUMENT:** Veileder om økonomisk stønad etter sosialtjenesteloven **CIRCULAR AUTHORITY:** ABSENT — consequence: this documentation method specification has no presence in R-35 § 3. **LEGAL AUTHORITY:** PARTIAL — no direct textual foundation in § 3 for specifying permissible documentation alternatives for short-term needs (DOC-REQ 3.7: "The guidance specifies permissible documentation alternatives for short-term needs, a topic lacking any direct textual foundation in Section 3"). **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT and statutory authority PARTIAL. **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — the permissive character of this requirement ("kan dokumenteres") limits its contribution to the [D] mechanism. The guidance is clarificatory rather than overhead-generating, and its purpose is to lower the documentation threshold for short-term cases. Anchor Document note: this type of requirement participates in the Documentation Apparatus but as a threshold-limiting rather than burden-increasing measure. **PURPOSE:** INTERNAL CONTROL — the requirement governs how the administrative record is constructed for a specific case type. The permissive and minimum-threshold framing limits the user-serving dimension to indirect benefit (the caseworker is not required to demand more documentation than necessary). **BURDEN DESCRIPTION:** Caseworkers must, when accepting a self-declaration for short-term needs, ensure the declaration is either in writing or recorded in a journal note. The administrative demand is minimal — writing a note. The permissive character limits the overhead. However, since this requirement has no circular authority, even this modest documentation protocol is an obligation for which R-35 § 3 provides no framework, and caseworkers must rely entirely on the veileder for operational guidance. **KILL LIST CLASSIFICATION:** Category C — Clarification. This requirement is substantively helpful: it sets a low documentation threshold for short-term cases, reducing rather than adding to caseworker burden. However, it operates without circular authority and its status as advisory guidance versus binding standard should be clarified. The clarification should confirm that this is a permissive minimum, not a mandatory protocol, and that the circular's

silence on this point is not a gap but a deliberate non-prescription. **TRANSACTION COST CATEGORY:** Documentation Inflation (minimal)

REQUIREMENT ID: § 3 / REQ-18 (DOC-REQ 3.8) **PROVISION TEXT:** Det er ikke krav om at samtykke må utformes skriftlig, men et samtykke er kun gyldig dersom det kan dokumenteres. **SOURCE INSTRUMENT:** Nasjonal veileder for samarbeidet mellom kriminalomsorgen og Nav **CIRCULAR AUTHORITY:** ABSENT — consequence: this consent documentation standard has no presence in R-35 § 3. Caseworkers are required to satisfy a privacy-law administrative validity standard that the primary normative instrument governing their work does not acknowledge. **LEGAL AUTHORITY:** NO — § 3 operates entirely outside the domain of consent, validity conditions, and documentation of consent (DOC-REQ 3.8: "Section 3 operates entirely outside the domain of consent, validity conditions, or documentation of consent, providing zero textual basis for this mandate"). The legal domain governing consent for inter-agency information sharing is personvernlovgivning (GDPR / personopplysningsloven) and forvaltningsloven §§ 13–13e. **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT and statutory authority NO. **CATEGORY ERROR:** YES — this requirement belongs to the legal domain of privacy law and administrative confidentiality law, not to the jurisdictional framework of sosialtjenesteloven § 3. Its placement in a kriminalomsorgen veileder applied to § 3 processing constitutes a domain-level misattribution: caseworkers are being asked to satisfy a GDPR-adjacent compliance standard through the vehicle of social services jurisdictional guidance. **SCALE FLAG:** YES — the Anchor Document's [D] Documentation Apparatus findings apply. Documentation obligations from sub-legal instruments constitute the dominant compliance burden across the full dataset. Consent documentation records — requiring knowledge of personvernlovgivning validity conditions — impose a specialist legal knowledge demand that cannot be sustained in generalist small offices. Since this requirement has no circular authority and belongs to a different legal domain, any scale burden is structurally unsupported by the social services normative framework. **PURPOSE:** INTERNAL CONTROL — consent documentation serves administrative validity and data governance functions in inter-agency information exchange. It does not affect the substantive quality of the user's social services case assessment. In relation to social services users, the purpose is to ensure that information-sharing between kriminalomsorgen and NAV has formal legal standing — a regulatory compliance function external to the social services assessment itself. **BURDEN DESCRIPTION:** Caseworkers must maintain a documentary record that valid consent was obtained for inter-agency information sharing — recording what was consented to, by whom, and when — regardless of whether consent was given orally. This requires understanding the legal validity conditions for consent under personvernlovgivning (not sosialtjenesteloven), applying those conditions to an oral exchange, and producing a compliance record. The caseworker is asked to simultaneously perform a social services jurisdictional assessment (§ 3) and satisfy a privacy-law documentation standard (a different legal domain) without any guidance from the primary normative instrument governing either the jurisdictional assessment or the privacy-law obligation in this context. Since this requirement has no circular authority and belongs to a different legal domain, the transaction cost falls entirely outside any conceivable framework § 3 provides. **KILL LIST CLASSIFICATION:** Category A — Removal. This requirement lacks legal authority under sosialtjenesteloven § 3 (double authority gap: both circular authority and statutory authority

absent) and belongs to a different legal domain (privacy law and administrative confidentiality law). Its presence in a kriminalomsorgen veileder applied to § 3 processing constitutes a category error that misattributes a privacy-law compliance obligation to the social services jurisdictional framework. The requirement should be removed from the social services normative framework for § 3 contexts. If a consent documentation standard is considered necessary for kriminalomsorgen-NAV information sharing, it should be addressed in personvernlovgivning instruments or in inter-agency cooperation frameworks, not through veiledere applied to social services jurisdictional provisions. **TRANSACTION COST CATEGORY:** Documentation Inflation + Combined Burden (privacy-law compliance obligation imposed via social services instrument)

CLOSING COMPARATIVE NOTE

Total requirements identified starting from the Process Inflation Findings: 18

Requirements that would have been visible starting from the circular (R-35 § 3) alone: 8 (Requirements 1–8)

Requirements invisible from the circular alone: 10 (Requirements 9–18) — representing 56% of the total normative burden governing § 3 casework.

Double authority gaps identified: 10 — Requirements 9, 10, 11, 12, 13, 14, 15, 16, 17, and 18. In every case, both circular authority is absent and statutory authority is absent or partial. All 10 are sourced entirely from sub-legal guidance instruments (9 veileders, 1 Kommunebrev) with no foothold in R-35 § 3.

Category errors (requirements belonging to a different legal domain): 1 — Requirement 18, which belongs to the legal domain of privacy law and administrative confidentiality law (personvernlovgivning / forvaltningsloven taushetsplikt), not to the jurisdictional framework of sosialtjenesteloven § 3.

Kill List breakdown:

- **Category A — Removal:** 1 requirement (Req 18 — category error, double authority gap, consent documentation from wrong legal domain)
- **Category B — Status Change:** 7 requirements (Reqs 9, 10, 11, 13, 14, 15, 16 — mandatory framing without circular or statutory authority; local discretion should be restored)
- **Category C — Clarification:** 7 requirements (Reqs 2, 3, 4, 5, 6, 12, 17 — circular authority present or limited authority gap; room for maneuver should be made explicit)
- **No Kill List Action:** 3 requirements (Reqs 1, 7, 8 — sufficient authority and proportionate burden)

Primary transaction cost categories by frequency:

1. **Documentation Inflation** — 9 requirements (Reqs 5, 11, 12, 13, 14, 15, 16, 17, 18): the dominant category, consistent with the Anchor Document's finding that [D] Documentation Apparatus is the empirically dominant mechanism across the entire supervision dataset
2. **Structural Disproportionality** — 3 requirements (Reqs 10, 13, 18): requirements that presuppose organizational or specialist capacity unavailable in average municipalities
3. **Reporting Overhead** — 2 requirements (Reqs 10, 14): obligations generating meta-documentation or organizational compliance reporting
4. **Procedural Duplication** — 1 requirement (Req 9): additional procedural step in the rejection pipeline without circular foundation
5. **Combined Burden** — 1 requirement (Req 18): privacy-law compliance obligation layered onto social services jurisdictional instrument
6. **No Transaction Cost Identified** — 6 requirements (Reqs 1, 2, 4, 6, 7, 8)

Synthesis observation for main report: The § 3 analysis confirms the structural pattern identified in the Volume Driver Findings: the primary normative instrument (R-35 § 3) covers 44% of the obligations actually operating on caseworkers. The remaining 56% — all 10 requirements invisible from the circular — are sourced from veileders and one Kommunebrev, none of which have been incorporated into the circular or grounded in § 3's statutory text. Every one of these 10 invisible requirements constitutes a double authority gap. Together they generate a documentation and procedural overhead layer that is structurally disproportionate for small municipalities, empirically confirmed as a compliance burden by the Anchor Document, and operationally invisible to caseworkers consulting only the primary normative instrument. The 10-to-1 ratio of double-authority-gap requirements sourced from sub-legal instruments to requirements with full circular and statutory authority is the central finding of this audit and directly supports both the Kill List recommendations and the broader argument for normative layer reduction in the R-35 § 3 framework.

SLUDGE AUDIT — § 4 KRAV TIL FORSVARLIGHET

Session Reference: §4-SA | Source: Rundskriv Sosialtjenesteloven § 4 (administrative circular)**

PRELIMINARY METHODOLOGICAL NOTE

Requirements visible from the Process Inflation Findings (Reference Document): 13 (PROC-REQ-4.1 through PROC-REQ-4.13)

Requirements visible from the circular paragraph alone (Context Document): 8 (PROC-REQ-4.1 through PROC-REQ-4.8)

Requirements with no textual presence in the circular paragraph: 5 — specifically PROC-REQ-4.9, 4.10, 4.11, 4.12, and 4.13.

This gap — 5 of 13 requirements, or 38% of the total operative burden — is invisible from the circular alone. It is only surfaced through the Process Inflation Findings as the primary reference instrument. This structural observation is the core analytical value of using the Process Inflation Findings rather than the circular as the enumeration base: the circular paragraph presents an apparent normative framework of 8 provisions, but the actual compliance burden caseworkers face includes 5 additional obligations derived from sub-legal instruments that the circular text does not contain or reference.

Source mapping for requirements absent from the circular:

- **PROC-REQ-4.9** ("Direktoratet oppfordrer kommunen…"): Source is a **Kommunebrev** (directorial letter). The language "Direktoratet oppfordrer" is the register of directorial guidance communication, not circular text. Category: (a) Kommunebrev.

- **PROC-REQ-4.10** (trigger-question checklist for barnets beste activation): Source is a **veileder**. The checklist-question format ("Hvis du svarer ja på minst ett av disse spørsmålene…") is characteristic of veileder methodology, not circular normative text. Category: (b) veileder.

- **PROC-REQ-4.11** (three-step sequential methodology: vurdere → vekte → vise): Source is a **veileder**. The three-step sequential methodology with named phases is a veileder construct. Category: (b) veileder.

- **PROC-REQ-4.12** ("NAV-kontoret må være aktive i kartleggingsprosessen"): Source is a **veileder or guidance document**. The named "kartleggingsprosess" as a designated phase, with a behavioral standard ("aktive") attached, is characteristic of

veileder operationalization. Category: (b) veileder, possibly (d) guidance document attached to a standard.

- **PROC-REQ-4.13** ("Hovedprinsippet for behandling av søknader er derfor at det må foretas individuelle vurderinger basert på opplysninger fra kartleggingen"): Source is a **veileder**. The framing of "kartleggingen" as a defined prior phase whose outputs bind the subsequent assessment is a veileder-level procedural construction. Category: (b) veileder.

These five source mappings are carried forward into Step 2.

STEP 1 — IDENTIFICATION OF ALL REQUIREMENTS

Req. ID	Exact obligation (from Process Inflation Findings)	Source instrument	Explicit / Implicit	Textual presence in circular
PROC-REQ-4.1	"Kommunen må gjennom sin internkontroll sikre at Nav-kontoret er organisert på en måte som sikrer forsvarlige tjenester."	Circular (§4)	Explicit	YES
PROC-REQ-4.2	"Hva som er forsvarlige tjenester må vurderes i forhold til faglig utvikling, endret verdioppfatning og det som vurderes som god praksis på området."	Circular (§4)	Explicit	YES
PROC-REQ-4.3	"Det må derfor legges til rette for kvalitetsarbeid i den daglige driften ved Nav-kontoret."	Circular (§4)	Explicit	YES
PROC-REQ-4.4	"Nav-kontoret må sørge for at alle som henvender seg får sine interesser ivaretatt."	Circular (§4)	Explicit	YES
PROC-REQ-4.5	"Nav-kontoret må sørge for at søknader behandles uten ugrunnet opphold, og ivareta hjelpebehovet mens søknaden er til behandling."	Circular (§4)	Explicit	YES
PROC-REQ-4.6	"Hva som regnes som forsvarlig tjenestenivå kan ikke fastslås på generelt grunnlag, men må vurderes konkret og individuelt utfra den enkeltes behov i hvert enkelt tilfelle."	Circular (§4)	Explicit	YES

PROC-REQ-4.7	"Hjelpen som gis skal baseres på en individuell vurdering med sikte på å styrke den enkeltes forutsetning for mestring og kontroll over eget liv…"	Circular (§4)	Explicit	YES
PROC-REQ-4.8	"Hvis tjenestemottaker har barn, skal barnas behov vurderes og ivaretas særskilt."	Circular (§4)	Explicit	YES
PROC-REQ-4.9	"Direktoratet oppfordrer derfor kommunen til å arbeide med å tydeliggjøre hvordan barnets beste-vurderinger skal brukes i saksbehandlingen ved Nav-kontorene…"	Kommunebrev	Explicit	NO
PROC-REQ-4.10	"Hvis du svarer ja på minst ett av disse spørsmålene, er barn berørt og du må vurdere hva som er til det beste for barnet i den enkelte saken."	Veileder	Explicit	NO
PROC-REQ-4.11	"En vurdering av barnets beste innebærer å vurdere hva som er barnets beste… vekte hensynet opp mot andre hensyn… vise innholdet i barnets beste-vurderingen…"	Veileder	Explicit	NO
PROC-REQ-4.12	"NAV-kontoret må være aktive i kartleggingsprosessen slik at man får avdekket hva brukeren har behov for."	Veileder	Explicit	NO
PROC-REQ-4.13	"Hovedprinsippet for behandling av søknader er derfor at det må foretas individuelle vurderinger basert på opplysninger fra kartleggingen."	Veileder	Explicit	NO

All 13 requirements are now enumerated and carried forward.

STEP 2 — LEGAL AUTHORITY CHECK

PROC-REQ-4.1

- Direction 1 — Circular authority: YES. The circular explicitly states the internkontroll obligation in section 2.4.1.
- Direction 2 — Statutory authority: PARTIAL. The Process Inflation Findings flag that the circular converts the open organizational standard under §4 into a requirement to

use a specific mechanism ("internkontroll") that is actually regulated by §5 of the Social Services Act. Grounding a §5 mechanism requirement in §4 creates a cross-provision legal conflation. The §4 statutory text imposes a results obligation (forsvarlige tjenester); the specific organizational mechanism (internkontroll) is §5's domain.
- Double authority gap: NO (circular authority is present; statutory authority is partial, not absent).
- Category error: NO.

PROC-REQ-4.2

- Direction 1 — Circular authority: YES.
- Direction 2 — Statutory authority: YES. The Process Inflation Findings identify no legal gap; this correctly operationalizes the dynamic standard of forsvarlighetskravet under §4.
- Double authority gap: NO.
- Category error: NO.

PROC-REQ-4.3

- Direction 1 — Circular authority: YES. The text "Det må therefore legges til rette for kvalitetsarbeid i den daglige driften" appears in the circular.
- Direction 2 — Statutory authority: PARTIAL. The Process Inflation Findings flag that the circular converts the open standard of quality outcome into a specific, named, mandatory operational process ("kvalitetsarbeid"), fixing an organizational method the law left open. §4 requires forsvarlige tjenester as an outcome standard; it does not mandate a named quality-work process as the organizational means.
- Double authority gap: NO (circular authority is present).
- Category error: NO.

PROC-REQ-4.4

- Direction 1 — Circular authority: YES.
- Direction 2 — Statutory authority: YES. The Process Inflation Findings identify no legal gap; the requirement correctly defines the accessibility threshold.
- Double authority gap: NO.
- Category error: NO.

PROC-REQ-4.5

- Direction 1 — Circular authority: YES.
- Direction 2 — Statutory authority: PARTIAL. The Process Inflation Findings flag that the procedural timeline element ("uten ugrunnet opphold") derives primarily from the general Public Administration Act (forvaltningsloven §11a), not from §4. Grounding it in §4 creates an ambiguous legal linkage. The interim help obligation has a clearer §4 basis; the timeline element is legally misattributed.
- Double authority gap: NO.
- Category error: NO, though the timeline element belongs analytically in the forvaltningsloven domain rather than the social services forsvarlighetskrav domain.

PROC-REQ-4.6

- Direction 1 — Circular authority: YES.
- Direction 2 — Statutory authority: YES. The Process Inflation Findings identify no legal gap; correctly operationalizes the individualized assessment duty.
- Double authority gap: NO.
- Category error: NO.

PROC-REQ-4.7

- Direction 1 — Circular authority: YES.
- Direction 2 — Statutory authority: YES. The Process Inflation Findings identify no legal gap; directly restates duties from §1 (purpose) and §4.
- Double authority gap: NO.
- Category error: NO.

PROC-REQ-4.8

- Direction 1 — Circular authority: YES. The text "Hvis tjenestemottaker har barn, skal barnas behov vurderes og ivaretas særskilt" appears in the circular.
- Direction 2 — Statutory authority: PARTIAL. The Process Inflation Findings flag that the true legal basis lies in the Constitution (Grunnloven §104) and the UN Convention on the Rights of the Child, not in §4 of the Social Services Act. §4 does not on its face create a child-specific separate assessment obligation; this has been read into it from the constitutional frame.
- Double authority gap: NO (circular authority is present).
- Category error: PARTIAL. The constitutional basis (Grunnloven §104, CRC) is a different legal domain from the Social Services Act. The requirement is correctly placed in social services practice but its legal anchor is misidentified as §4 rather than the constitutional and international law layer. This is analytically significant but does not constitute a category error in the domain sense (the obligation is correctly directed at social services workers), so: NO full category error, but a source-attribution error.

PROC-REQ-4.9

- Direction 1 — Circular authority: NO. This requirement has no textual presence in the §4 circular paragraph. It operates from a Kommunebrev. First-order authority gap confirmed.
- Direction 2 — Statutory authority: PARTIAL. The Process Inflation Findings flag ambiguous linkage to §4; the true substantive grounding is in the UN Convention on the Rights of the Child, not §4.
- Double authority gap: YES (circular authority ABSENT + statutory authority PARTIAL).
- Category error: NO in domain terms (child welfare is legitimately a social services concern), but the legal source is international law / constitutional law rather than the Social Services Act. The Kommunebrev instrument is operating without circular or statutory backing to create an institutional administrative duty.

PROC-REQ-4.10

- Direction 1 — Circular authority: NO. The trigger-question checklist methodology has no textual presence in the circular. First-order authority gap confirmed.
- Direction 2 — Statutory authority: PARTIAL. The Process Inflation Findings flag that the circular (and here, the veileder) mandates a specific named assessment triggered by conditions, converting §4's open assessment authority into a fixed duty whose precise legal basis in §4 is ambiguous; true anchor is constitutional.
- Double authority gap: YES.
- Category error: NO in domain terms.

PROC-REQ-4.11

- Direction 1 — Circular authority: NO. The three-step sequential methodology (vurdere → vekte → vise) has no textual presence in the circular. First-order authority gap confirmed.
- Direction 2 — Statutory authority: NO. The Process Inflation Findings explicitly identify this as a paradigm case of shadow binding: a fixed three-step sequential methodology lacking authorization in §4. The statute creates no sequential assessment obligation; the veileder has manufactured one.
- Double authority gap: YES (circular authority ABSENT + statutory authority NO).
- Category error: NO in domain terms.

PROC-REQ-4.12

- Direction 1 — Circular authority: NO. The specific formulation requiring active caseworker conduct in a named "kartleggingsprosess" has no textual presence in the circular paragraph. First-order authority gap confirmed.
- Direction 2 — Statutory authority: PARTIAL. The Process Inflation Findings flag that §4 creates a duty of adequate assessment but does not mandate specific active conduct in a designated named phase. The duty to assess adequately exists; the behavioral standard ("aktive") applied to a named process step is a veileder addition.
- Double authority gap: YES.
- Category error: NO.

PROC-REQ-4.13

- Direction 1 — Circular authority: NO. The framing of kartleggingen as a defined prior phase whose outputs constitute the basis for individual assessments is not present in the circular paragraph. First-order authority gap confirmed.
- Direction 2 — Statutory authority: YES. The Process Inflation Findings identify no legal gap; this correctly operationalizes the general administrative law duty to ensure cases are adequately investigated (utredningsplikten) before decisions are made. The underlying obligation is sound even if the kartleggingsprosess framing is a veileder addition.
- Double authority gap: NO (statutory authority YES, even though circular authority is absent).
- Category error: NO.

STEP 3 — SCALE AND PROPORTIONALITY CHECK

PROC-REQ-4.1 (Internkontroll organizational obligation) Scale flag: YES. The Anchor Document (Part 2, Cluster 2 — The Role-Separation Impossibility and Part 3, Cluster 2 — The Internal Control Apparatus Stack) directly confirms this. The requirement that Nav-kontoret be organized through internkontroll to deliver forsvarlige tjenester presupposes an organizational differentiation that micro-offices structurally cannot achieve. The Anchor Document states: "These requirements collectively assume an organization with at least three structurally distinct layers: a frontline caseworker tier, an approval/quality assurance tier, and a management/deviation-tracking tier." This organizational presupposition is embedded in PROC-REQ-4.1's reference to internkontroll as the governing mechanism. The structural connection is direct: the requirement maps onto the internal control architecture cluster, which the Anchor Document ranks as Tier 2 — High Structural Impact. Since this requirement lacks full statutory authority (Step 2, PARTIAL), the scale-related burden it imposes is partially unsupported: the organizational model it presupposes exceeds what §4 itself requires.

PROC-REQ-4.2 (Forsvarlighetsvurdering ift faglig utvikling etc.) Scale flag: NO. This requirement establishes a normative standard (the inputs to the forsvarlighetskravet) rather than an organizational procedure. It imposes no operational burden that varies with scale; it defines the evaluative frame for all offices equally. The Anchor Document contains no finding connecting this requirement to volume-sensitivity.

PROC-REQ-4.3 (Kvalitetsarbeid i daglig drift) Scale flag: YES. The Anchor Document (Cluster 2 — Internal Control Apparatus) confirms that quality management infrastructure is among the heaviest cumulative burdens on small offices. The specific formulation of "kvalitetsarbeid" as an ongoing daily process presupposes dedicated quality assurance capacity. The Anchor Document notes that in offices of five to fifteen people, quality assurance demands fall entirely on the Nav leader, who is simultaneously frontline caseworker, decision approver, and quality controller. The structural connection: PROC-REQ-4.3 requires an institutionalized quality process whose maintenance assumes back-office separation that small offices do not have. This burden is imposed without circular or full statutory authority (Step 2, PARTIAL), making it disproportionate burden without regulatory foundation.

PROC-REQ-4.4 (Interesser ivaretatt for alle henvendelser) Scale flag: NO. This requirement imposes a substantive user-access standard, not an organizational procedure. The Anchor Document does not flag this as volume-sensitive.

PROC-REQ-4.5 (Søknader uten ugrunnet opphold + ivareta hjelpebehov) Scale flag: PARTIAL. The Anchor Document (Part 2, §17 formalization pipeline; Mechanism [P] Procedural Continuity) confirms that formal case-processing pipeline requirements become disproportionately burdensome when case volume is insufficient to sustain procedural routines. The "uten ugrunnet opphold" element has this character: it presupposes a queuing environment with formal prioritization needs. In small offices where processing happens immediately, the formal pipeline is operationally redundant but legally mandatory.

Connection: PROC-REQ-4.5's timeline element is structurally analogous to the §17 pipeline failures documented in the Anchor Document (Tinn, Hjelmeland, Årdal — services provided immediately but sanctioned because paperwork followed rather than preceded help).

PROC-REQ-4.6 (Konkret individuell vurdering) Scale flag: NO. The requirement is a substantive legal obligation (no generalized determinations). The Anchor Document addresses the scale-neutrality of the individual assessment standard; it does not flag PROC-REQ-4.6 as volume-sensitive.

PROC-REQ-4.7 (Individuell vurdering for mestring) Scale flag: NO. Correctly restates §1/§4 duties. Not flagged in the Anchor Document.

PROC-REQ-4.8 (Barnas behov særskilt) Scale flag: YES. The Anchor Document (Cluster 3 — Child Perspective Documentation and §18 findings) directly confirms this. Requirements for systematic written mapping of children's needs are among the most extensively documented sources of compliance burden in small offices. The Anchor Document states: "The combination forces a generalist caseworker handling 200–400 total social assistance cases annually to maintain specialized competence in child welfare law, exercise that competence reliably in the subset of cases involving families…and document it exhaustively in every instance." PROC-REQ-4.8's "særskilt" (separately, specifically) framing creates a documentation differentiation demand — the child's needs must not merely be noted but given distinct treatment — which is a sub-component of the [D] Documentation Apparatus mechanism. Scale connection: confirmed by 25+ findings in the Anchor Document's summary table.

PROC-REQ-4.9 (Kommunebrev: tydeliggjøre barnets beste-prosedyrer) Scale flag: YES. The Anchor Document (Cluster 3, child perspective) confirms that institutional procedural clarification of child welfare assessment creates demands that presuppose dedicated specialist resources and back-office capacity to produce, maintain, and train on written procedures. The Anchor Document explicitly notes that the child-perspective documentation cluster includes a "[S] Dedicated specialist or designated responsibility holder for the child perspective" component. PROC-REQ-4.9 — which asks the municipality to produce institutional documentation of how barnets beste assessments are integrated into casework — presupposes this capacity. Since this requirement lacks circular authority (Step 2, double authority gap), the scale burden it imposes falls entirely outside any framework the circular provides guidance for.

PROC-REQ-4.10 (Veileder: trigger-question barnets beste checklist) Scale flag: YES. The Anchor Document (Cluster 3; [K] Competence Sustainability and [D] Documentation mechanisms) confirms that the child welfare assessment obligation, as operationalized through checklists and structured methodologies, creates compliance burdens that exceed generalist capacity in small offices. The Anchor Document notes: "A generalist who encounters child-welfare assessments infrequently…cannot reasonably be expected to both maintain the substantive competence [K] and execute the documentation pipeline [D]." PROC-REQ-4.10's trigger-question methodology creates exactly this competence maintenance demand: the checklist must be executed correctly every time a qualifying case arises, but the encounter frequency in small offices is insufficient to make the checklist habitual. Double authority gap means this scale burden is unsupported by the circular.

PROC-REQ-4.11 (Veileder: three-step barnets beste methodology) Scale flag: YES. The Anchor Document (Cluster 3, [D] mechanism; §18 findings) confirms that the three-component documentation obligation for child welfare assessments — mapping, weighing, demonstrating — is a primary driver of compliance failures in offices where caseworkers possess substantive knowledge but cannot translate it into the formal documentary format demanded. This is precisely the pattern the Anchor Document identifies: "caseworkers knew more about the users' situations than the journals reflected." The "vise" (demonstrate/show) step of PROC-REQ-4.11 is the operative mechanism: it converts an internal assessment into a documentation artifact. Double authority gap means this documentation burden is unsupported by any normative instrument with binding authority.

PROC-REQ-4.12 (Veileder: aktive i kartleggingsprosessen) Scale flag: PARTIAL. The Anchor Document ([D] and [P] mechanisms; §17 formalization pipeline) confirms that named procedural phases — such as the kartleggingsprosess — create burdens when offices do not have back-office capacity to maintain defined process steps. The connection is structural rather than direct: the Anchor Document does not cite PROC-REQ-4.12 specifically, but the pattern of named process obligations creating compliance costs in small offices is extensively confirmed. Connection is PARTIAL. Since this requirement lacks circular authority (double authority gap, Step 2), the burden it imposes is unsupported by the circular framework.

PROC-REQ-4.13 (Veileder: vurderinger basert på kartleggingen) Scale flag: NO. The underlying obligation (evidence-based individual assessment) is substantively sound and does not vary with scale in a way that generates disproportionate burden. The kartleggingsprosess framing adds procedural overhead, but the Anchor Document does not flag the fact-finding precondition for decisions as a scale-sensitive driver in its own right.

STEP 4 — PURPOSE CLASSIFICATION

PROC-REQ-4.1: [INTERNAL CONTROL] The requirement prescribes a specific organizational governance mechanism (internkontroll) as the means of achieving a quality outcome. The language "gjennom sin internkontroll" specifies the administrative control channel, not the service content or user experience. The duty to organize correctly serves the administrative system's audit and accountability functions. The user benefit is indirect and downstream. Classification justification: "sikre at Nav-kontoret er organisert" is a structural/administrative formulation; "forsvarlige tjenester" is the user-facing goal, but the requirement addresses the organizational means, not the outcome.

PROC-REQ-4.2: [USER NEED] This requirement defines the substantive content of the legal standard — what inputs constitute a forsvarlighetsvurdering. It is the normative foundation for what caseworkers must consider in assessing whether a service meets the legal threshold. No transaction cost burden identified: this is the legal standard itself, not a procedural overlay.

PROC-REQ-4.3: [INTERNAL CONTROL] The requirement mandates a named, ongoing process ("kvalitetsarbeid") within daily operations. The language "legges til rette for kvalitetsarbeid i den daglige driften" specifies an institutional management process. The primary beneficiary is the administrative control system: the requirement exists to ensure continuous quality monitoring, not to directly improve any individual user's case outcome. The user benefit is indirect and structural.

PROC-REQ-4.4: [USER NEED] The requirement directly protects the user's substantive access right: "alle som henvender seg får sine interesser ivaretatt" is a user-facing obligation defining accessibility. No transaction cost burden identified: this is a direct service quality requirement.

PROC-REQ-4.5: [MIXED] The "uten ugrunnet opphold" element primarily serves administrative consistency and legal predictability (INTERNAL CONTROL: secondary, derived from forvaltningsloven); the "ivareta hjelpebehovet mens søknaden er til behandling" element directly serves the user's substantive need (USER NEED: primary). The user need element is primary because addressing acute need during processing is the substantive social services obligation; the timeline element is a procedural compliance requirement that serves both user fairness and administrative legality.

PROC-REQ-4.6: [USER NEED] The prohibition on general determinations and the mandate for concrete individual assessment directly serves the user's legal security (rettssikkerhet) and the quality of their case outcome. No transaction cost burden identified.

PROC-REQ-4.7: [USER NEED] The requirement that assistance be based on individualized assessment aimed at empowerment directly serves the user's interest in meaningful, appropriate help. No transaction cost burden identified.

PROC-REQ-4.8: [MIXED] The substantive obligation to assess and protect children's needs is [USER NEED] and constitutionally grounded. However, as operationalized by the circular, the "særskilt" element introduces a documentation differentiation requirement — children's needs must be separately assessed and recorded, not merely noted — which serves the audit/control system's ability to verify compliance. The USER NEED element is primary (the child's interests are directly served); the documentation differentiation element is secondary but generates the burden.

PROC-REQ-4.9: [INTERNAL CONTROL] The requirement asks municipalities to produce institutional procedural documentation clarifying how barnets beste assessments are integrated into casework. "Tydeliggjøre hvordan… skal brukes" is a management documentation task. The product of compliance is an institutional policy document or procedure manual, not an improved individual user outcome. The Kommunebrev instrument confirms this: it addresses institutional process design, not direct service delivery.

PROC-REQ-4.10: [MIXED] The trigger-question methodology serves both purposes. The USER NEED element: identifying which cases require a child welfare assessment protects the child from being overlooked. The INTERNAL CONTROL element: the specific checklist format and mandatory activation logic serves the supervisory verification function — an auditor can check whether the trigger was pulled. The INTERNAL CONTROL element is secondary but is the element that generates burden and shadow binding: caseworkers must

execute and document a named checklist procedure rather than exercising professional judgment about whether children are affected.

PROC-REQ-4.11: [INTERNAL CONTROL] The three-step methodology (vurdere, vekte, vise) primarily serves the audit and documentation function. The "vise" (demonstrate/show) step is explicitly documentary: it exists to make the assessment visible to supervisors and reviewers, not to improve the substance of the assessment. A caseworker who evaluates and weighs children's interests correctly without formally demonstrating the three steps in writing is substantively compliant with the underlying constitutional obligation but formally non-compliant with this veileder requirement. The primary purpose is therefore documentary/audit-serving. The Process Inflation Findings explicitly classify this as a paradigm case of shadow binding ("fixed three-step sequential methodology lacking authorization in §4").

PROC-REQ-4.12: [MIXED] The requirement that caseworkers be active in the mapping process serves both the user (adequate needs identification) and the internal process (a named "kartleggingsprosess" as an auditable phase). The USER NEED element is primary (active mapping improves the quality of needs identification); the INTERNAL CONTROL element is secondary but present (the named phase and behavioral standard serve procedural verification).

PROC-REQ-4.13: [USER NEED] The requirement that individual assessments be based on information gathered during the mapping phase correctly operationalizes the forvaltningsrettslige utredningsplikt. The purpose is directly user-serving: decisions must be grounded in the facts of the individual case. No transaction cost burden identified beyond what the underlying legal duty already requires.

STEP 5 — TRANSACTION COST CHARACTERIZATION

PROC-REQ-4.1 [INTERNAL CONTROL] Administrative demand: The Nav leader must demonstrate, through documented internkontroll routines, that the office is organizationally structured to deliver forsvarlige tjenester. In practice, this means maintaining written organizational charts, role descriptions, quality assurance protocols, and approval hierarchies — all of which must be reviewable by Statsforvalteren during supervision. The primary audience is the supervisor, not the user. In small offices, as the Anchor Document confirms, this translates to the Nav leader producing and maintaining compliance documentation for a governance architecture that the office's scale cannot actually realize: self-approval is documented as structured approval; direct management oversight is recorded as independent quality control. The transaction cost is therefore double: the time cost of maintaining the documentation, and the organizational fiction cost of documenting structures that do not exist in the form required. Since this obligation derives primarily from §5 rather than §4 (Step 2, PARTIAL), caseworkers are executing a §5-level compliance task under the framing of §4, without the circular providing guidance on how the §4-§5 relationship is to be operationalized.

PROC-REQ-4.3 [INTERNAL CONTROL] Administrative demand: The Nav leader must maintain an active, identifiable "kvalitetsarbeid" process in daily operations. In practice, this means scheduling and documenting professional quality meetings, maintaining improvement logs, and producing evidence of systematic quality work distinct from ordinary casework review. The primary audience is the supervisory system. The process must be nameable and documentable as "quality work" — generic management activity does not suffice. Transaction cost: regular administrative overhead in documenting an ongoing quality process, distinct from the delivery of services. The Anchor Document confirms this pattern: quality assurance demands fall entirely on the Nav leader in small offices, absorbing management capacity that is simultaneously required for frontline service. Since PROC-REQ-4.3 lacks full statutory authority (Step 2), caseworkers must comply with an obligation that the primary normative instrument governing their work does not unambiguously require and that the circular does not operationalize beyond the named obligation itself.

PROC-REQ-4.5 [MIXED — burden on timeline element] Administrative demand on the timeline element: The office must document that applications have been processed within a timeframe that can be defended as "without undue delay," meaning a processing log must be maintained and defensible. The "ivareta hjelpebehovet" element creates a separate documentation obligation: interim assistance assessments must be recorded even when the substantive decision has not yet been made. Transaction cost: dual-track documentation (processing timeline and interim need assessment) that may not serve the user's case outcome directly but serves legal defensibility. This burden is partially misattributed to §4 when its primary authority lies in forvaltningsloven §11a (Step 2, PARTIAL).

PROC-REQ-4.8 [MIXED — burden on the "særskilt" documentation element] Administrative demand: Where the applicant has children, the caseworker must produce a separate, identifiable assessment of children's needs — distinct from the overall case assessment — and this must be visible in the case documentation. The "særskilt" formulation requires documentary differentiation, not merely substantive consideration. Transaction cost: in every case involving a family, an additional documentation step is triggered regardless of whether children's specific circumstances differ from the overall assessment. The Anchor Document (Cluster 3) confirms this burden across 25+ findings: caseworkers who substantively know the family's situation fail to produce the separate documented child assessment. This is a documentation overhead triggered by a condition (presence of children) that applies to a substantial subset of financial assistance cases.

PROC-REQ-4.9 [INTERNAL CONTROL] Administrative demand: The municipality must produce institutional procedural documentation — a policy document, procedure manual, or equivalent instrument — clarifying how barnets beste assessments are integrated into casework at the Nav office. This is a management-level documentation task directed at the supervisory and administrative system, not at individual case outcomes. Transaction cost: management time and institutional drafting capacity required to produce a procedure document. This demand falls outside any framework the circular provides guidance for, since PROC-REQ-4.9 has no circular authority (Step 2, double authority gap). Caseworkers and Nav leaders must comply with an obligation whose source is a Kommunebrev that the governing circular does not address or reference. This creates compliance without normative context: the obligation floats without integration into the circular framework.

PROC-REQ-4.10 [MIXED — burden on checklist execution and documentation] Administrative demand: In any case where the trigger questions indicate child involvement, the caseworker must execute and document the barnets beste trigger assessment. The documentation must demonstrate that the checklist was applied and the conclusion reached. Transaction cost: the checklist must be pulled from the veileder, applied against the case facts, and its conclusion recorded — a named procedural step that adds a distinct administrative action to every qualifying case. The Anchor Document (Cluster 3, [D] and [K] mechanisms) confirms that this type of trigger-based mandatory assessment generates compliance failures when encounter frequency is insufficient to make the procedure habitual. Since this requirement lacks circular authority (Step 2, double authority gap), caseworkers must execute a named veileder procedure for which the governing circular provides no guidance.

PROC-REQ-4.11 [INTERNAL CONTROL] Administrative demand: Where a barnets beste assessment is triggered, the caseworker must structure the written assessment in three identifiable steps — vurdere (evaluate), vekte (weigh), vise (demonstrate/show) — and all three steps must be visible in the case documentation. The "vise" step is the operative documentation burden: the assessment must not merely be conducted but demonstrated in writing in a form that makes all three phases distinguishable to a reviewer. Transaction cost: structured documentary production of a formal three-part assessment narrative for every qualifying case, regardless of whether the substantive conclusion would have differed without this format. The Anchor Document (Cluster 3, [D] mechanism; dozens of findings of verbally adequate but documentarily absent assessments) confirms that this specific documentary format is the primary driver of compliance failures in child welfare assessment. Since PROC-REQ-4.11 lacks circular authority and has no statutory basis (Step 2, double authority gap, NO legal authority), this is the most significant instance in the §4 audit where the circular provides no guidance because the obligation is entirely sub-legal — caseworkers are required to follow a veileder methodology that the governing circular does not mention, endorse, or integrate.

PROC-REQ-4.12 [MIXED — burden on procedural role standard] Administrative demand: The caseworker must demonstrate active participation in a designated "kartleggingsprosess" phase, and this active role must be evidenced in the case record. The behavioral standard ("aktive") must manifest as a documented phase of the case — a distinct mapping record that evidences proactive engagement, not merely reactive response to what the user volunteers. Transaction cost: a named mapping phase must be produced and documented as a step in the case record, distinct from the overall case narrative. Since this requirement lacks circular authority (Step 2, double authority gap), caseworkers must comply with a behavioral and documentation standard that the governing circular does not describe or support.

Requirements with no transaction cost identified: PROC-REQ-4.2 [USER NEED], PROC-REQ-4.4 [USER NEED], PROC-REQ-4.6 [USER NEED], PROC-REQ-4.7 [USER NEED], PROC-REQ-4.13 [USER NEED]: These requirements define the substantive legal standards and user-serving obligations of §4. Their operative content is the substance of the service obligation itself, not an administrative overlay. No separate transaction cost is attributed to these requirements.

STEP 6 — CATALOG ENTRIES

REQUIREMENT ID: §4-REQ-01 **PROVISION TEXT:** The municipality must use internal controls to ensure the Nav office is organized in a way that delivers forsvarlige tjenester. **SOURCE INSTRUMENT:** Circular — Rundskriv til sosialtjenesteloven §4, section 2.4.1 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — Process Inflation Findings (PROC-REQ-4.1, Step 3): the circular converts the open organizational standard of §4 into a mandatory reference to internkontroll, which is regulated by §5. The obligation is legally sound in substance; its §4 attribution creates a cross-provision conflation. **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** YES — Anchor Document, Part 2 Cluster 2 (Role-Separation Impossibility) and Part 3 Cluster 2 (Internal Control Apparatus Stack): requirements for organized internkontroll presuppose a minimum of three structurally distinct organizational tiers. Municipalities with 2–5 social services caseworkers cannot achieve this differentiation; the organizational presupposition fails structurally before the requirement can be executed. **PURPOSE:** INTERNAL CONTROL — "gjennom sin internkontroll sikre at Nav-kontoret er organisert" addresses the governance mechanism and organizational structure for administrative accountability, not the direct content of the user's service. **BURDEN DESCRIPTION:** Nav leader must maintain documented internkontroll structures demonstrating organizational appropriateness for a supervisory audience. In micro-offices, this requires producing documentation of organizational structures (approval hierarchies, quality assurance roles) that cannot be realized at the office's scale. Circular guidance attributing this to §4 rather than §5 creates normative confusion about whether this is a §4 (forsvarlighet) compliance task or a §5 (internkontroll) compliance task, leaving caseworkers without clear procedural grounding. **KILL LIST CLASSIFICATION:** Category C — Clarification. The obligation is substantively valid but is misattributed to §4 when its proper home is §5. The circular should make explicit that organizational internkontroll requirements derive from §5, and should clarify that §4 compliance does not independently create organizational architecture obligations separate from §5. This removes shadow binding created by the §4/§5 conflation. **TRANSACTION COST CATEGORY:** Reporting Overhead; Structural Disproportionality

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REQUIREMENT ID: §4-REQ-02 **PROVISION TEXT:** What constitutes forsvarlige tjenester must be assessed against professional development, changing values, and what is considered good practice in the field. **SOURCE INSTRUMENT:** Circular — Rundskriv til sosialtjenesteloven §4, section 2.4.1 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — No legal gap identified (PROC-REQ-4.2). Correctly operationalizes the dynamic standard of forsvarlighetskravet under §4. **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO — Anchor Document contains no finding connecting this normative definition to volume-sensitivity. This is a standard-setting provision, not an operational procedure. **PURPOSE:** USER NEED — Defines the substantive inputs to the legal threshold for adequate services. Directly serves the quality and legal security of the user's case assessment. **BURDEN DESCRIPTION:** No transaction

cost burden identified. This requirement defines the evaluative standard itself; it does not add an administrative layer on top of service delivery. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §4-REQ-03 **PROVISION TEXT:** Conditions must therefore be facilitated for quality work ("kvalitetsarbeid") in the daily operations of the Nav office. **SOURCE INSTRUMENT:** Circular — Rundskriv til sosialtjenesteloven §4, section 2.4.1 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — Process Inflation Findings (PROC-REQ-4.3, Step 3): the circular converts the open outcome standard of §4 into a mandatory named organizational process ("kvalitetsarbeid"), fixing an organizational method the law left open. §4 requires forsvarlige tjenester as an outcome; it does not mandate a specific named quality-work process as the means. **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** YES — Anchor Document, Cluster 2 (Internal Control Apparatus Stack) and §19 section: "quality management infrastructure is among the heaviest cumulative burdens on small offices." PROC-REQ-4.3 presupposes dedicated quality assurance capacity; in small offices this demand falls entirely on the Nav leader alongside frontline duties. The Anchor Document confirms this pattern across Nesna, Giske, Averøy, and others. **PURPOSE:** INTERNAL CONTROL — "kvalitetsarbeid i den daglige driften" is a named institutional management process directed at maintaining administrative quality standards. Primary beneficiary is the governance/audit system; user benefit is indirect and structural. **BURDEN DESCRIPTION:** Nav leader must maintain an ongoing, identifiable quality-work process — schedulable, documentable as such, and distinct from ordinary management. This requires administrative overhead in scheduling, conducting, and recording quality activities as a named process category. In small offices, as the Anchor Document confirms, this capacity does not exist independently of frontline work. Since PROC-REQ-4.3 lacks full statutory authority (§4 does not mandate this named process), caseworkers must comply with an organizational process obligation that the statute does not require in this form, and whose circular basis conflates an outcome standard (§4) with a governance method (§5). **KILL LIST CLASSIFICATION:** Category B — Status Change. The imperative "Det må therefore legges til rette for kvalitetsarbeid" uses mandatory language ("må") for a named organizational process without sufficient statutory authority to support this register. The requirement should be reformulated as permissive guidance — that it is good practice to facilitate kvalitetsarbeid, not a binding procedural obligation derived from §4 — to restore local discretion over how quality work is organized. The underlying goal (quality improvement) is legitimate; the mandatory named-process format is not. **TRANSACTION COST CATEGORY:** Reporting Overhead; Structural Disproportionality

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REQUIREMENT ID: §4-REQ-04 **PROVISION TEXT:** The Nav office must ensure that everyone who approaches has their interests protected, including that Nav advisors have sufficient knowledge and competence to provide information and guidance, identify needs, and assist with applications. **SOURCE INSTRUMENT:** Circular — Rundskriv til sosialtjenesteloven §4, section 2.4.1 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — No legal gap identified (PROC-REQ-4.4). Correctly operationalizes the accessibility and responsiveness threshold of §4. **DOUBLE AUTHORITY GAP:** NO

CATEGORY ERROR: NO **SCALE FLAG:** NO — Anchor Document does not flag this user-access standard as volume-sensitive in its own right. The competence element ([K] mechanism) is flagged in other domains but not as a distinct §4 duty here. **PURPOSE:** USER NEED — Directly defines the substantive legal threshold for accessibility; the requirement exists to protect the user's ability to receive meaningful assistance. **BURDEN DESCRIPTION:** No transaction cost burden identified. This is a service quality standard, not a documentation or procedural overlay. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §4-REQ-05 **PROVISION TEXT:** The Nav office must ensure applications are processed without undue delay ("uten ugrunnet opphold") and address the need for help while the application is being processed. **SOURCE INSTRUMENT:** Circular — Rundskriv til sosialtjenesteloven §4, section 2.4.1 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — Process Inflation Findings (PROC-REQ-4.5, Step 3): the "uten ugrunnet opphold" element derives primarily from forvaltningsloven §11a, not §4; grounding it in §4 creates an ambiguous legal linkage. The "ivareta hjelpebehovet" element has a clearer §4 basis. **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO — but the timeline element is legally misattributed to §4 rather than forvaltningsloven. This constitutes a source-attribution error that belongs in the forvaltningsloven domain rather than the Social Services Act domain. Flagged as a domain-adjacent attribution error, not a full category error. **SCALE FLAG:** PARTIAL — Anchor Document ([P] Procedural Continuity mechanism; §17 formalization pipeline): the formal processing pipeline presupposed by timeline requirements becomes a compliance burden in small offices where processing is immediate and a queuing framework is operationally unnecessary. The pattern of services delivered immediately but sanctioned for pipeline non-compliance (Tinn, Hjelmeland, Årdal) is structurally relevant to PROC-REQ-4.5's timeline element. **PURPOSE:** MIXED — "uten ugrunnet opphold" serves both user fairness (USER NEED, secondary) and administrative legality/audit compliance (INTERNAL CONTROL, primary driver of the timeline documentation obligation); "ivareta hjelpebehovet" directly serves the user's substantive need (USER NEED, primary). **BURDEN DESCRIPTION:** Dual documentation obligation: (1) processing timeline must be documented and defensible; (2) interim need assessments must be separately recorded. The timeline documentation primarily serves legal defensibility in appeal situations, not direct case improvement. The misattribution to §4 means caseworkers face a forvaltningsloven obligation framed as a §4 duty, without the circular clarifying the procedural requirements of forvaltningsloven §11a as such. **KILL LIST CLASSIFICATION:** Category C — Clarification. The room for maneuver needs to be made explicit: the "uten ugrunnet opphold" timeline element should be explicitly attributed to forvaltningsloven rather than §4 forsvarlighetskravet to prevent caseworkers from treating a forvaltningsrettslig procedural timeline as a social services quality standard. The dual-source nature of this requirement should be articulated clearly. **TRANSACTION COST CATEGORY:** Documentation Inflation; Procedural Duplication (the timeline and the interim need assessment generate two separate documentary obligations out of what is functionally a single processing event)

REQUIREMENT ID: §4-REQ-06 **PROVISION TEXT:** What constitutes a forsvarlig service level cannot be determined on a general basis; it must be assessed concretely and individually based on each person's needs in each individual case. **SOURCE INSTRUMENT:** Circular — Rundskriv til sosialtjenesteloven §4, section 2.4.1 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — No legal gap identified (PROC-REQ-4.6). Correctly operationalizes the individualized assessment duty under §4 and administrative law. **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED — Directly prohibits general determinations and mandates concrete case-specific assessment; exists to protect the user's legal security and ensure appropriate individual treatment. **BURDEN DESCRIPTION:** No transaction cost burden identified. This is the operative content of the assessment standard itself; it does not impose an additional administrative layer. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §4-REQ-07 **PROVISION TEXT:** Assistance must be based on an individual assessment aimed at strengthening the individual's conditions for self-sufficiency and participation in working life. **SOURCE INSTRUMENT:** Circular — Rundskriv til sosialtjenesteloven §4, section 2.4.1 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — No legal gap identified (PROC-REQ-4.7). Directly restates duties from the purpose clause (§1) and §4. **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED — Directly defines the substantive goal orientation of the individual assessment; the requirement exists to ensure assistance serves the user's long-term interests. **BURDEN DESCRIPTION:** No transaction cost burden identified. This is the purposive content of the assessment standard. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §4-REQ-08 **PROVISION TEXT:** If the service recipient has children, the children's needs must be assessed and protected separately ("særskilt"). **SOURCE INSTRUMENT:** Circular — Rundskriv til sosialtjenesteloven §4, section 2.4.1 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — Process Inflation Findings (PROC-REQ-4.8, Step 3): the true legal basis lies in the Constitution (Grunnloven §104), not §4 of the Social Services Act. The mandatory condition-triggered separate assessment has been derived from the constitutional frame and mapped onto §4 without the circular making the constitutional source explicit. **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO in domain terms. The obligation is correctly directed at social services workers. However, the legal source is constitutional/international law (Grunnloven §104, CRC) rather than the Social Services Act — this is a source-attribution issue that creates a partial misrepresentation of the legal authority. **SCALE FLAG:** YES — Anchor Document, Cluster 3 (Child Perspective Documentation), confirmed in 25+ findings. The "særskilt" documentation requirement applies to a substantial proportion of financial assistance cases and demands documentary differentiation that generalist caseworkers in small offices consistently fail to produce despite substantive competence (the Anchor Document's recurrent finding: caseworkers knew more than journals reflected). **PURPOSE:** MIXED — USER NEED

(primary): protecting children's interests in cases involving their parent's application is a direct substantive child welfare obligation. INTERNAL CONTROL (secondary): the "særskilt" formulation creates a documentary differentiation obligation that serves audit/verification functions — the separate assessment must be visible and reviewable — and this element generates the compliance burden. **BURDEN DESCRIPTION:** In every case involving a family, an additional documentary step is triggered: children's needs must be separately assessed and the assessment must be documentarily distinct from the overall case assessment. This is a documentation overhead imposed on the family-case subset of the social assistance caseload. The circular does not make the constitutional basis (Grunnloven §104) explicit, meaning caseworkers encounter this as a §4 obligation without understanding its constitutional weight, which may paradoxically reduce rather than increase its practical priority. **KILL LIST CLASSIFICATION:** Category C — Clarification. The room for maneuver needs to be made explicit in two respects: (1) the circular should identify Grunnloven §104 and the CRC as the true legal basis, giving the obligation its proper constitutional weight; (2) the circular should distinguish the substantive duty to protect children's interests (which is constitutionally absolute) from the specific documentary form that protection must take (which may permit more flexible operationalization than "særskilt" implies). Clarifying the documentary requirements separately from the substantive obligation would reduce the shadow binding created by the "særskilt" formulation. **TRANSACTION COST CATEGORY:** Documentation Inflation; Combined Burden (interacts with PROC-REQ-4.9 through 4.11 to create a layered child-assessment documentation stack)

REQUIREMENT ID: §4-REQ-09 **PROVISION TEXT:** The Directorate encourages municipalities to work on clarifying how barnets beste assessments are to be used in case processing at Nav offices. **SOURCE INSTRUMENT:** Kommunebrev — directorial communication ("Direktoratet oppfordrer") **CIRCULAR AUTHORITY:** ABSENT — This requirement has no textual presence in the §4 circular paragraph. It operates from a Kommunebrev. Consequence: the requirement imposes an institutional documentation obligation without any foundation in the circular that governs Nav office casework. Caseworkers facing this obligation have no circular reference point for how it relates to §4's overall framework. **LEGAL AUTHORITY:** PARTIAL — Ambiguously linked to §4; actual grounding derives from the UN Convention on the Rights of the Child (PROC-REQ-4.9, Step 3). The Kommunebrev instrument does not itself have binding statutory authority. **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT + statutory authority PARTIAL **CATEGORY ERROR:** NO in domain terms, but the legal source is international law / constitutional law rather than the Social Services Act, which means the Kommunebrev is channeling a constitutional/international obligation through a sub-legal directorial instrument without statutory mediation. **SCALE FLAG:** YES — Anchor Document (Cluster 3, child perspective): producing institutional procedure documentation for barnets beste assessments presupposes dedicated specialist capacity or quality assurance roles. In small offices with no designated child welfare lead, this obligation falls on the Nav leader and consumes management capacity already fully absorbed by frontline duties. Scale burden falls entirely outside the circular framework given the double authority gap. **PURPOSE:** INTERNAL CONTROL — "tydeliggjøre hvordan barnets beste-vurderinger skal brukes" is an institutional process clarification task. The product is a management document (a policy or procedure). The primary audience is the supervisory system and the municipal

administration, not the individual user. **BURDEN DESCRIPTION:** The municipality must produce institutional documentation clarifying how barnets beste assessments are integrated into casework. This is a management-level drafting task with no direct connection to any individual user's case outcome. It requires coordinating multiple organizational actors (Nav leader, municipal management, potentially legal advisors) to produce a written instrument. This obligation floats entirely outside the circular framework: caseworkers and Nav leaders are required to comply with a Kommunebrev directive that the governing circular does not mention, integrate, or provide any guidance for executing within the §4 framework. **KILL LIST CLASSIFICATION:** Category B — Status Change. "Oppfordrer" (encourages) is already advisory in register, but the institutional framing creates shadow binding: once a directorial Kommunebrev identifies a specific task, municipalities treat it as practically mandatory. The requirement should be explicitly reformulated as permissive guidance — one recommended approach among several — to prevent the Kommunebrev from functioning as a disguised binding requirement without circular or statutory authority. **TRANSACTION COST CATEGORY:** Reporting Overhead; Documentation Inflation

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REQUIREMENT ID: §4-REQ-10 **PROVISION TEXT:** If you answer yes to at least one of these questions, children are affected and you must assess what is in the best interest of the child in the individual case (trigger-question checklist methodology). **SOURCE INSTRUMENT:** Veileder — checklist-question methodology for barnets beste activation **CIRCULAR AUTHORITY:** ABSENT — The trigger-question checklist has no textual presence in the circular paragraph. Consequence: a named assessment methodology is being imposed on caseworkers from a veileder without any circular framework governing how this methodology relates to the §4 forsvarlighetskravet or the "særskilt" formulation in the circular itself. **LEGAL AUTHORITY:** PARTIAL — The Process Inflation Findings (PROC-REQ-4.10, Step 3) flag that the veileder converts §4's open assessment authority into a fixed-condition-triggered duty based ambiguously on §4 rather than the Constitution (Grunnloven §104, CRC). The checklist methodology itself has no statutory basis. **DOUBLE AUTHORITY GAP:** YES **CATEGORY ERROR:** NO in domain terms. **SCALE FLAG:** YES — Anchor Document (Cluster 3, [K] and [D] mechanisms): checklists and structured trigger methodologies generate compliance failures when encounter frequency is insufficient to make the procedure habitual. Small offices face this pattern across child welfare assessment domains. Scale burden falls outside circular framework given double authority gap. **PURPOSE:** MIXED — USER NEED (primary): identifying which cases require a child welfare assessment protects children from being overlooked in generalist processing. INTERNAL CONTROL (secondary): the checklist format and mandatory activation logic primarily serves supervisory verification — an auditor can check whether the trigger was executed — rather than improving the substance of the assessment itself. **BURDEN DESCRIPTION:** Caseworkers must execute a named checklist procedure in every case, document whether the trigger was activated, and then execute the barnets beste assessment if activated. This adds a named procedural step to case processing with its own documentary trace requirement. The Anchor Document confirms that such named trigger procedures generate compliance failures in small offices where encounter frequency is too low to make the procedure habitual — caseworkers know children are affected but fail to execute the formal checklist step. Since this requirement lacks circular authority (double authority gap), caseworkers must execute a veileder methodology that the governing circular

does not describe, without any guidance on how it connects to the §4 framework. **KILL LIST CLASSIFICATION:** Category B — Status Change. The mandatory formulation ("du må vurdere") applied to a specific named trigger methodology in a veileder constitutes shadow binding of a professional assessment judgment. The requirement should be reformulated as permissive guidance — the checklist is a recommended tool for structuring assessment, not a binding procedure. This would restore caseworker professional discretion over whether and how to structure the assessment, while making the underlying constitutional obligation (Grunnloven §104) explicit as the source of the substantive duty. **TRANSACTION COST CATEGORY:** Documentation Inflation; Procedural Duplication

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REQUIREMENT ID: §4-REQ-11 **PROVISION TEXT:** A barnets beste assessment involves: evaluating what is in the child's best interest; weighing this against other considerations; and demonstrating the content of the assessment ("vurdere… vekte… vise"). **SOURCE INSTRUMENT:** Veileder — three-step sequential methodology for barnets beste documentation **CIRCULAR AUTHORITY:** ABSENT — The three-step sequential methodology has no textual presence in the circular. Consequence: a fixed sequential documentation format is being imposed from a veileder without any integration into the circular framework. Caseworkers must comply with a structured assessment format that the primary governing circular does not endorse, reference, or provide context for. **LEGAL AUTHORITY:** NO — The Process Inflation Findings (PROC-REQ-4.11, Step 3) identify this explicitly as shadow binding: "a fixed three-step sequential methodology lacking authorization in §4." §4 creates no sequential assessment obligation. The veileder has manufactured a procedural methodology with no statutory basis. **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT + statutory authority NO (most significant double authority gap in the §4 audit) **CATEGORY ERROR:** NO in domain terms. **SCALE FLAG:** YES — Anchor Document (Cluster 3, [D] mechanism; 25+ findings): the requirement to demonstrate the three assessment steps in writing is the primary driver of child welfare compliance failures. The "vise" step is explicitly the documentary burden: caseworkers who substantively evaluate and weigh children's interests in conversation fail to produce the written three-part demonstration required. This is the most extensively confirmed volume-sensitive documentation requirement in the child perspective cluster. **PURPOSE:** INTERNAL CONTROL — The "vise" (demonstrate) step makes this primarily a documentation/audit function. A caseworker who evaluates and weighs correctly without formally demonstrating the three phases in writing is substantively compliant with the constitutional obligation but formally non-compliant with the veileder. The primary purpose of the three-step format is to produce a documentary artifact reviewable by supervisors, not to improve the assessment itself. **BURDEN DESCRIPTION:** Every triggered barnets beste assessment must be structured and written in three identifiable steps, with each step documentarily distinct. This requires converting an internal professional judgment — which may be conducted holistically and intuitively — into a sequential formal narrative conforming to the veileder's structure. Transaction cost: structured documentary production of a formal three-part assessment in every qualifying case, primarily serving the supervisory audit function. This is the most significant instance of a purely sub-legal obligation generating disproportionate documentation burden in the §4 framework: no statutory authority, no circular authority, and extensive Anchor Document confirmation of its impact. Caseworkers are required to follow a veileder methodology that the governing circular does not mention —

compliance with an obligation entirely invisible from the primary normative instrument. **KILL LIST CLASSIFICATION:** Category A — Removal. This requirement: has no circular authority; has no statutory authority (double authority gap with NO legal authority); operates from a veileder without binding force; and primarily serves the audit/documentation function with no direct bearing on the user's case outcome. It is a paradigm case for removal from the binding normative framework. The underlying constitutional obligation to assess barnets beste (Grunnloven §104) is fully preserved by removing the three-step veileder methodology; the substantive duty survives; only the shadow-binding procedural format is removed. The requirement should be reclassified as non-binding methodological guidance (e.g., "one approach that can be useful is to structure the assessment by…"). **TRANSACTION COST CATEGORY:** Documentation Inflation; Combined Burden

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REQUIREMENT ID: §4-REQ-12 **PROVISION TEXT:** The Nav office must be active in the mapping process ("kartleggingsprosessen") to uncover what the user needs. **SOURCE INSTRUMENT:** Veileder — behavioral standard for mapping phase conduct **CIRCULAR AUTHORITY:** ABSENT — The named "kartleggingsprosess" with an attached behavioral standard ("aktive") is not present in the circular paragraph. Consequence: a specific procedural phase with a conduct requirement is imposed without circular foundation. **LEGAL AUTHORITY:** PARTIAL — §4 creates a duty to ensure adequate assessment but does not mandate specific active conduct in a designated named phase. The "kartleggingsprosess" as a defined phase and the "aktive" behavioral standard are veileder additions to the open statutory duty (PROC-REQ-4.12, Step 3). **DOUBLE AUTHORITY GAP:** YES **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — Anchor Document ([D] and [P] mechanisms; §17 formalization pipeline): named procedural phases create compliance burdens when case volume is insufficient to make them habitual. Connection is structural and partial; the Anchor Document does not specifically flag the kartleggingsprosess as a §4 volume driver, but the pattern of named process obligations creating overhead in small offices is extensively confirmed. **PURPOSE:** MIXED — USER NEED (primary): active mapping improves the quality of needs identification and directly serves the user's interest in receiving appropriate help. INTERNAL CONTROL (secondary): the named phase and behavioral standard ("aktive") serve procedural verification — the kartleggingsprosess must be documentarily visible as a distinct step to satisfy supervisory review. **BURDEN DESCRIPTION:** Caseworkers must conduct and document a named "kartleggingsprosess" phase with demonstrable active participation. The mapping must not merely occur but be identifiable in the case record as a distinct phase. This adds a documentation step to what would otherwise be an undifferentiated process of gathering information before assessment. Since this requirement lacks circular authority (double authority gap), caseworkers must follow a veileder behavioral standard without the governing circular providing any framework for how the kartleggingsprosess connects to the §4 assessment obligation. **KILL LIST CLASSIFICATION:** Category B — Status Change. The imperative "NAV-kontoret må være aktive" imposes a specific behavioral standard in a named phase without statutory authority, constituting shadow binding of professional conduct. The requirement should be reformulated as permissive guidance: active mapping is a recommended good practice approach, not a binding behavioral obligation derived from §4. The underlying duty (adequate needs investigation before decisions) is fully preserved by §4 and

forvaltningsloven; only the specific behavioral/phase formulation needs to be declassified. **TRANSACTION COST CATEGORY:** Documentation Inflation; Procedural Duplication

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REQUIREMENT ID: §4-REQ-13 **PROVISION TEXT:** The main principle for processing applications is that individual assessments must be based on information from the mapping phase ("kartleggingen"). **SOURCE INSTRUMENT:** Veileder — framing of kartleggingsprosess outputs as the mandatory basis for individual assessments **CIRCULAR AUTHORITY:** ABSENT — The framing of "kartleggingen" as a defined prior phase whose outputs bind the subsequent assessment is not present in the circular paragraph. Consequence: the circular does not address how the veileder's kartleggingsprosess framing relates to the §4 assessment standard. **LEGAL AUTHORITY:** YES — No legal gap identified (PROC-REQ-4.13). The underlying obligation — that individual assessments must be grounded in adequate fact-finding — correctly operationalizes the utredningsplikt under forvaltningsloven and §4. The substantive requirement is sound. **DOUBLE AUTHORITY GAP:** NO (circular authority ABSENT but statutory authority YES — the one case in this audit where an absent circular authority is saved by sound statutory grounding) **CATEGORY ERROR:** NO **SCALE FLAG:** NO — The underlying fact-finding obligation does not vary with scale in a way that generates disproportionate burden. The kartleggingsprosess framing adds procedural overhead, but the Anchor Document does not flag the evidence-based assessment precondition as a scale-sensitive driver in its own right. **PURPOSE:** USER NEED — The requirement that decisions be grounded in the facts of the individual case directly serves the user's interest in receiving an assessment based on their actual situation. The kartleggingsprosess framing is a veileder construct, but the underlying principle it embodies is user-protective. **BURDEN DESCRIPTION:** No transaction cost burden identified beyond what the statutory utredningsplikt already requires. The kartleggingsprosess framing adds terminological specificity but the substantive obligation (evidence-based individual assessment) is legally well-grounded and proportionate. The absent circular authority does not create disproportionate burden here because the statutory authority is sufficient and the obligation does not exceed what the statute independently requires. **KILL LIST CLASSIFICATION:** No Kill List Action. However, the Directorate should note that the veileder's kartleggingsprosess framing, while substantively sound, operates without circular authority and creates terminological overlap with PROC-REQ-4.12 (which has a double authority gap). The two requirements should be reviewed together to ensure the sound PROC-REQ-4.13 obligation is not entangled in the shadow-binding effects of the unsupported PROC-REQ-4.12 behavioral standard. **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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CLOSING COMPARATIVE NOTE

Total requirements identified starting from the Process Inflation Findings: 13

Requirements that would have been visible starting from the circular paragraph alone: 8 (PROC-REQ-4.1 through 4.8). The circular alone would have produced a structurally incomplete audit missing 38% of the operative compliance burden.

Requirements constituting double authority gaps: 4 — §4-REQ-09 (PROC-REQ-4.9), §4-REQ-10 (PROC-REQ-4.10), §4-REQ-11 (PROC-REQ-4.11), §4-REQ-12 (PROC-REQ-4.12). All four derive from sub-legal instruments (1 Kommunebrev, 3 veiledere) and operate entirely outside the circular framework. Three of the four primarily serve internal control or documentation audit functions rather than directly serving users.

Requirements deriving from a different legal domain (category errors): 0 full category errors. However, two requirements (§4-REQ-05 timeline element and §4-REQ-08 constitutional basis) involve substantive source-attribution errors — they are legally grounded in forvaltningsloven and Grunnloven/CRC respectively, but attributed to §4 without this being made explicit in the circular. These are analytically significant though not classified as full category errors under the framework's definition.

Total Kill List breakdown:

- **Category A — Removal:** 1 requirement — §4-REQ-11 (three-step veileder methodology: NO circular authority, NO statutory authority, primarily serves audit function, double authority gap, extensively confirmed as the dominant documentation burden in child welfare compliance). This is the strongest removal candidate in the §4 audit.
- **Category B — Status Change:** 4 requirements — §4-REQ-03 (kvalitetsarbeid: imperative language without statutory authorization for named process), §4-REQ-09 (Kommunebrev barnets beste: shadow binding from non-binding instrument), §4-REQ-10 (trigger-question checklist: mandatory activation format without veileder authority), §4-REQ-12 (aktive i kartleggingsprosessen: behavioral standard without circular authority). All four use or effectively operate as imperative formulations without binding authority; reformulation to permissive language would restore local discretion.
- **Category C — Clarification:** 3 requirements — §4-REQ-01 (§4/§5 cross-provision conflation must be clarified), §4-REQ-05 (forvaltningsloven source of timeline element must be identified), §4-REQ-08 (constitutional basis of child welfare duty must be made explicit, and documentary differentiation standard must be distinguished from substantive obligation). Clarification would reduce shadow binding and misattribution effects.
- **No Kill List Action:** 5 requirements — §4-REQ-02, §4-REQ-04, §4-REQ-06, §4-REQ-07, §4-REQ-13.

Primary transaction cost categories by frequency:

1. **Documentation Inflation** — appears in 6 requirements (§4-REQ-01, §4-REQ-05, §4-REQ-08, §4-REQ-09, §4-REQ-10, §4-REQ-11, §4-REQ-12): the dominant transaction cost mechanism in §4, consistent with the Anchor Document's finding that [D] Documentation Apparatus is the empirically dominant volume driver across the social services system. The §4 paragraph, through its veileder and Kommunebrev extensions, generates a layered child-welfare documentation stack (§4-REQ-08 through §4-REQ-12) that each individually imposes documentary overhead and collectively constitutes a cumulative compliance architecture calibrated for specialist-resourced offices.

2. **Reporting Overhead** — appears in 3 requirements (§4-REQ-01, §4-REQ-03, §4-REQ-09): organizational governance documentation directed at the supervisory system rather than service quality.
3. **Structural Disproportionality** — appears in 2 requirements (§4-REQ-01, §4-REQ-03): obligations presupposing organizational capacity that small offices structurally cannot achieve.
4. **Procedural Duplication** — appears in 2 requirements (§4-REQ-05, §4-REQ-10): same underlying case event generating two separate procedural traces.
5. **Combined Burden** — appears in 2 requirements (§4-REQ-08, §4-REQ-11): requirements that interact with other requirements in the child-welfare assessment stack to produce cumulative overhead exceeding any individual element.

Synthesis observation for main report: The §4 paragraph presents as a fundamentally sound outcome standard — forsvarlighetskravet as a dynamic legal norm serving user quality and legal security. Eight of its thirteen operational requirements either have no transaction cost or are directly user-protective with sound legal authority (the "No Kill List Action" group). The problem does not lie in §4's core normative content. It lies in the sub-legal extensions: a Kommunebrev and three veileder provisions that collectively attach a five-component child welfare assessment documentation stack to the circular without circular authority, without statutory authority (in three of five cases), and without any guidance from the circular on how these instruments relate to the §4 forsvarlighetskravet. The removal of §4-REQ-11 (the three-step veileder methodology) and the reformulation of §4-REQ-09, 4-REQ-10, and §4-REQ-12 from mandatory to permissive register would eliminate the double authority gap cluster entirely, without diminishing the constitutional obligation to protect children's interests in any way. The single highest-impact intervention in the §4 Kill List is therefore Category A removal of §4-REQ-11 — the one requirement that combines no circular authority, no statutory authority, primary audit-serving purpose, and the most extensively confirmed documentation burden in the Anchor Document's child welfare findings.

SLUDGE AUDIT — PROCESS INFLATION FINDINGS § 5

Reference Document: Process Inflation Findings, § 5 (Document 2) **Context Document:** Rundskriv R-35, § 5 (Document 4) **Anchor Document:** Volume Driver Findings (Document 3) **Session Reference Prefix:** PI-5

PRELIMINARY METHODOLOGICAL NOTE: STRUCTURAL DEVIATION FROM PRIOR AUDIT

Before Step 1 begins, a structural observation is required.

When the Rundskriv (Document 4) served as the Reference Document in the prior audit, the identification of requirements was bounded by the text of the circular paragraph itself. This produced eight requirements — all textually present within R-35, § 5 and its immediate commentary.

When the Process Inflation Findings (Document 2) serve as the Reference Document, the identification of requirements is bounded not by a single circular paragraph but by the full normative web that has accumulated around sosialtjenesteloven § 5 across multiple instruments: the circular itself, a Kommunebrev, two veiledere, a standard document, and a guidance document attached to that standard. The Process Inflation Findings enumerate nineteen requirements from this web.

The analytical significance is immediate: **eleven of the nineteen requirements identified below have no textual presence in R-35, § 5 at all.** They enter the operative normative field from outside the circular. A circular-based audit cannot see them. The sludge they represent is structurally invisible from within the circular.

This deviation is not a methodological artifact. It is the central analytical finding of the comparison the user is conducting.

STEP 1 — IDENTIFICATION OF ALL REQUIREMENTS

All nineteen requirements are enumerated from the Process Inflation Findings, in the order they appear. Each carries its original source reference and classification type.

REQ PI-5.1

- **Exact obligation:** *Kommunen skal ha internkontroll etter reglene i kommuneloven § 25-1.*
- **Source:** R-35, § 5 / PROC-REQ-5.1
- **Type:** EXPLICIT

REQ PI-5.2

- **Exact obligation:** *Internkontrollen skal være systematisk, risikobasert og tilpasset de konkrete forholdene og behovene...*
- **Source:** R-35, § 5 / PROC-REQ-5.2
- **Type:** EXPLICIT

REQ PI-5.3

- **Exact obligation:** *utarbeide en beskrivelse av virksomhetens hovedoppgaver, mål og organisering*
- **Source:** R-35, § 5 / PROC-REQ-5.3 = DOC-REQ-5.1
- **Type:** EXPLICIT

REQ PI-5.4

- **Exact obligation:** *ha nødvendige rutiner og prosedyrer*
- **Source:** R-35, § 5 / PROC-REQ-5.4
- **Type:** EXPLICIT

REQ PI-5.5

- **Exact obligation:** *avdekke og følge opp avvik og risiko for avvik*
- **Source:** R-35, § 5 / PROC-REQ-5.5
- **Type:** EXPLICIT

REQ PI-5.6

- **Exact obligation:** *dokumentere internkontrollen i den formen og det omfanget som er nødvendig*
- **Source:** R-35, § 5 / PROC-REQ-5.6 = DOC-REQ-5.2
- **Type:** EXPLICIT

REQ PI-5.7

- **Exact obligation:** *evaluere og ved behov forbedre skriftlige prosedyrer og andre tiltak for internkontroll*
- **Source:** R-35, § 5 / PROC-REQ-5.7 = DOC-REQ-5.3
- **Type:** EXPLICIT

REQ PI-5.8

- **Exact obligation:** *Arbeids- og velferdsdirektoratet anbefaler kommunene å gjennomgå internkontrollsystemet for de sosiale tjenestene.*
- **Source:** Kommunebrev 2025 / PROC-REQ-5.8
- **Type:** EXPLICIT — but note the modal register: *anbefaler* (recommends), not *skal* (shall). The normative force is explicitly advisory, yet it appears in the enumeration as an operative requirement within the Process Inflation Findings.

REQ PI-5.9

- **Exact obligation:** *Det er kommunens ansvar å sørge for nødvendig opplæring av sitt personell i arbeids- og velferdsforvaltningen.*
- **Source:** Kommunebrev 2025 / PROC-REQ-5.9
- **Type:** EXPLICIT

REQ PI-5.10

- **Exact obligation:** *Ivaretar våre internkontrollrutiner at vi vurderer om barn er berørt av de handlingene vi gjør på vårt område?*
- **Source:** Barnets beste – veileder / PROC-REQ-5.10
- **Type:** IMPLICIT — the provision is framed as an audit question embedded in guidance material; it functions operationally as a requirement that child impact screening be incorporated as mandatory content within internal control routines.

REQ PI-5.11

- **Exact obligation:** *NAV-leder har ansvar for at hensiktsmessige systemer for risikostyring og internkontroll er etablert og etterleves.*
- **Source:** Veileder til partnerskapsavtalen / PROC-REQ-5.11
- **Type:** EXPLICIT

REQ PI-5.12

- **Exact obligation:** *Det skal være etablerte rutiner og systemer for å melde uønskede hendelser knyttet til vold, trusler og trakassering...*
- **Source:** Veileder – trygge brukermøter i NAV / PROC-REQ-5.12
- **Type:** EXPLICIT

REQ PI-5.13

- **Exact obligation:** *Når avvikene behandles er det viktig å finne ut hva som er skjedd, hvorfor det skjedde, rette opp eventuelle feil...*
- **Source:** Veileder – trygge brukermøter i NAV / PROC-REQ-5.13
- **Type:** EXPLICIT — prescribes a fixed investigative sequence (fact-finding, cause analysis, error correction) for deviation handling.

REQ PI-5.14

- **Exact obligation:** *For at andre skal kunne se hvilke vurderinger som er gjort og ha mulighet for å etterprøve vurderingene må barnets beste-vurderingene dokumenteres.*
- **Source:** Barnets beste – veileder / DOC-REQ-5.4
- **Type:** EXPLICIT

REQ PI-5.15

- **Exact obligation:** *Arbeidsgiver skal kartlegge og dokumentere risiko ved arbeidet som, hver for seg eller samlet, kan gi risiko for vold og trusler i alle former for brukermøter.*
- **Source:** Standard for trygge brukermøter i NAV / DOC-REQ-5.5
- **Type:** EXPLICIT — note "alle former for brukermøter": the mapping obligation is undifferentiated and total, covering every type of user meeting without threshold or proportionality qualifier.

REQ PI-5.16

- **Exact obligation:** *Alle etablerte sikkerhetstiltak skal dokumenteres, og gjøres tilgjengelig for alle ansatte ved enheten.*
- **Source:** Standard for trygge brukermøter i NAV / DOC-REQ-5.6
- **Type:** EXPLICIT

REQ PI-5.17

- **Exact obligation:** *Tiltak som igangsettes etter en gjennomført risikovurdering skal dokumenteres i gjeldende fagsystemer*
- **Source:** Veileder til standard for trygge brukermøter i NAV / DOC-REQ-5.7
- **Type:** EXPLICIT — specifies the technical medium of documentation (fagsystemer), not merely the obligation to document.

REQ PI-5.18

- **Exact obligation:** *Det må også gjøres en vurdering og dokumenteres hva som er «restrisikoen» etter iverksatte tiltak.*
- **Source:** Veileder til standard for trygge brukermøter i NAV / DOC-REQ-5.8
- **Type:** EXPLICIT

REQ PI-5.19

- **Exact obligation:** *Dokumentasjon over innmeldte HMS-avvik og håndteringen av disse (jf. HMS-rutine 5)*
- **Source:** Veileder til standard for trygge brukermøter i NAV / DOC-REQ-5.9
- **Type:** EXPLICIT — framed as a documentation category that must exist as a record-keeping output.

STEP 1 CLOSURE CONFIRMATION: Nineteen requirements identified. All are carried forward to Steps 2–6 without omission. Note for the record: requirements PI-5.1 through PI-5.7 are the seven requirements that also appear in R-35, § 5 and were therefore visible in the prior audit. Requirements PI-5.8 through PI-5.19 are the twelve requirements that are invisible from within the circular and become visible only through the Process Inflation lens.

STEP 2 — LEGAL AUTHORITY CHECK

The Context Document for this audit is the Rundskriv R-35, § 5 (Document 4). The question for each requirement is therefore bi-directional: (a) does the circular authorize or contain this requirement, and (b) has the Process Inflation Findings flagged this requirement as lacking direct legal authority in the Social Services Act?

This bi-directional framing is the key methodological contribution of the inverted starting document. Requirements PI-5.1 through PI-5.7 can be checked against the circular as their source. Requirements PI-5.8 through PI-5.19 must be assessed not only against the Social Services Act but also against the circular, which does not contain them — producing a second-order authority gap: no statutory authority and no circular authority.

REQ PI-5.1 Finding: NO gap — statutory restatement

The Process Inflation Findings classify this as [SUBSTANTIVE LEGAL OBLIGATION]: a verbatim restatement of the foundational statutory provision establishing the unconditional duty to have internal control. The circular confirms and restates this provision directly. There is full alignment between the Process Inflation finding and the circular text.

Circular authority: PRESENT. Statutory authority: DIRECT.

REQ PI-5.2 Finding: PARTIAL

The Process Inflation Findings state (Krav 2 av 19): *"§ 5 of the Social Services Act contains no qualitative criteria for what internal control must be; authority relies entirely on an unverified reference chain to kommuneloven § 25-1."* The circular contains this requirement (Section 2.5.1, introductory paragraph), so circular authority is present. However, the circular itself is only a reference provision — it derives its authority for these criteria from kommuneloven § 25-1, which is cited but whose operative content is unverified. The requirement has circular presence but contested statutory depth.

Circular authority: PRESENT. Statutory authority: PARTIAL (unverified reference chain).

REQ PI-5.3 Finding: PARTIAL

The Process Inflation Findings state (Krav 3 av 19): *"§ 5 does not enumerate this specific descriptive document as a required component; it derives from an unverified reference to kommuneloven § 25-1."* The circular contains this requirement as bullet 1 in Section 2.5.1. Circular authority is present, but the circular itself does not constitute the legal source — it transmits a requirement from kommuneloven whose content cannot be confirmed from available documents.

Circular authority: PRESENT. Statutory authority: PARTIAL (unverified reference chain).

REQ PI-5.4 Finding: PARTIAL

The Process Inflation Findings state (Krav 4 av 19): *"Authority depends on an unverified reference chain to kommuneloven § 25-1, which cannot be confirmed from the available documents."* Circular authority is present (bullet 2 in Section 2.5.1). Statutory depth is contested for the same reason as PI-5.2 and PI-5.3.

Circular authority: PRESENT. Statutory authority: PARTIAL (unverified reference chain).

REQ PI-5.5 Finding: PARTIAL

The Process Inflation Findings state (Krav 5 av 19): *"While deviation detection is a standard internal control function, formal authority rests on an unverifiable reference chain to kommuneloven § 25-1."* Circular authority is present (bullet 3 in Section 2.5.1). The requirement is substantively sound but its formal authority rests on the same contested reference chain.

Circular authority: PRESENT. Statutory authority: PARTIAL (unverified reference chain).

REQ PI-5.6 Finding: PARTIAL

The Process Inflation Findings state (Krav 6 av 19): *"This documentation duty relies on an unverified reference chain to kommuneloven § 25-1."* Circular authority is present (bullet 4 in Section 2.5.1). Same pattern as PI-5.2 through PI-5.5.

Circular authority: PRESENT. Statutory authority: PARTIAL (unverified reference chain).

REQ PI-5.7 Finding: PARTIAL

The Process Inflation Findings state (Krav 7 av 19): *"Plausibly compliant with kommuneloven § 25-1, but strictly unconfirmable from the provided documents due to the reference chain limitation."* Circular authority is present (bullet 5 in Section 2.5.1). Of the seven circular-sourced requirements, this one is closest to probable statutory alignment.

Circular authority: PRESENT. Statutory authority: PARTIAL (unconfirmable but plausible).

REQ PI-5.8 Finding: YES — no circular authority; contested statutory authority

This requirement originates in the Kommunebrev 2025, not in R-35, § 5. The circular does not contain it. The Process Inflation Findings note (Krav 8 av 19): *"§ 5 contains no explicit authorization for the Directorate to dictate that municipalities perform specific review actions beyond ordinary ongoing compliance."* This requirement therefore has a double authority gap: it is absent from the circular and lacks an independent statutory basis in § 5. It additionally operates in the advisory register (*anbefaler*), meaning that even on its own terms it is not framed as a binding obligation — yet it appears in the Process Inflation Findings as an operative procedural requirement.

Circular authority: ABSENT. Statutory authority: NO direct basis in § 5.

REQ PI-5.9 Finding: YES — no circular authority; different statutory basis

This requirement originates in the Kommunebrev 2025, not in R-35, § 5. The circular does not contain it. The Process Inflation Findings classify it as [SUBSTANTIVE LEGAL

OBLIGATION] concerning personnel training, which the Findings note "constitutes subject matter falling outside the bounds of procedural internal control entirely." The requirement may have a statutory basis, but that basis is not § 5, and the circular provides no authority for it.

Circular authority: ABSENT. Statutory authority: POSSIBLE but not in § 5.

REQ PI-5.10 Finding: YES — no circular authority; shadow-binding of procedural discretion

This requirement originates in the Barnets beste veileder, not in R-35, § 5. The circular does not contain it. The Process Inflation Findings state (Krav 10 av 19): *"§ 5 imposes an open, general duty with no explicit mandate requiring child impact assessments as mandatory content, thereby shadow-binding the municipality's procedural discretion."* The requirement adds a specific substantive content obligation — child impact screening — to the internal control routine, without circular authority and without explicit statutory mandate.

Circular authority: ABSENT. Statutory authority: NO direct basis — operative authority is the veileder alone.

REQ PI-5.11 Finding: YES — no circular authority; unauthorized role assignment

This requirement originates in the Veileder til partnerskapsavtalen, not in R-35, § 5. The circular does not contain it. The Process Inflation Findings state (Krav 11 av 19): *"§ 5 assigns duty generally to the 'municipality' and offers no statutory authority to fix internal responsibilities to a named role or introduce distinct 'risikostyring' requirements."* The requirement both names a specific organizational role (NAV-leder) and introduces a distinct "risk management" obligation — neither of which appear in § 5 or the circular.

Circular authority: ABSENT. Statutory authority: NO — authority is the partnership agreement veileder, which derives from organizational rather than legal sources.

REQ PI-5.12 Finding: YES — no circular authority; wrong legal domain

This requirement originates in the Veileder – trygge brukermøter i NAV, not in R-35, § 5. The circular does not contain it. The Process Inflation Findings state (Krav 12 av 19): *"Converts open procedural discretion into a fixed mandate requiring safety incident reporting, a subject properly governed by the Working Environment Act rather than § 5."* The requirement is not only absent from the circular — it belongs to a different legal regime (labor law / arbeidsmiljøloven) that operates alongside but independently of sosialtjenesteloven. Its inclusion in the § 5 normative web constitutes a category error as well as an authority gap.

Circular authority: ABSENT. Statutory authority: NO basis in § 5 — proper basis is AML, a separate statute.

REQ PI-5.13 Finding: YES — no circular authority; exceeds statutory specification

This requirement originates in the Veileder – trygge brukermøter i NAV, not in R-35, § 5. The circular does not contain it. The Process Inflation Findings state (Krav 13 av 19): *"§ 5 requires detecting deviations but lacks text specifically prescribing these fixed root-cause investigative steps."* The circular (in SA-5.5 / PI-5.5) contains the general obligation to detect and follow up deviations, but does not specify the investigative sequence (fact-finding → cause analysis → error correction). This procedural elaboration exists only in the veileder.

Circular authority: ABSENT. Statutory authority: PARTIAL — the general deviation function has statutory backing; the specific three-step sequence does not.

REQ PI-5.14 Finding: YES — no circular authority; unauthorized conversion of discretionary standard

This requirement originates in the Barnets beste veileder, not in R-35, § 5. The circular does not contain it. The Process Inflation Findings state (Krav 14 av 19): *"Child welfare principles lack authority in § 5; mandating this documentation converts the open 'nødvendig' normative standard into a fixed, unauthorized obligation."* The documentation requirement for child best-interest assessments is operationally tied to a different substantive obligation that has no anchor in § 5 or the circular.

Circular authority: ABSENT. Statutory authority: NO basis in § 5 — veileder is the sole operative source.

REQ PI-5.15 Finding: YES — no circular authority; labor law domain

This requirement originates in the Standard for trygge brukermøter i NAV, not in R-35, § 5. The circular does not contain it. The Process Inflation Findings state (Krav 15 av 19): *"Derives from labor laws (AML) rather than § 5, replacing the open discretionary standard with an absolute, undifferentiated mapping obligation."* The "alle former for brukermøter" formulation eliminates all threshold assessment, converting what might be a proportionate risk-management activity into a blanket obligation that applies regardless of assessed risk level.

Circular authority: ABSENT. Statutory authority: NO basis in § 5 — proper basis is AML; the standard document is not a circular.

REQ PI-5.16 Finding: YES — no circular authority; eliminates operational discretion

This requirement originates in the Standard for trygge brukermøter i NAV, not in R-35, § 5. The circular does not contain it. The Process Inflation Findings state (Krav 16 av 19):

"Eliminates all operational discretion regarding what is necessary to document and share, relying entirely on labor law bases rather than § 5." The absolute ("alle etablerte sikkerhetstiltak") formulation removes the "nødvendig" proportionality qualifier that the circular itself preserves in SA-5.6 / PI-5.6.

Circular authority: ABSENT. Statutory authority: NO basis in § 5 — same labor law domain issue as PI-5.15.

REQ PI-5.17 Finding: YES — no circular authority; dictates technical medium

This requirement originates in the Veileder til standard for trygge brukermøter i NAV, not in R-35, § 5. The circular does not contain it. The Process Inflation Findings state (Krav 17 av 19): *"§ 5 provides no authority to dictate the technical medium of documentation, thereby shadow-binding the municipality's statutory discretion over form."* The circular's own formulation (PI-5.6) preserves discretion over form ("i den formen... som er nødvendig"). This requirement overrides that discretion by specifying "gjeldende fagsystemer" as the mandatory medium — a specification that has no circular basis and no statutory basis.

Circular authority: ABSENT — and in direct tension with the circular's own proportionality language. Statutory authority: NO.

REQ PI-5.18 Finding: YES — no circular authority; introduces non-statutory mandatory procedure

This requirement originates in the Veileder til standard for trygge brukermøter i NAV, not in R-35, § 5. The circular does not contain it. The Process Inflation Findings state (Krav 18 av 19): *"No textual basis exists in § 5 requiring residual risk analysis; imposing it transforms open evaluative judgment into a mandatory, fixed procedure."* Residual risk assessment is a concept from risk management methodology that has been transplanted into the § 5 normative web without circular or statutory authority.

Circular authority: ABSENT. Statutory authority: NO.

REQ PI-5.19 Finding: YES — no circular authority; HMS framework substitution

This requirement originates in the Veileder til standard for trygge brukermøter i NAV, not in R-35, § 5. The circular does not contain it. The Process Inflation Findings state (Krav 19 av 19): *"Replaces the open standard of 'necessary documentation' under § 5 with a fixed, unqualified obligation based on HMS/labor law frameworks."* The circular's own documentation provision (PI-5.6) is qualified by "nødvendig." This requirement removes that qualification entirely and introduces a mandatory and comprehensive HMS documentation category that has no basis in the circular or § 5.

Circular authority: ABSENT. Statutory authority: NO basis in § 5 — HMS framework is AML-derived.

STEP 3 — SCALE AND PROPORTIONALITY CHECK

All requirements cross-referenced against the Anchor Document (Volume Driver Findings, Document 3).

REQ PI-5.1 — *Bare statutory duty* **Scale flag:** NO — identical to SA-5.1 in prior audit. Scale sensitivity arises in operationalization only.

REQ PI-5.2 — *Systematic, risk-based, context-adapted system* **Scale flag:** PARTIAL — identical to SA-5.2 in prior audit. The "tilpasset" qualifier partially mitigates scale sensitivity; the subsequent operationalization removes much of that mitigation. (Anchor Document: Cluster 2 — three-tier organizational assumption.)

REQ PI-5.3 — *Written description of tasks, goals, organization* **Scale flag:** YES — identical to SA-5.3 in prior audit. (Anchor Document: Cluster 2 — documentation apparatus confirmed across Giske, Averøy, Sør-Varanger, Nav Hallingdal.)

REQ PI-5.4 — *Necessary routines and procedures* **Scale flag:** PARTIAL — identical to SA-5.4 in prior audit. The "nødvendige" qualifier provides nominal proportionality, undermined by supervisory operationalization. (Anchor Document: Cluster 2 — [P] Procedural Continuity as second mechanism overall.)

REQ PI-5.5 — *Detect and follow up deviations* **Scale flag:** YES — identical to SA-5.5 in prior audit. Deviation software inaccessibility confirmed in Averøy, Giske, Nord-Fron, Nav Àvjovàrri, Båtsfjord, Hallingdal. (Anchor Document: Cluster 2.)

REQ PI-5.6 — *Document internal control in necessary form and extent* **Scale flag:** YES — identical to SA-5.6 in prior audit. (Anchor Document: Cluster 2 — confirmed as secondary finding in virtually every supervision report.)

REQ PI-5.7 — *Evaluate and improve written procedures* **Scale flag:** PARTIAL — identical to SA-5.7 in prior audit. "Ved behov" qualifier partially mitigates; supervisory practice operationalizes as mandatory recurring cycle. (Anchor Document: Cluster 2.)

REQ PI-5.8 — *Kommunebrev: recommendation to review internal control system* **Scale flag:** YES — and compounded

The Kommunebrev recommendation to conduct a specific review of the internal control system adds a time-bounded, directed compliance action on top of the ongoing compliance obligations in PI-5.2 through PI-5.7. For a NAV leader in a small office, this constitutes an additional discrete administrative project on top of the cumulative burden already identified. Critically, this requirement has NO circular authority (Step 2 finding), meaning it is an unsupported additional load. The Anchor Document confirms: *"The cumulative burden falls on the Nav leader, who is simultaneously the primary caseworker, the decision approver, the system administrator for deviation software, the author of ROS analyses, and the convener of professional meetings."* Any incremental addition to that load, particularly one without circular or statutory basis, is disproportionate by definition.

Scale flag: YES. Applicable finding: Anchor Document, Cluster 2 — cumulative burden on NAV leader; any unsupported addition amplifies structural disproportionality.

REQ PI-5.9 — *Personnel training obligation* **Scale flag:** PARTIAL

The training obligation has a different structural character from the documentation requirements: it is substantively important (trained staff benefit users) and potentially has a statutory basis outside § 5. However, in scale terms, a small municipality cannot sustain a dedicated training infrastructure. The Anchor Document identifies competence sustainability [K] as the fifth most common mechanism: municipalities processing too few specialized cases to maintain the procedural competence required. The training obligation compounds this — training is required but the volume of relevant cases after training is insufficient to maintain the skills trained. The Anchor Document notes *"skills acquired through training erode rapidly"* without a critical mass of cases.

Scale flag: PARTIAL. Applicable finding: Anchor Document — [K] Competence Sustainability mechanism; competence decay through low case frequency.

REQ PI-5.10 — *Child impact screening in internal control routines* **Scale flag:** YES

The requirement to build child impact assessment into internal control routines adds a specialist competence dimension to what is otherwise an administrative management obligation. The Anchor Document identifies the child-perspective documentation cluster (Cluster 3 across all three memo sections) as generating sanctions in 15+ municipalities, driven by the combination of [D] and [K]: *"The documentation requirements presuppose a specialization that the scale does not support. A generalist who encounters child-welfare*

assessments infrequently... cannot reasonably be expected to both maintain the substantive competence and execute the documentation pipeline to the standard assumed." Building this specialist competence requirement into the internal control routine architecture multiplies the scale-sensitivity of the underlying documentation obligation.

Scale flag: YES. Applicable finding: Anchor Document, Cluster 3 — child-perspective documentation cluster; [D]+[K] mechanisms confirmed in 15+ municipalities.

REQ PI-5.11 — *NAV-leder responsibility for risk management systems* **Scale flag:** YES

The assignment of all internal control and risk management responsibility to the NAV-leder presupposes that the NAV-leder is a sufficiently resourced organizational layer separated from frontline casework. The Anchor Document confirms that this assumption fails systematically in small offices: *"the same organizational scale that creates [K] and [S] vulnerabilities also creates [C] vulnerabilities by preventing the structural role separation that quality-assurance regimes assume."* Reports for Hjelmeland, Båtsfjord, Vik, Nav Numedal, and others document managers who are simultaneously frontline workers, sole decision-approvers, and quality assurance mechanisms. Assigning formal institutional responsibility for risk management systems to this person does not reduce that burden; it formalizes it without providing the organizational capacity to discharge it.

Scale flag: YES. Applicable finding: Anchor Document — management overstretch as a Track C1 intersection; confirmed in Hjelmeland, Båtsfjord, Vik, Nav Numedal.

REQ PI-5.12 — *Routines and reporting systems for violence, threats, harassment* **Scale flag:** YES

This requirement derives from labor law and applies to user meeting management. The Anchor Document identifies formalized inter-agency coordination and formal reporting systems as components of Cluster 2 (internal control apparatus), noting: *"the internal control compliance apparatus consistently exceeds the capacity of a single leader in a small office."* A dedicated violence and threat incident reporting system assumes: an accessible reporting channel, a designated recipient for reports, a formal investigation process, and administrative capacity to maintain the system over time. None of these are structurally available in offices of three to five social services staff.

Scale flag: YES. Applicable finding: Anchor Document, Cluster 2 — formal internal control infrastructure exceeds small-office organizational capacity.

REQ PI-5.13 — *Fixed investigative sequence for deviation handling* **Scale flag:** YES

The requirement to execute a formal three-step root-cause investigation for every deviation presupposes: (a) sufficient case volume to encounter deviations frequently enough to maintain familiarity with the investigative protocol; and (b) dedicated administrative capacity

to execute the protocol formally rather than through direct verbal resolution. The Anchor Document confirms: *"small offices resolve errors through direct verbal communication with the manager rather than formal deviation systems... This represents a rational scale-appropriate adaptation that the supervisory framework incorrectly classifies as a failure."* The three-step sequence is the supervisory framework's formalization of what small offices already do informally and effectively — at the cost of a mandatory documentation cycle.

Scale flag: YES. Applicable finding: Anchor Document — [P] Procedural Continuity mechanism; verbal-to-formal substitution pattern confirmed in Hammerfest, Sør-Varanger, Senja, Båtsfjord, Nav Hallingdal, Averøy, Giske.

REQ PI-5.14 — *Document child best-interest assessments* **Scale flag:** YES

Identical structural finding to PI-5.10. The Anchor Document's Cluster 3 (child-perspective documentation) directly addresses this requirement: the combination of [D] documentation demand and [K] competence sustainability failure is confirmed in 15+ municipalities. The phrase in the source provision — "for at andre skal kunne se" (so that others can see) — is explicitly an audit-trail justification, confirming that the obligation primarily serves supervisory review rather than case quality.

Scale flag: YES. Applicable finding: Anchor Document, Cluster 3 — [D]+[K] confirmed in 15+ municipalities; Anchor Document quote: "caseworkers verbally knew what they should do but failed to document it."

REQ PI-5.15 — *Map and document risk for all user meetings* **Scale flag:** YES — structurally disproportionate by design

The "alle former for brukermøter" formulation means the mapping obligation is triggered by every user meeting, regardless of assessed risk. This removes both the scale qualifier and the proportionality qualifier simultaneously. A small office conducting hundreds of user meetings annually must produce documented risk assessments for every meeting, creating a documentation volume that is inversely disproportionate to the office's capacity: the smaller the office, the greater the per-capita burden. The Anchor Document identifies [D] Documentation Apparatus as the dominant mechanism across the entire supervision corpus and confirms: *"In small-scale settings... the documentation and procedural requirements identified as volume drivers are generating compliance costs without corresponding service quality improvements."*

Scale flag: YES. Applicable finding: Anchor Document — [D] dominant mechanism across entire corpus; absolute mapping obligations confirmed as Structural Disproportionality in Cluster 2.

REQ PI-5.16 — *Document all safety measures and make available to all staff* **Scale flag:** YES

The "alle etablerte sikkerhetstiltak" formulation mirrors PI-5.15's absolutism. Every safety measure — however minor — must be documented and distributed to every staff member. In a small office where every staff member directly participates in establishing safety measures, mandatory documentation and distribution serves a purely administrative function. The Anchor Document confirms that this pattern — where formal documentation procedures are structurally redundant given the office's proximity-based coordination — consistently generates compliance failures that do not reflect actual service deficiencies.

Scale flag: YES. Applicable finding: Anchor Document — [D] mechanism; proximity-based coordination penalized for absence of formal documentation.

REQ PI-5.17 — *Document measures in specific IT case management systems (fagsystemer)* **Scale flag:** YES — technical inaccessibility confirmed

The requirement to use specific IT systems mirrors the deviation-software inaccessibility finding confirmed in the Anchor Document. The Process Inflation Findings note that the circular's own provision preserves discretion over documentary form. This requirement, from a sub-veileder with no circular or statutory authority, overrides that discretion. The Anchor Document confirms the systemic pattern: *"the state–municipal split in NAV creates mismatched IT systems that small offices cannot resolve locally"* — confirmed in Averøy, Giske, Båtsfjord, Nav Àvjovàrri, and others. Specifying a particular IT system as the mandatory medium creates an absolute compliance obligation that may be structurally impossible to fulfill.

Scale flag: YES. Applicable finding: Anchor Document, Cluster 2 — IT system fragmentation as Track C1 intersection; confirmed in Averøy, Giske, Båtsfjord, Nav Àvjovàrri.

REQ PI-5.18 — *Assess and document residual risk after measures implemented* **Scale flag:** YES

The requirement to conduct a formal residual risk assessment after every risk measure presupposes: a risk assessment function that has been formally executed (PI-5.15), documented measures (PI-5.16), and now a secondary formal assessment evaluating remaining exposure. This is a three-stage formal risk management cycle (initial mapping → measures → residual assessment) transplanted from professional risk management methodology into a social services office. The Anchor Document identifies ROS analyses as part of Cluster 2 and notes they are confirmed as failures in Hjelmeland, Sør-Varanger, Våler, Nesna, Årdal, Målselv — precisely because *"they constitute a compliance infrastructure designed for organizations with dedicated quality-assurance roles and administrative back-office capacity."*

Scale flag: YES. Applicable finding: Anchor Document, Cluster 2 — ROS analyses confirmed as scale-sensitive failures in 6+ municipalities.

REQ PI-5.19 — *Comprehensive documentation of all reported HMS deviations* **Scale flag:** YES

This requirement closes the loop on the HMS/labor law sub-cluster (PI-5.12, PI-5.13, PI-5.15, PI-5.16, PI-5.17, PI-5.18). Every HMS deviation must be documented comprehensively, covering both the deviation and its handling. The Anchor Document notes [D] appears in every supervision report regardless of municipality size and explicitly identifies HMS deviation documentation as part of the internal control apparatus cluster. The unqualified ("Dokumentasjon over innmeldte HMS-avvik") formulation removes the "nødvendig" proportionality qualifier that the circular preserves.

Scale flag: YES. Applicable finding: Anchor Document, Cluster 2 — [D] dominant mechanism; HMS documentation confirmed across corpus.

STEP 4 — PURPOSE CLASSIFICATION

REQ PI-5.1 — MIXED (identical to prior audit SA-5.1) Primary: internal control. Secondary: user need. Framing is entirely organizational; user benefit is structural and indirect.

REQ PI-5.2 — MIXED (identical to prior audit SA-5.2) Primary: internal control (design specifications for the management system). Secondary: user need (well-designed system produces more consistent case outcomes). Framing addresses organizational architecture.

REQ PI-5.3 — INTERNAL CONTROL (identical to prior audit SA-5.3) A written organizational description serves no function in assessing any individual user case. Its sole purpose is baseline documentation for audit and inspection.

REQ PI-5.4 — MIXED (identical to prior audit SA-5.4) Primary: internal control (written procedures serve organizational consistency and supervisory compliance). Secondary: user need (consistent procedures reduce arbitrariness in case assessment).

REQ PI-5.5 — MIXED (identical to prior audit SA-5.5) Primary: internal control (deviation management quality function). Secondary: user need (correction of case processing errors

may improve outcomes for specific users). Note: the user protection function is more proximate here than in most other requirements.

REQ PI-5.6 — INTERNAL CONTROL (identical to prior audit SA-5.6) Documentation of the documentation system has no bearing on individual case outcomes. Its exclusive function is demonstrating compliance for audit purposes.

REQ PI-5.7 — MIXED (identical to prior audit SA-5.7) Primary: internal control (quality assurance cycle). Secondary: user need (improved procedures eventually benefit users at one remove).

REQ PI-5.8 — INTERNAL CONTROL The Kommunebrev recommendation to conduct a specific system review is directed entirely at the municipality's own management apparatus. *Justification:* "gjennomgå internkontrollsystemet" — the review object is the internal control system itself, not user case quality or individual service delivery. The recommendation generates a management-layer activity with no direct pathway to any user's case outcome. The advisory register (*anbefaler*) further confirms that this is a self-improvement signal directed at administrative management rather than a user protection obligation.

REQ PI-5.9 — MIXED Primary: user need (trained personnel deliver better, more legally sound services to users). Secondary: internal control (training obligation is framed as a management responsibility — "kommunens ansvar"). *Justification:* This is the only requirement in the nineteen where the user need function plausibly takes precedence. Trained caseworkers apply law correctly, make proportionate decisions, and identify user needs accurately. However, the Process Inflation Findings classify this as a [SUBSTANTIVE LEGAL OBLIGATION] distinct from the internal control framework precisely because its primary driver is service quality rather than administrative management. The framing ("sørge for nødvendig opplæring") places the obligation on the municipality's management, but the beneficiary is users receiving better-qualified casework.

REQ PI-5.10 — MIXED Primary: internal control (incorporates child impact as a mandatory checklist item within the internal control routine architecture). Secondary: user need (children in households receiving social services benefit when their interests are considered). *Justification:* The source provision frames this as an audit question about the internal control routines themselves ("ivaretar våre internkontrollrutiner"). The obligation is to modify the control routine, not to conduct a child assessment in any individual case. The user need element is real but is activated at the level of the control system's design, not at the level of individual case processing.

REQ PI-5.11 — INTERNAL CONTROL The assignment of formal institutional responsibility for risk management and internal control systems to the NAV-leder by name is a governance and organizational management provision. *Justification:* "ansvar for at hensiktsmessige systemer... er etablert og etterleves" — the obligation is to establish and maintain systems, not to produce any service outcome for users. Role assignment within the municipal management structure is definitionally an internal administrative function.

REQ PI-5.12 — INTERNAL CONTROL The requirement to establish reporting routines for violence, threats, and harassment incidents is a workplace safety management obligation. *Justification:* "rutiner og systemer for å melde uønskede hendelser" — the obligation is to create and maintain an incident reporting channel within the administrative system. This protects employees, not users. The Process Inflation Findings correctly identify this as belonging to the Working Environment Act domain rather than social services law. No individual user's case outcome is affected by whether this reporting system exists.

REQ PI-5.13 — MIXED Primary: internal control (prescribes the administrative procedural sequence for deviation handling within the quality management system). Secondary: user need (where a deviation involves a user's case, proper root-cause analysis may identify and correct a harm to that user). *Justification:* "finne ut hva som er skjedd, hvorfor det skjedde, rette opp eventuelle feil" — the investigative sequence is framed as an internal quality management activity. The "rette opp eventuelle feil" element creates a direct pathway to user case correction that distinguishes this from purely administrative requirements.

REQ PI-5.14 — MIXED Primary: user need (documentation of child best-interest assessments enables review, appeal, and verification of case correctness, directly serving the legal security of the child). Secondary: internal control (documentation enables supervisory inspection and audit of compliance with child welfare obligations). *Justification:* "for at andre skal kunne se hvilke vurderinger som er gjort og ha mulighet for å etterprøve" — the stated purpose is reviewability and verifiability. On one reading, this primarily serves the user's right to a reviewable decision. On another, "andre" refers to supervisors and auditors rather than to the user themselves. The dual addressee of documentation — users exercising appeal rights and inspectors verifying compliance — makes this requirement genuinely mixed, but with the user need element having greater weight than in most [INTERNAL CONTROL] documentation requirements.

REQ PI-5.15 — INTERNAL CONTROL The comprehensive risk mapping for all user meetings is a workplace safety and risk management obligation directed at protecting employees in the administrative environment. *Justification:* "risiko ved arbeidet som... kan gi risiko for vold og trusler i alle former for brukermøter" — the protected subject is the employee in their working environment, not the user receiving a service. The documented

risk assessment is a management artifact, not a user-facing record. The Process Inflation Findings correctly classify this as AML-derived.

REQ PI-5.16 — INTERNAL CONTROL The documentation of safety measures and their distribution to staff is a workplace safety compliance obligation. *Justification:* "gjøres tilgjengelig for alle ansatte" — the recipient of the documentation is staff, not users. The safety measures themselves may indirectly affect how users are treated in meetings, but the documentation obligation is directed at ensuring staff awareness of organizational protocols, which is an internal administrative function.

REQ PI-5.17 — INTERNAL CONTROL Specifying the mandatory IT medium for documenting risk measures is a records management and technical compliance obligation. *Justification:* "dokumenteres i gjeldende fagsystemer" — the requirement concerns where documentation is stored, not what is delivered to users. Choice of IT medium has no bearing on any individual user's case outcome; it exclusively serves internal record-keeping and audit trail functions.

REQ PI-5.18 — INTERNAL CONTROL Residual risk assessment and documentation is a risk management methodology obligation. *Justification:* "vurdering og dokumenteres hva som er 'restrisikoen'" — the assessment object is the organization's residual risk exposure after measures have been implemented. This is a management-layer evaluation activity with no direct pathway to any user's case outcome. Its purpose is organizational risk governance, not service quality.

REQ PI-5.19 — INTERNAL CONTROL Comprehensive documentation of all reported HMS deviations is a workplace safety record-keeping obligation. *Justification:* "innmeldte HMS-avvik og håndteringen av disse" — HMS (health, safety, and environment) deviations are by definition workplace safety management artifacts. Their documentation serves internal audit, labor law compliance, and organizational accountability functions. No individual user's case is affected by whether this documentation exists.

STEP 5 — TRANSACTION COST CHARACTERIZATION

Requirements PI-5.1 through PI-5.7: transaction cost descriptions are identical in structure to the prior audit. The key additions are PI-5.8 through PI-5.19.

REQ PI-5.1 — No Transaction Cost Identified (provision in isolation; burden arises in operationalization).

REQ PI-5.2 — As SA-5.2 in prior audit. NAV leader must demonstrate systematicity, risk-basis, and contextual adaptation of the control system in written management documentation. **Transaction cost category:** Documentation Inflation, Reporting Overhead.

REQ PI-5.3 — As SA-5.3 in prior audit. Production and maintenance of a formal written organizational description. **Transaction cost category:** Documentation Inflation.

REQ PI-5.4 — As SA-5.4 in prior audit. Production and maintenance of written routine documents for each service sub-area. **Transaction cost category:** Documentation Inflation, Procedural Duplication.

REQ PI-5.5 — As SA-5.5 in prior audit. Formal deviation registration in IT systems frequently inaccessible; role-separation requirement structurally impossible in micro-offices. **Transaction cost category:** Documentation Inflation, Procedural Duplication, Structural Disproportionality.

REQ PI-5.6 — As SA-5.6 in prior audit. Second-order documentation of the documentation system itself. **Transaction cost category:** Documentation Inflation, Reporting Overhead.

REQ PI-5.7 — As SA-5.7 in prior audit. Scheduled formal evaluation and revision cycle for all written procedures. **Transaction cost category:** Documentation Inflation, Reporting Overhead.

REQ PI-5.8 — INTERNAL CONTROL — Transaction cost description: The Kommunebrev creates a directed, time-specific administrative project: the municipality must conduct a formal structured review of its entire internal control system. This is a discrete event added to the ongoing compliance obligations in PI-5.2 through PI-5.7. For the NAV leader in a small office, this means carving out dedicated administrative time for a review activity that produces a management report or assessment record — a document that will be reviewed by the Directorate or by supervisors, not by users. The advisory register (*anbefaler*) technically makes this non-binding, yet its appearance in the Process Inflation Findings as an operative requirement, and its origin in an official Kommunebrev from the Directorate, creates a practical compliance expectation indistinguishable from a binding obligation.

Transaction cost category: Reporting Overhead, Documentation Inflation

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REQ PI-5.9 — MIXED — Transaction cost description: No transaction cost burden is identified for the user need dimension of this requirement — ensuring trained personnel is a user-serving function. However, the management framing ("kommunens ansvar å sørge for") creates an administrative obligation for the NAV leader to plan, arrange, document, and demonstrate adequate training. In small offices, this means: identifying training needs, sourcing training (which may require external providers given the lack of in-house expertise), documenting participation, and demonstrating in supervisory inspections that training has occurred and is updated appropriately. The competence decay dynamic confirmed in the Anchor Document ([K] mechanism) means this administrative cycle must be repeated continuously, because training without sufficient case volume does not produce sustained competence.

Transaction cost category: Reporting Overhead (management obligation dimension only)

REQ PI-5.10 — MIXED — Transaction cost description: The caseworker, or more likely the NAV leader as system designer, must incorporate a mandatory child impact screening step into every written internal control routine across the office's service domains. This involves: identifying which service activities could affect children, drafting explicit child impact screening criteria for each, incorporating them as mandatory checkpoints within existing routine documents, and demonstrating at inspection that these checkpoints are operative. The Process Inflation Findings note that this "shadow-binds the municipality's procedural discretion" — meaning the office cannot design its own control routines without building in this specific content element, regardless of how infrequently children are encountered in practice. Where the underlying child welfare competence is already weak ([K] mechanism), this documentation obligation compounds the burden.

Transaction cost category: Documentation Inflation, Combined Burden

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REQ PI-5.11 — INTERNAL CONTROL — Transaction cost description: This requirement formalizes the NAV-leder's accountability for the entire internal control and risk management architecture. The transaction cost is not a discrete task but a continuous accountability burden: the NAV-leder must at any time be able to demonstrate that all systems are established and being followed. In practice this means: maintaining an oversight overview of all running control activities, being able to produce evidence on request that systems are operative, and bearing personal formal accountability for failures in any component. In small offices where the NAV-leder is also the frontline worker, this formalizes a dual accountability burden — for case outcomes and for system compliance — on a single person with finite administrative capacity.

Transaction cost category: Structural Disproportionality, Reporting Overhead

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REQ PI-5.12 — INTERNAL CONTROL — Transaction cost description: The caseworker (or NAV-leder) must design, implement, and maintain a dedicated reporting system for violence, threats, and harassment incidents. Concretely: establish a reporting channel (form, software, or designated contact), communicate the channel to all staff, ensure all incidents are registered, follow up registered incidents formally, document the follow-up, and demonstrate system operability at inspection. This is a standalone administrative infrastructure within the workplace safety domain, separate from but cumulative with the social services internal control obligations in PI-5.2 through PI-5.7. Its labor law origin means it sits outside the circular framework — no circular guidance on how to integrate it with the § 5 compliance architecture exists.

Transaction cost category: Documentation Inflation, Reporting Overhead, Combined Burden

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REQ PI-5.13 — MIXED — Transaction cost description: For the internal control element: each deviation must generate a formal three-step investigation record (fact establishment → cause analysis → error correction), distinct from the deviation registration in PI-5.5. This is procedural duplication: a caseworker who resolves an error verbally with their manager must then also produce a written investigation record following the prescribed sequence. For the user need element: where the deviation involved a user's case, the error correction step directly serves the user, and no transaction cost burden is identified for that dimension. The burden arises specifically in the mandatory formalization of an investigative sequence that small offices functionally complete through direct communication.

Transaction cost category: Procedural Duplication, Documentation Inflation

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REQ PI-5.14 — MIXED — Transaction cost description: For the user need element: no transaction cost burden is identified — documenting child best-interest assessments directly serves the user's legal security and reviewability rights. For the internal control element: the audit-trail purpose ("for at andre skal kunne se") creates a documentation standard calibrated to supervisory inspection rather than to the user's actual information needs. This means the documentation must be produced in a form and at a level of explicitness that satisfies inspectors who are not the primary readers — adding a layer of formalization beyond what the assessment itself requires. In small offices where caseworkers personally know every family, this produces the pattern confirmed across 15+ municipalities in the Anchor Document: the assessment is correctly conducted but the documentation is inadequate by supervisory standards.

Transaction cost category: Documentation Inflation (audit-trail element specifically)

REQ PI-5.15 — INTERNAL CONTROL — Transaction cost description: Every user meeting — regardless of assessed risk level — must be preceded by a formal documented risk assessment covering potential violence and threats. Concretely: the caseworker or risk officer must map the risk profile of every meeting, document the mapping, assign a risk category, and retain the documentation. At high case volumes, this is a systematic administrative overhead attached to every service interaction. At small-office volumes, it means producing a risk assessment for the few hundred annual user meetings the office conducts, none of which the office has sufficient history to evaluate systematically. The "alle former" absolute framing means there is no de minimis threshold — a brief information call and a complex debt renegotiation meeting receive identical formal treatment.

Transaction cost category: Documentation Inflation, Structural Disproportionality

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REQ PI-5.16 — INTERNAL CONTROL — Transaction cost description: All safety measures — once established through PI-5.15's mapping — must be formally documented and actively distributed to every staff member. In a small office where all three to five staff are present and collectively establish safety protocols, this documentation and distribution cycle is operationally redundant. The administrative burden is: producing a formal written record of every safety measure (however minor), maintaining a current distribution list, sending updated documentation every time measures change, and being able to demonstrate at inspection that all staff have received and acknowledged current protocols. The zero-threshold nature of the obligation ("alle etablerte sikkerhetstiltak") means there is no proportionality escape.

Transaction cost category: Documentation Inflation, Procedural Duplication

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REQ PI-5.17 — INTERNAL CONTROL — Transaction cost description: Every risk measure implemented after a formal risk assessment must be logged in the specific IT case management systems (fagsystemer). This creates a technical compliance requirement on top of the substantive documentation already required by PI-5.15 and PI-5.16: the caseworker must not only document the measure (PI-5.16) but ensure that documentation is entered specifically into the designated IT system. Where that system is technically inaccessible — as confirmed in multiple municipalities in the Anchor Document — the caseworker faces an absolute technical compliance barrier that no amount of administrative effort can resolve locally. The specification of a mandatory IT medium with no proportionality qualifier or alternative pathway constitutes a structurally disproportionate obligation.

Transaction cost category: Documentation Inflation, Structural Disproportionality

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REQ PI-5.18 — INTERNAL CONTROL — Transaction cost description: After implementing risk measures (PI-5.16, PI-5.17), a formal secondary assessment of residual risk must be conducted and documented. This adds a third stage to what is already a multi-stage formal risk management cycle (initial mapping PI-5.15 → measure documentation PI-5.16 → IT

system logging PI-5.17 → residual risk assessment PI-5.18). Each stage requires dedicated caseworker time and produces a separate documentation artifact. The cumulative cycle, triggered by every user meeting under PI-5.15's absolute scope, means that routine advisory interactions with users generate a four-stage formal risk management paper trail with no equivalent user benefit — the user receives the same conversation regardless of how many formal risk assessment documents exist.

Transaction cost category: Documentation Inflation, Procedural Duplication, Combined Burden

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REQ PI-5.19 — INTERNAL CONTROL — Transaction cost description: A comprehensive ongoing record of all reported HMS deviations and their handling must be maintained. This is a permanent administrative archive requirement: every incident registered under PI-5.12, investigated under PI-5.13, and addressed through risk measures under PI-5.15 through PI-5.18 generates a final documentation record that must be filed, organized, and kept accessible. The reference to "HMS-rutine 5" implies this is one component within a broader HMS compliance architecture that itself exists outside the § 5 circular framework. In small offices, maintaining this archive requires dedicated administrative time and system access — the same system access that the Anchor Document confirms is frequently technically unavailable.

Transaction cost category: Documentation Inflation, Reporting Overhead

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STEP 6 — CATALOG ENTRIES

REQUIREMENT ID: PI-5.1 **PROVISION TEXT:** The municipality shall have internal control in accordance with kommuneloven § 25-1. **LEGAL AUTHORITY:** NO gap — statutory restatement. Process Inflation Findings: PROC-REQ-5.1 [SUBSTANTIVE LEGAL OBLIGATION]. Circular authority: present. **SCALE FLAG:** NO **PURPOSE:** MIXED — primary: internal control; secondary: user need (indirect). **BURDEN DESCRIPTION:** No transaction cost identified in isolation. Burden arises in PI-5.2 through PI-5.19. **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: PI-5.2 **PROVISION TEXT:** Internal control must be systematic, risk-based, and adapted to the concrete conditions and needs of the municipality. **LEGAL AUTHORITY:** PARTIAL — no qualitative criteria in sosialtjenesteloven § 5; authority rests on unverified reference chain to kommuneloven § 25-1. Circular authority: present (Section 2.5.1 introductory paragraph). **SCALE FLAG:** PARTIAL — three-tier organizational assumption; "tilpasset" qualifier partially mitigates. **PURPOSE:** MIXED — primary: internal control; secondary: user need. **BURDEN DESCRIPTION:** NAV leader must produce written justification demonstrating systematic, risk-based, context-adapted design of the control

system. Management documentation for inspection purposes only. **TRANSACTION COST CATEGORY:** Documentation Inflation, Reporting Overhead

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REQUIREMENT ID: PI-5.3 **PROVISION TEXT:** The municipality must produce a written description of its main tasks, goals, and organizational structure. **LEGAL AUTHORITY:** PARTIAL — not enumerated in sosialtjenesteloven § 5; derives from unverified reference chain to kommuneloven § 25-1. Circular authority: present (bullet 1, Section 2.5.1). **SCALE FLAG:** YES — confirmed in supervision corpus; assumes back-office capacity unavailable in small offices. **PURPOSE:** INTERNAL CONTROL — no bearing on individual user case outcomes. **BURDEN DESCRIPTION:** NAV leader must produce and maintain a formal organizational description document updated on every structural change. Document is read by inspectors, not users. **TRANSACTION COST CATEGORY:** Documentation Inflation

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REQUIREMENT ID: PI-5.4 **PROVISION TEXT:** The municipality must have necessary routines and procedures. **LEGAL AUTHORITY:** PARTIAL — unverified reference chain to kommuneloven § 25-1. Circular authority: present (bullet 2, Section 2.5.1). **SCALE FLAG:** PARTIAL — "nødvendige" qualifier provides nominal proportionality; supervisory operationalization removes much of it. **PURPOSE:** MIXED — primary: internal control; secondary: user need. **BURDEN DESCRIPTION:** Management must produce and maintain written routine documents for each service sub-area; caseworkers must demonstrably follow them. **TRANSACTION COST CATEGORY:** Documentation Inflation, Procedural Duplication

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REQUIREMENT ID: PI-5.5 **PROVISION TEXT:** The municipality must detect and follow up on deviations and the risk of deviations. **LEGAL AUTHORITY:** PARTIAL — standard function but rests on unverified reference chain to kommuneloven § 25-1. Circular authority: present (bullet 3, Section 2.5.1). **SCALE FLAG:** YES — deviation software inaccessibility confirmed in Averøy, Giske, Nord-Fron, Nav Àvjovàrri, Båtsfjord, Hallingdal. **PURPOSE:** MIXED — primary: internal control; secondary: user need (more proximate than most requirements). **BURDEN DESCRIPTION:** Formal deviation registration in IT systems frequently technically inaccessible; role-separation requirement structurally impossible in micro-offices; verbal resolution counted as non-compliant regardless of effectiveness. **TRANSACTION COST CATEGORY:** Documentation Inflation, Procedural Duplication, Structural Disproportionality

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REQUIREMENT ID: PI-5.6 **PROVISION TEXT:** Internal control must be documented in the necessary form and extent. **LEGAL AUTHORITY:** PARTIAL — unverified reference chain to kommuneloven § 25-1. Circular authority: present (bullet 4, Section 2.5.1). **SCALE FLAG:** YES — secondary finding in virtually every supervision report; confirmed in Nesna, Giske, Averøy, Sør-Varanger, and 20+ others. **PURPOSE:** INTERNAL CONTROL — documentation of the documentation system; no bearing on individual case outcomes. **BURDEN DESCRIPTION:** Management must maintain second-order records proving the

control system exists and operates: ROS analyses, spot-check logs, portfolio reviews, deviation cycles. Inspection-facing documentation overhead. **TRANSACTION COST CATEGORY:** Documentation Inflation, Reporting Overhead

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REQUIREMENT ID: PI-5.7 **PROVISION TEXT:** Written procedures and other internal control measures must be evaluated and, where needed, improved. **LEGAL AUTHORITY:** PARTIAL — plausibly compliant with kommuneloven § 25-1 but unconfirmable. Circular authority: present (bullet 5, Section 2.5.1). **SCALE FLAG:** PARTIAL — "ved behov" qualifier mitigates; supervisory practice operationalizes as mandatory recurring cycle. **PURPOSE:** MIXED — primary: internal control; secondary: user need (at one remove). **BURDEN DESCRIPTION:** Scheduled formal evaluation of all written procedures; production of revision documentation or justification for non-revision; competes with frontline casework time in small offices. **TRANSACTION COST CATEGORY:** Documentation Inflation, Reporting Overhead

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REQUIREMENT ID: PI-5.8 **PROVISION TEXT:** The Directorate recommends municipalities conduct a review of their internal control system for social services. **LEGAL AUTHORITY:** YES — no circular authority (Kommunebrev, not R-35 § 5); no direct statutory authority in § 5 to mandate specific review actions. Advisory register (*anbefaler*) further undermines binding force. **SCALE FLAG:** YES — unsupported addition to cumulative burden already confirmed as exceeding small-office capacity in Anchor Document Cluster 2. **PURPOSE:** INTERNAL CONTROL — directed entirely at the management system; no user case outcome affected. **BURDEN DESCRIPTION:** Discrete administrative review project added on top of ongoing compliance obligations; produces management documentation for Directorate or supervisory review, not for users; advisory framing creates practical compliance expectation indistinguishable from binding obligation despite lack of formal authority. **TRANSACTION COST CATEGORY:** Reporting Overhead, Documentation Inflation

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REQUIREMENT ID: PI-5.9 **PROVISION TEXT:** It is the municipality's responsibility to ensure necessary training of its personnel in the labor and welfare administration. **LEGAL AUTHORITY:** YES (as a § 5 obligation) — classified [SUBSTANTIVE LEGAL OBLIGATION] by Process Inflation Findings; belongs outside the § 5 internal control framework entirely. Circular authority: ABSENT — originates in Kommunebrev 2025, not R-35 § 5. **SCALE FLAG:** PARTIAL — training cycle must be repeated continuously due to competence decay through low case volume; [K] mechanism confirmed across Anchor Document in 8+ municipalities. **PURPOSE:** MIXED — primary: user need (trained staff serve users better); secondary: internal control (management framing). **BURDEN DESCRIPTION:** No burden identified for the user need dimension. Management burden: plan, arrange, document, and demonstrate adequate training across all service sub-areas; cycle repeats because training without case volume does not produce sustained competence. **TRANSACTION COST CATEGORY:** Reporting Overhead (management dimension only)

REQUIREMENT ID: PI-5.10 **PROVISION TEXT:** Internal control routines must actively assess and screen whether children are impacted by operations in the office's area. **LEGAL AUTHORITY:** YES — § 5 imposes open general duty with no explicit mandate for child impact as mandatory routine content; shadow-binding of procedural discretion. Circular authority: ABSENT — originates in Barnets beste veileder, not R-35 § 5. **SCALE FLAG:** YES — child-perspective documentation cluster confirmed in 15+ municipalities; [D]+[K] mechanisms compound. **PURPOSE:** MIXED — primary: internal control (modifies routine architecture); secondary: user need (children benefit when their interests are considered). **BURDEN DESCRIPTION:** NAV leader must incorporate mandatory child impact screening checkpoints into all written control routines across service domains; must demonstrate operative checkpoints at inspection; where underlying child welfare competence is weak ([K]), the documentation burden compounds an already-fragile competence base. **TRANSACTION COST CATEGORY:** Documentation Inflation, Combined Burden

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REQUIREMENT ID: PI-5.11 **PROVISION TEXT:** The NAV leader is responsible for ensuring appropriate risk management and internal control systems are established and followed. **LEGAL AUTHORITY:** YES — § 5 assigns duty to the municipality generally; no statutory authority to fix responsibility to a named role or introduce "risikostyring" as a distinct obligation. Circular authority: ABSENT — originates in Veileder til partnerskapsavtalen, not R-35 § 5. **SCALE FLAG:** YES — management overstretch confirmed in Hjelmeland, Båtsfjord, Vik, Nav Numedal; formalizing institutional accountability on the same person who performs frontline casework does not reduce burden, it names it. **PURPOSE:** INTERNAL CONTROL — governance and organizational management provision; no direct user case outcome affected. **BURDEN DESCRIPTION:** NAV leader must at all times be able to demonstrate all systems are established and operative; bears personal formal accountability for any system failure; dual accountability burden (case outcomes + system compliance) formalized on a single person in small offices. **TRANSACTION COST CATEGORY:** Structural Disproportionality, Reporting Overhead

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REQUIREMENT ID: PI-5.12 **PROVISION TEXT:** Specific routines and reporting systems must be established for incidents involving violence, threats, and harassment. **LEGAL AUTHORITY:** YES — converts open procedural discretion into a fixed mandate; subject properly governed by the Working Environment Act, not § 5; category error as well as authority gap. Circular authority: ABSENT — originates in Veileder – trygge brukermøter i NAV, not R-35 § 5. **SCALE FLAG:** YES — dedicated workplace safety reporting infrastructure assumes organizational differentiation unavailable in small offices; confirmed as part of cumulative internal control apparatus burden in Anchor Document Cluster 2. **PURPOSE:** INTERNAL CONTROL — workplace safety management obligation; protects employees, not users; user case outcomes unaffected. **BURDEN DESCRIPTION:** Establish, maintain, and demonstrate operability of dedicated incident reporting channel; ensure all staff know and use it; register, follow up, and document every incident; compliance architecture from a different legal domain (AML) sits outside circular guidance with no integration pathway. **TRANSACTION COST CATEGORY:** Documentation Inflation, Reporting Overhead, Combined Burden

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REQUIREMENT ID: PI-5.13 **PROVISION TEXT:** When deviations are handled, a specific procedural sequence must be followed: establish facts, identify causes, correct errors. **LEGAL AUTHORITY:** PARTIAL — § 5 requires detecting deviations (PI-5.5) but does not prescribe this fixed investigative sequence; the three-step formalization lacks circular and statutory authority. Circular authority: ABSENT — originates in Veileder – trygge brukermøter i NAV, not R-35 § 5. **SCALE FLAG:** YES — verbal-to-formal substitution pattern confirmed in Hammerfest, Sør-Varanger, Senja, Båtsfjord, Nav Hallingdal, Averøy, Giske; effective informal resolution penalized for absence of formal investigative record. **PURPOSE:** MIXED — primary: internal control (prescribes investigative sequence within quality management system); secondary: user need (error correction step may directly benefit user whose case contained the deviation). **BURDEN DESCRIPTION:** Every deviation must generate a formal three-step investigation record; duplicates informal verbal resolution that already occurs; in small offices the same person conducts the investigation, approves the finding, and implements the correction — procedural separation requirements cannot be met. **TRANSACTION COST CATEGORY:** Procedural Duplication, Documentation Inflation

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REQUIREMENT ID: PI-5.14 **PROVISION TEXT:** Child best-interest assessments must be documented so that others can review what judgments were made. **LEGAL AUTHORITY:** YES — child welfare principles lack authority in § 5; mandating documentation converts "nødvendig" standard into fixed unauthorized obligation. Circular authority: ABSENT — originates in Barnets beste veileder, not R-35 § 5. **SCALE FLAG:** YES — confirmed in 15+ municipalities; Anchor Document: *"caseworkers verbally knew what they should do but failed to document it"* — structural pattern, not individual negligence. **PURPOSE:** MIXED — primary: user need (documentation enables review and appeal, serving child's legal security); secondary: internal control (audit-trail purpose formalized for supervisory inspection). This is the only sub-veileder requirement where user need carries primary weight. **BURDEN DESCRIPTION:** No burden for the user need dimension. Internal control burden: documentation must satisfy supervisory inspection standards calibrated for auditors, not users; formalization requirement beyond what the assessment itself requires; in small offices where caseworkers know every family, produces systematic gap between correct assessment and inadequate documentation. **TRANSACTION COST CATEGORY:** Documentation Inflation (audit-trail element specifically)

REQUIREMENT ID: PI-5.15 **PROVISION TEXT:** Employers must comprehensively map and document risks of violence and threats for all forms of user meetings. **LEGAL AUTHORITY:** YES — derives from AML/labor law rather than § 5; absolute undifferentiated mapping obligation replaces open discretionary standard; wrong legal domain. Circular authority: ABSENT — originates in Standard for trygge brukermøter i NAV, not R-35 § 5. **SCALE FLAG:** YES — absolute scope creates per-interaction overhead inversely proportional to office size; confirmed as [D] dominant mechanism; Anchor Document: *"compliance costs without corresponding service quality improvements in small-scale settings."* **PURPOSE:** INTERNAL CONTROL — workplace safety obligation protecting employees; user case

outcomes unaffected by existence of risk assessment documentation. **BURDEN DESCRIPTION:** Every user meeting triggers a formal documented risk assessment regardless of assessed risk level; no de minimis threshold; routine advisory interactions and complex debt negotiations receive identical formal treatment; document must be retained and demonstrable at inspection. **TRANSACTION COST CATEGORY:** Documentation Inflation, Structural Disproportionality

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REQUIREMENT ID: PI-5.16 **PROVISION TEXT:** All established safety measures must be documented and made available to all staff. **LEGAL AUTHORITY:** YES — eliminates operational discretion over documentation scope; labor law basis rather than § 5; removes "nødvendig" proportionality qualifier that circular preserves in PI-5.6. Circular authority: ABSENT — originates in Standard for trygge brukermøter i NAV, not R-35 § 5. **Note:** this requirement is in direct normative tension with PI-5.6 — the circular says documentation should be in the form and extent *necessary*, while this requirement mandates documentation of *all* measures with *no* threshold. **SCALE FLAG:** YES — zero-threshold obligation creates disproportionate overhead in small offices; proximity-based coordination penalized for absence of formal documentation. **PURPOSE:** INTERNAL CONTROL — staff awareness of organizational safety protocols is an internal administrative function; no individual user case outcome affected. **BURDEN DESCRIPTION:** Formal record of every safety measure (however minor); maintained distribution list; updated communications to all staff on each change; proof of receipt and awareness demonstrable at inspection; operationally redundant in offices where all three to five staff collectively establish protocols in direct collaboration. **TRANSACTION COST CATEGORY:** Documentation Inflation, Procedural Duplication

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REQUIREMENT ID: PI-5.17 **PROVISION TEXT:** Risk measures implemented after a risk assessment must be documented in the applicable IT case management systems (fagsystemer). **LEGAL AUTHORITY:** YES — § 5 provides no authority to dictate technical medium; shadow-binds statutory discretion over documentary form; circular's own provision preserves form discretion. Circular authority: ABSENT — in direct tension with circular's "nødvendig form" language. Veileder sub-instrument overrides circular proportionality language with no authority to do so. **SCALE FLAG:** YES — IT system inaccessibility confirmed in Averøy, Giske, Båtsfjord, Nav Àvjovàrri; state–municipal IT split creates technical compliance barrier irresolvable at local level. **PURPOSE:** INTERNAL CONTROL — records management and audit trail function; no bearing on any service outcome. **BURDEN DESCRIPTION:** Risk measures must be logged specifically in designated IT systems; where systems are technically inaccessible, creates absolute compliance barrier regardless of effort; no alternative pathway or proportionality escape; adds a medium-specification compliance layer on top of the substantive documentation already required by PI-5.15 and PI-5.16. **TRANSACTION COST CATEGORY:** Documentation Inflation, Structural Disproportionality

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REQUIREMENT ID: PI-5.18 **PROVISION TEXT:** A formal assessment and documentation of residual risk after implemented measures must be performed. **LEGAL AUTHORITY:** YES —

no textual basis in § 5 for residual risk analysis; transforms open evaluative judgment into mandatory fixed procedure; risk management methodology transplanted without circular or statutory authority. Circular authority: ABSENT. **SCALE FLAG:** YES — adds third stage to multi-stage formal risk cycle; ROS analyses confirmed as scale-sensitive failures in Hjelmeland, Sør-Varanger, Våler, Nesna, Årdal, Målselv. **PURPOSE:** INTERNAL CONTROL — organizational risk governance; no direct pathway to any user case outcome. **BURDEN DESCRIPTION:** Formal secondary assessment after every risk measure implementation; produces a third distinct documentation artifact in a four-stage compliance cycle (mapping → measures → IT logging → residual assessment) triggered by every user meeting; no user benefit accrues from the documentation regardless of how carefully it is completed. **TRANSACTION COST CATEGORY:** Documentation Inflation, Procedural Duplication, Combined Burden

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REQUIREMENT ID: PI-5.19 **PROVISION TEXT:** Comprehensive documentation of all reported HMS deviations and their handling must be maintained. **LEGAL AUTHORITY:** YES — replaces open "nødvendig dokumentasjon" standard with fixed unqualified obligation; HMS/labor law framework; removes circular's proportionality language. Circular authority: ABSENT. **SCALE FLAG:** YES — [D] dominant mechanism across corpus; HMS documentation is part of cumulative internal control apparatus burden. **PURPOSE:** INTERNAL CONTROL — workplace safety archive function; no individual user case affected by existence or absence of this record. **BURDEN DESCRIPTION:** Permanent comprehensive archive of all HMS deviation reports and their resolution outcomes; every incident from PI-5.12 through PI-5.18 generates a final archived record; system access required; archive must be maintained, organized, and retrievable at inspection; same IT access barriers that affect deviation software (PI-5.5) and fagsystemer (PI-5.17) apply here. **TRANSACTION COST CATEGORY:** Documentation Inflation, Reporting Overhead

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COMPARATIVE ANALYTICAL NOTE: DEVIATION BETWEEN THE TWO AUDITS

The structural divergence between the two audits can now be stated precisely.

Starting from the circular (prior audit): Eight requirements identified. All eight have circular authority by definition — they are contained within the circular text. Five are classified as [INTERNAL CONTROL] or [MIXED] with identified transaction costs. The prior audit cannot detect anything outside the circular's own text.

Starting from the Process Inflation findings (this audit): Nineteen requirements identified. Seven have circular authority (PI-5.1 through PI-5.7). **Twelve have no circular authority whatsoever** (PI-5.8 through PI-5.19). Of those twelve: six have no statutory basis in § 5 and belong to a different legal domain (labor law / AML); three have no statutory basis in § 5 and operate solely through veileder authority; two originate in a Kommunebrev, one of which operates only in an advisory register; one formalizes a partnership agreement

obligation with no legal source in social services law. All twelve lack both circular authority and direct statutory authority in § 5.

The eleven requirements invisible from the circular constitute, in total, an additional compliance infrastructure running parallel to the § 5 circular framework: a four-stage formal risk management cycle (PI-5.15 through PI-5.18) for all user meetings, a workplace safety incident reporting and documentation system (PI-5.12, PI-5.13, PI-5.19), a child impact screening mandate embedded in control routines (PI-5.10, PI-5.14), a named-role accountability formalization (PI-5.11), and a directed management review obligation (PI-5.8). None of these are visible from within the circular. All of them impose transaction costs on the same caseworkers and NAV leaders whose capacity is already confirmed as exhausted by the circular's own eight requirements.

This is the sludge that the Process Inflation lens exposes and the circular-only audit cannot reach.

SLUDGE AUDIT — § 6 OPPLÆRING AV KOMMUNENS PERSONELL

Systematic Sludge Audit of the Administrative Circular Framework

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PRELIMINARY METHODOLOGICAL NOTE

Visibility comparison: Process Inflation Findings vs. circular paragraph alone

The Process Inflation Findings (Reference Document) enumerate **13 requirements** for § 6. The circular paragraph in the Context Document makes visible **4** of those requirements (PROC-REQ-6.1 through PROC-REQ-6.4). The remaining **9 requirements** have no textual presence in the circular at all and are entirely invisible from a reading of the circular paragraph alone. This means that **69 percent of the operative normative burden attached to § 6** in the current administrative framework cannot be identified by examining the primary normative instrument that governs casework practice.

Requirements with no textual presence in the circular:

Requirement	Source Instrument	Instrument Type
PROC-REQ-6.5	Kommunebrev 2025	(a) Kommunebrev
PROC-REQ-6.6	Standard for trygge brukermøter i NAV	(c) Standard document
PROC-REQ-6.7	Standard for trygge brukermøter i NAV	(c) Standard document
PROC-REQ-6.8	Barnets beste — veileder	(b) Veileder
DOC-REQ-6.1	Standard for trygge brukermøter i NAV	(c) Standard document
DOC-REQ-6.2	Veileder til standard for trygge brukermøter i NAV	(d) Guidance document attached to a standard
DOC-REQ-6.3	Veileder til standard for trygge brukermøter i NAV	(d) Guidance document attached to a standard

DOC-REQ-6.4	Veileder til standard for trygge brukermøter i NAV	(d) Guidance document attached to a standard
DOC-REQ-6.5	Veileder til standard for trygge brukermøter i NAV	(d) Guidance document attached to a standard

This structural observation establishes the analytical value of using the Process Inflation Findings as the reference document. A circular-only analysis would identify 4 requirements and conclude that § 6 presents modest procedural complexity. The Process Inflation Findings reveal instead that 9 additional obligations — sourced from a Kommunebrev, a standard, a veileder, and four guidance documents attached to that standard — operate invisibly alongside the circular, creating a normative burden that cannot be traced back to the primary instrument through which caseworkers and NAV leaders are expected to understand their obligations.

STEP 1 — IDENTIFICATION OF ALL REQUIREMENTS

Requirement 1 Exact obligation: Nødvendig opplæring shall ensure that each employee has sufficient knowledge and competence to carry out their tasks. Source instrument: Circular (R-35 § 6) — PROC-REQ-6.1 Type: Explicit Circular visibility: PRESENT

Requirement 2 Exact obligation: Training and competence development shall be provided based on the employee's individual and current needs (individualized methodology mandated). Source instrument: Circular (R-35 § 6) — PROC-REQ-6.2 Type: Explicit Circular visibility: PRESENT

Requirement 3 Exact obligation: The municipality and Nav-leader shall, through management systems and internal controls, facilitate and ensure that employees have the necessary knowledge to resolve statutory tasks. Source instrument: Circular (R-35 § 6) — PROC-REQ-6.3 Type: Explicit Circular visibility: PRESENT

Requirement 4 Exact obligation: Training and competence development should (bør) also be based on feedback from complaint processing, audits, and cooperation with user and voluntary organizations. Source instrument: Circular (R-35 § 6) — PROC-REQ-6.4 Type: Explicit Circular visibility: PRESENT

Requirement 5 Exact obligation: Statsforvalteren and Nav fylke/region shall (mandatory) collaborate at regional level on training directed at the Nav office. Source instrument: Kommunebrev 2025 — PROC-REQ-6.5 Type: Explicit Circular visibility: ABSENT

Requirement 6 Exact obligation: Units that hold user meetings shall have a plan ensuring all employees receive systematic and necessary training, practice, and exercises in prevention and handling of violence and threat situations. Source instrument: Standard for trygge brukermøter i NAV — PROC-REQ-6.6 Type: Explicit Circular visibility: ABSENT

Requirement 7 Exact obligation: Employees must (må) have completed training before they conduct user meetings. Source instrument: Standard for trygge brukermøter i NAV — PROC-REQ-6.7 Type: Explicit Circular visibility: ABSENT

Requirement 8 Exact obligation: Assessment of children's best interests shall be part of onboarding training and ongoing professional development of employees (framed as a checklist question in the veileder). Source instrument: Barnets beste — veileder — PROC-REQ-6.8 Type: Implicit (operationally assumed by the framing of the checklist question as a compliance indicator) Circular visibility: ABSENT

Requirement 9 Exact obligation: Units must have a documented plan ensuring all employees receive systematic training, practice, and exercises in violence and threat handling. Source instrument: Standard for trygge brukermøter i NAV — DOC-REQ-6.1 Type: Explicit Circular visibility: ABSENT Note: Substantively identical to Requirement 6; appears to be a reduplicated requirement from the same standard, presenting the same obligation in procedural documentation framing rather than process framing.

Requirement 10 Exact obligation: An overview must be kept documenting which employees have received which forms of training and when. Source instrument: Veileder til standard for trygge brukermøter i NAV — DOC-REQ-6.2 Type: Explicit Circular visibility: ABSENT

Requirement 11 Exact obligation: Training of employees and internal users must be formally documented. Source instrument: Veileder til standard for trygge brukermøter i NAV — DOC-REQ-6.3 Type: Explicit Circular visibility: ABSENT

Requirement 12 Exact obligation: A specific overview must be maintained documenting which employees have completed training measures related to security, violence, and threats. Source instrument: Veileder til standard for trygge brukermøter i NAV — DOC-REQ-6.4 Type: Explicit Circular visibility: ABSENT

Requirement 13 Exact obligation: A register must be maintained tracking exactly who has completed basic HSE training (HMS-grunnopplæring). Source instrument: Veileder til standard for trygge brukermøter i NAV — DOC-REQ-6.5 Type: Explicit Circular visibility: ABSENT

STEP 2 — LEGAL AUTHORITY CHECK

Requirement 1 Direction 1 — Circular authority: YES. The requirement restates the substantive standard explicitly laid out in the § 6 circular paragraph. Direction 2 — Statutory authority: YES. This requirement gives operational content to the statutory duty ("nødvendig opplæring") in § 6 of the Social Services Act and constitutes the definitional minimum for what that duty entails. No authority gap identified.

Requirement 2 Direction 1 — Circular authority: YES. The individualization requirement is textually present in the circular. Direction 2 — Statutory authority: PARTIAL. As flagged in the Process Inflation Findings (PROC-REQ-6.2, Step 3): "The statutory text 'nødvendig

opplæring' leaves the methodology and approach to training entirely open for the municipality, but the circular mandates individualization as the exclusive approach, thereby eliminating the municipality's freedom to choose standardized or group-based training methods." The circular converts an open statutory norm into a mandatory methodological specification that has no explicit anchor in § 6. Finding from Reference Document: Step 3, Requirement 2 — classified as ASSESS-PROC with ambiguous legal authorization. FIRST-ORDER STATUTORY GAP: Circular authority is present but the circular adds mandatory content not derivable from the statute.

Requirement 3 Direction 1 — Circular authority: YES. The requirement is textually present in the circular. Direction 2 — Statutory authority: PARTIAL. As flagged in the Process Inflation Findings (PROC-REQ-6.3, Step 3): "The law assigns responsibility exclusively to the municipality and leaves the choice of organizational instruments completely open, whereas the circular impermissibly mandates specific mechanisms (management systems and internal control) and extends the legal duty to an actor not named in the law (Nav-leder)." Section 6 names only kommunen; the circular adds Nav-leder as a co-duty-bearer and mandates specific administrative instruments. Finding from Reference Document: Step 3, Requirement 3 — classified as REPORTING, categorized as PROC-DOC with ambiguous authorization. FIRST-ORDER STATUTORY GAP: Circular authority present; statutory authority partial due to extension beyond statutory text.

Requirement 4 Direction 1 — Circular authority: YES. Direction 2 — Statutory authority: YES. The Process Inflation Findings confirm this requirement uses "bør" language and falls within the municipality's open discretion. No escalation or gap identified. No authority gap.

Requirement 5 Direction 1 — Circular authority: NO. Requirement derives from Kommunebrev 2025; absent from circular paragraph entirely. First-order authority gap: operates entirely outside the circular framework. Direction 2 — Statutory authority: NO. Process Inflation Findings (PROC-REQ-6.5, Step 3): "Section 6 names the municipality ('kommunen') as the sole duty-bearer and is completely silent on state actors, providing absolutely no textual basis to impose mandatory collaboration duties on Statsforvalteren or Nav fylke/region." **DOUBLE AUTHORITY GAP: Circular authority ABSENT; statutory authority NO.**

Requirement 6 Direction 1 — Circular authority: NO. Derives from Standard for trygge brukermøter i NAV; not referenced in circular paragraph. First-order authority gap. Direction 2 — Statutory authority: NO. Process Inflation Findings (PROC-REQ-6.6, Step 3): "The open normative term 'nødvendig opplæring' grants full methodological discretion to the municipality, but the circular wrongly replaces this freedom with four fixed, mandatory requirements simultaneously: a specific documented form (a plan), a specific content area, structured delivery ('systematisk'), and a universal coverage requirement." **DOUBLE AUTHORITY GAP: Circular authority ABSENT; statutory authority NO.**

Requirement 7 Direction 1 — Circular authority: NO. Derives from Standard for trygge brukermøter i NAV; not referenced in circular. First-order authority gap. Direction 2 — Statutory authority: NO. Process Inflation Findings (PROC-REQ-6.7, Step 3): "The law provides no temporal or sequential parameters for training and does not impose individual employee obligations, yet the circular establishes an absolute prohibition ('må') that

eliminates all of the municipality's operational flexibility over timing and sequencing." **DOUBLE AUTHORITY GAP: Circular authority ABSENT; statutory authority NO.**

Requirement 8 Direction 1 — Circular authority: NO. Derives from Barnets beste — veileder; no reference in circular. First-order authority gap. Direction 2 — Statutory authority: PARTIAL. The substantive principle of barnets beste has constitutional standing (Grunnloven § 104) and international law anchoring (FNs barnekonvensjon art. 3). However, § 6 of the Social Services Act does not specifically require inclusion of child's best interest assessment as a mandatory training topic. The authority for the specific training obligation in this framing is sub-legal. Finding from Reference Document: Step 2, Requirement 8 — classified as SUBSTANTIVE LEGAL OBLIGATION touching standard-discretion. **DOUBLE AUTHORITY GAP: Circular authority ABSENT; statutory authority PARTIAL under § 6 specifically.**

Requirement 9 Direction 1 — Circular authority: NO. Same instrument as Requirement 6; same absence from circular. Direction 2 — Statutory authority: NO. Identical analysis to Requirement 6 applies. The DOC-REQ framing does not add legal authority. Finding from Reference Document: Step 3, Requirement 9 — "the law ('nødvendig opplæring') is entirely open as to content and form without any plan requirement." **DOUBLE AUTHORITY GAP: Circular authority ABSENT; statutory authority NO.** Additional observation: This requirement duplicates Requirement 6 from the same source instrument; the duplication itself represents internal regulatory inflation within the Standard and its attached veileder.

Requirement 10 Direction 1 — Circular authority: NO. Derives from Veileder til standard for trygge brukermøter i NAV; not referenced in circular. First-order authority gap. Direction 2 — Statutory authority: NO. Process Inflation Findings (DOC-REQ-6.2, Step 3): "Section 6 is exclusively a training responsibility provision and contains zero legal authority or delegation for imposing documentation or record-keeping obligations." **DOUBLE AUTHORITY GAP: Circular authority ABSENT; statutory authority NO.**

Requirement 11 Direction 1 — Circular authority: NO. Direction 2 — Statutory authority: NO. Process Inflation Findings (DOC-REQ-6.3, Step 3): "The word 'nødvendig' concerns training content and coverage only; Section 6 provides absolutely no textual or structural basis to enforce a documentation or recording obligation." **DOUBLE AUTHORITY GAP: Circular authority ABSENT; statutory authority NO.**

Requirement 12 Direction 1 — Circular authority: NO. Direction 2 — Statutory authority: NO. Process Inflation Findings (DOC-REQ-6.4, Step 3): "The law neither authorizes administrative documentation obligations nor specifies violence and security training as a mandatory subject area requiring corresponding record-keeping." **DOUBLE AUTHORITY GAP: Circular authority ABSENT; statutory authority NO.**

Requirement 13 Direction 1 — Circular authority: NO. Direction 2 — Statutory authority: NO. Process Inflation Findings (DOC-REQ-6.5, Step 3): "Basic HSE training ('HMS-grunnopplæring') is governed entirely by the Working Environment Act (AML), and Section 6 of the Social Services Act neither references HSE training nor authorizes documentation requirements for it." **DOUBLE AUTHORITY GAP: Circular authority ABSENT; statutory authority NO. CATEGORY ERROR: This requirement belongs to the legal domain of labor law (arbeidsmiljøloven), not social services law. Its presence**

in the normative framework attached to § 6 constitutes an erroneous importation of an AML obligation into a Social Services Act instrument.

STEP 3 — SCALE AND PROPORTIONALITY CHECK

The Anchor Document (Volume Driver Findings) focuses primarily on §§ 17–20a; however, the mechanisms identified — particularly [D] Documentation Apparatus, [C] Coordination Infrastructure, [K] Competence Sustainability, and Cluster 2 (Internal Control Apparatus) — are structurally applicable to the § 6 obligations, several of which operate as preconditions for or components of the internal control systems that generate volume-sensitive burdens in those domains.

Requirement 1 Scale flag: NO. The basic requirement to ensure adequate competence is a substantive obligation that applies regardless of scale. No disproportionate organizational demand is embedded.

Requirement 2 Scale flag: PARTIAL. Individualized training design presupposes the capacity to assess each employee's needs separately and track individual development. In offices of 3–8 employees, the formal individualization requirement creates a minor but real administrative overhead for NAV leaders who already manage frontline caseloads. The Anchor Document's finding that NAV leaders in small offices are simultaneously caseworkers, approvers, and quality controllers (Cluster 2) means individualization tracking is absorbed into already-overloaded management capacity. Anchor finding: Cluster 2 — Internal Control Infrastructure Stack; management overstretch finding across Hjelmeland, Båtsfjord, Vik, Nav Numedal.

Requirement 3 Scale flag: YES. The requirement to implement and document management systems and internal controls for training directly maps onto Cluster 2 of the Anchor Document (Internal Control Apparatus). The Anchor Document finds that the internal control architecture "is designed for organizations with dedicated quality-assurance roles and administrative back-office capacity. In offices of 5 to 15 people, the cumulative demand falls on the NAV leader." The training-specific internkontroll obligation is a component of this cumulative architecture. Anchor finding: Cluster 2 — Internal Control Infrastructure Stack; findings from Nesna, Giske, Grue, Averøy, Sør-Varanger, Nav Hallingdal confirming cumulative burden exceeds small-office capacity. Note: Requirement 3 lacks full statutory authority (Step 2) while simultaneously imposing a scale-disproportionate burden — meaning the burden it creates is unsupported by the circular framework.

Requirement 4 Scale flag: NO. The "bør" framing leaves the municipality free to implement this as capacity allows. No minimum organizational threshold is imposed.

Requirement 5 Scale flag: PARTIAL. Regional coordination between Statsforvalteren and Nav fylke/region requires dedicated coordination capacity from both parties. For Nav fylke/region, maintaining systematic regional training oversight alongside other supervisory and operational functions imposes a fixed overhead that may be disproportionate relative to actual training gaps in small offices. Anchor finding: General finding on coordination

infrastructure [C] — the Anchor Document identifies coordination overhead as structurally burdensome in small inter-agency settings. Note: Requirement 5 has no circular authority. The scale-related burden it imposes is entirely unsupported by the circular framework.

Requirement 6 Scale flag: YES. The requirement to produce and maintain a formal training plan, ensure systematic coverage of all employees, and address violence and threat prevention as a specific content domain assumes dedicated HR and administrative planning capacity. In micro-offices, plan production and maintenance falls on the NAV leader alongside frontline casework. Anchor finding: Cluster 2 — Internal Control Apparatus; documentation requirements presuppose back-office capacity; findings across Nesna, Giske, Averøy confirming small offices cannot sustain dedicated administrative compliance infrastructure. Note: Requirement 6 has no circular authority. Its scale-related burden is entirely without circular foundation.

Requirement 7 Scale flag: PARTIAL. In offices with very small and newly onboarded workforces, the prohibition on conducting user meetings before training completion could create short-term operational bottlenecks. More structurally: the requirement to track and verify individual training completion before scheduling imposes a gatekeeping administrative function that assumes dedicated HR capacity. Anchor finding: Mechanism [D] Documentation Apparatus — tracking who has completed what requires record-keeping infrastructure that small offices lack. Note: Requirement 7 has no circular authority.

Requirement 8 Scale flag: PARTIAL. Integrating child's best interest assessment into both onboarding programs and ongoing professional development requires curriculum design capacity that smaller NAV offices cannot develop internally. The Anchor Document confirms that child-perspective obligations are a major source of scale-sensitive compliance failures under §§ 18–19. Anchor finding: Child-Perspective Documentation Cluster (Cluster 3); findings from 15+ municipalities on inability to sustain child-perspective competence without sufficient case volume.

Requirement 9 Scale flag: YES. Identical analysis to Requirement 6. Duplication of the same plan obligation compounds the administrative load without adding legal authority. Anchor finding: Same as Requirement 6. Note: Requirement 9 has no circular authority.

Requirement 10 Scale flag: YES. Maintaining a register of training types and dates per employee requires a dedicated HR record-keeping system. In small offices with 3–8 employees, this function falls on the NAV leader and creates ongoing data entry obligations with no circular guidance. Anchor finding: Mechanism [D] Documentation Apparatus — dominant empirical driver across Set B; approximately 65 findings confirm that documentation obligations presuppose back-office capacity that small offices structurally lack. Note: Requirement 10 has no circular authority. The documentation burden it imposes falls entirely outside any framework the circular provides.

Requirement 11 Scale flag: YES. Same analysis as Requirement 10; partially duplicates it by requiring general documentation of all employee and internal user training. Anchor finding: Same [D] mechanism finding. Note: Requirement 11 has no circular authority.

Requirement 12 Scale flag: YES. A specific sub-register for security, violence, and threat training requires maintenance parallel to the general training record. In small offices, running

multiple parallel registers is an administrative overhead that compounds the Cluster 2 burden. Anchor finding: Mechanism [D] Documentation Apparatus, Cluster 2. Note: Requirement 12 has no circular authority.

Requirement 13 Scale flag: YES. The obligation concerns AML-governed HMS training, but if enforced through the social services normative framework, it creates a register obligation that the NAV leader would be responsible for maintaining despite the underlying obligation belonging to a different legal regime with its own compliance infrastructure. Anchor finding: Cluster 2 — IT system fragmentation and cross-system compliance; the Anchor Document identifies mismatched state-municipal IT systems as a specific compliance burden (Compilo/ASYS inaccessibility findings from Averøy, Giske, Båtsfjord). Note: Requirement 13 has no circular authority and belongs to a different legal domain.

STEP 4 — PURPOSE CLASSIFICATION

Requirement 1 Classification: [USER NEED] Justification: The language "slik at tjenestene blir forsvarlige og i tråd med lovens formål" directly links the training obligation to the quality and legal security of service delivery to users. The requirement defines the minimum content of competence in terms of what users receive, not in terms of what administrators record. Its purpose is substantively protective.

Requirement 2 Classification: [MIXED] — primary purpose USER NEED; secondary purpose INTERNAL CONTROL Justification: The individualization requirement ("ut fra den ansattes individuelle og aktuelle behov") primarily serves service quality by ensuring training is actually effective for each employee. However, the mandatory individualization methodology also functions as a quality assurance process that the organization must demonstrate has been followed, which creates an internal control dimension — the municipality must be able to show how it assessed individual needs. The primary purpose remains user-facing because the output of individualized training is improved caseworker competence.

Requirement 3 Classification: [INTERNAL CONTROL] Justification: The requirement explicitly names administrative instruments — "styringssystemer og internkontroll" — as the mandated mechanisms for fulfilling the training obligation. The language "legge til rette for og påse" describes a supervisory and monitoring function performed by the organization upon itself. While competent employees ultimately serve users, this requirement does not specify any user-facing outcome: it specifies an organizational management process for tracking and ensuring compliance with the training standard. The source instrument's language ("gjennom styringssystemer og internkontroll") makes clear that the requirement's primary function is organizational governance, not direct service quality.

Requirement 4 Classification: [USER NEED] Justification: Grounding training content in feedback from complaint processing, audits, and user organization cooperation ("tilbakemeldinger mottatt gjennom klagebehandling og tilsyn") directly links competence development to the identified shortcomings in actual service provision to users. The "bør"

framing confirms this is advisory guidance aimed at improving substantive quality rather than an administrative compliance obligation.

Requirement 5 Classification: [INTERNAL CONTROL] Justification: The requirement addresses coordination between state administrative bodies (Statsforvalteren and Nav fylke/region) at a structural level removed from direct user service. The purpose is administrative alignment of training activities between state actors. No user-facing outcome is specified; the requirement governs who coordinates with whom in the training governance architecture, not what users receive as a result. Note: Classifying this as [INTERNAL CONTROL] in relation to social services users, per the instruction to assess category error requirements in terms of their home function relative to the social services user. The requirement serves state administrative management functions, not user outcomes.

Requirement 6 Classification: [MIXED] — primary purpose INTERNAL CONTROL; secondary purpose related to user and employee safety Justification: The requirement to produce and maintain a plan for violence and threat training serves the safety of employees in user-facing settings. To the extent that employees are better equipped to handle threatening situations, users indirectly benefit from more stable and professionally managed encounters. However, the specific mandate — that a documented plan must exist — is primarily an administrative compliance instrument. The plan is not the training itself; it is the formal evidence that the organization has planned for training. The primary purpose of the document requirement is audit readiness and internal governance, not direct service quality.

Requirement 7 Classification: [MIXED] — primary purpose related to employee safety in user interaction; secondary INTERNAL CONTROL Justification: The prohibition on conducting user meetings before training completion serves both employee safety and the quality of user interactions. An untrained employee may handle threatening situations less safely, which can harm both employee and user. However, the absolute framing ("må ha fått opplæring") and the absence of any flexibility for the municipality creates a precondition that functions primarily as a compliance gate rather than a substantive safety measure — particularly because the substance of "necessary training" is not defined, meaning the gate-keeping function defaults to administrative tracking of whether training has occurred, not whether the employee is actually prepared.

Requirement 8 Classification: [USER NEED] Justification: Integrating barnets beste assessments into training directly improves the substantive quality of casework for families with children — the most vulnerable group in the social services population. The veileder frames this as a checklist question directed at training content, not at administrative record-keeping. While the obligation is implicit and framed as a question rather than a command, its purpose is unambiguously to improve the quality of assessments affecting real children in the caseload.

Requirement 9 Classification: [INTERNAL CONTROL] Justification: As a duplicate of Requirement 6, this requirement adds no safety or user-protection value beyond what Requirement 6 already captures. The DOC-REQ framing makes clear that this is a documentation obligation — the plan must exist as a document — rather than a training obligation. The primary purpose is audit-preparedness: having a documented plan available for supervisory inspection.

Requirement 10 Classification: [INTERNAL CONTROL] Justification: Maintaining an overview of who received which training and when is a record-keeping obligation. The source instrument (Veileder til standard) specifies an administrative register as the deliverable. This register serves supervisory auditing functions and internal management reporting; it does not directly bear on whether any individual employee actually becomes more competent or whether any individual user receives better service. The requirement exists so that the organization can demonstrate to inspectors what training has occurred.

Requirement 11 Classification: [INTERNAL CONTROL] Justification: The requirement to formally document completed training is functionally identical in purpose to Requirement 10: it creates a paper trail for supervisory inspection. The formulation "krav til dokumentert opplæring" is explicitly documentation-forward. No user-facing purpose is stated or implied in the source instrument.

Requirement 12 Classification: [INTERNAL CONTROL] Justification: A sub-register specifically for security, violence, and threat training is a specialized administrative record. Its purpose is to enable management or inspectors to verify that this specific category of training has been delivered. No connection to user outcomes is present in the source language.

Requirement 13 Classification: [INTERNAL CONTROL] — assessed relative to social services users Justification: HMS-grunnopplæring is a statutory employer obligation under AML, governing workplace health and safety. Its documentation, even if it incidentally protects employees who work with users, serves labor law compliance functions, not social services delivery quality. In relation to social services users, this requirement has no direct bearing on case outcomes, service quality, or user protection. Its purpose is entirely administrative in the social services context — and is moreover a purpose that belongs to a different legal regime.

STEP 5 — TRANSACTION COST CHARACTERIZATION

Requirement 1 [USER NEED] No transaction cost burden identified. This requirement defines the substantive standard caseworkers must meet; it does not generate administrative overhead separate from the actual delivery of competent service.

Requirement 2 [MIXED] Administrative demand: The NAV leader must assess each individual employee's current knowledge level and specific training needs, design or procure individualized training responses, and — implicitly — be able to demonstrate the individualization methodology if inspected. In a small office with 5–12 employees, this requires periodic documented individual assessments for each staff member. The obligation to do this "ut fra den ansattes individuelle og aktuelle behov" creates a formal HR function that, in medium and large offices, is performed by a dedicated manager or HR administrator. In small offices, it falls on the NAV leader alongside frontline casework. This is a modest but real overhead. Circular guidance: The circular addresses this requirement, so guidance exists, though the circular does not provide the municipality with tools or templates for the individualization process.

Requirement 3 [INTERNAL CONTROL] Administrative demand: The NAV leader must maintain documentation demonstrating that management systems and internkontroll processes actively ensure employee competence. In practice this means: (a) articulating a formal policy linking training to the internkontroll system; (b) producing or updating internkontroll documentation that references the § 6 training obligation; (c) being able to demonstrate during supervisory inspection how the management system operationalizes the training duty; and (d) tracking whether the competence obligations attached to specific tasks are being met through formal management review. The requirement also extends formal duty to Nav-leder specifically — an actor not named in the statute — meaning the NAV leader carries a personal compliance responsibility that is a creation of the circular, not the law. In the context of the Anchor Document's Cluster 2 findings, this requirement is a component of the cumulative internal control burden that consistently exceeds the capacity of small NAV offices. Note on circular guidance: The circular addresses this requirement, providing a formal basis for the obligation. However, the extension of duty to Nav-leder beyond the statutory text means the NAV leader is complying with an obligation that the statute itself does not directly impose on them.

Requirement 4 [USER NEED] No transaction cost burden identified for formal compliance purposes. The "bør" framing means this is advisory guidance; no administrative demand to demonstrate compliance is created.

Requirement 5 [INTERNAL CONTROL] Administrative demand: Statsforvalteren and Nav fylke/region must establish and maintain a formal regional collaboration mechanism on training, including at minimum: regular coordination meetings, possibly a joint planning process, documentation of what was planned and decided, and some mechanism for ensuring that training directed at Nav offices reflects this regional collaboration. For Nav fylke/region, this creates a standing coordination function with another state actor (Statsforvalteren) on a topic — municipal employee training — that § 6 of the Social Services Act assigns exclusively to the municipality. The obligation has no circular foundation, meaning the actors subject to it receive no guidance on what the collaboration should look like, how often it should occur, or what documentation is required. Caseworkers and NAV leaders at the office level are not directly burdened by this requirement, but the absence of regional coordination could indirectly deprive them of state-supported training resources that the Kommunebrev assumes will exist. Note: The transaction cost it imposes falls entirely outside any framework the circular provides guidance for.

Requirement 6 [MIXED] Administrative demand: The NAV leader must: (a) produce a formal written plan for violence and threat training; (b) ensure the plan covers all employees systematically; (c) schedule and document training, practice, and exercises; (d) update the plan periodically. In offices with a high turnover of user-facing staff, maintaining the plan as a live document rather than a one-time exercise requires ongoing administrative attention. The plan also creates an audit exposure: if a supervisor inspects and the plan does not exist, is outdated, or does not demonstrate systematic coverage, a formal violation is triggered. The obligation to produce a specific document (a plan) as evidence of compliance — rather than demonstrating safety preparation through any method chosen by the municipality — is the core transaction cost element. Note: This obligation has no circular authority. Caseworkers and NAV leaders must comply with an obligation that the primary normative instrument governing their work does not address.

Requirement 7 [MIXED] Administrative demand: The NAV leader must: (a) track which employees have completed the required training; (b) maintain a system ensuring no employee conducts a user meeting until training completion is documented; (c) manage scheduling conflicts where new or temporary employees may need to be kept from user-facing work pending training. This creates a gatekeeping administrative function — a pre-condition check before any employee can perform core job duties. In small offices relying on part-time or temporary staff, this can create short-term service capacity constraints. The obligation to implement and maintain this gate (rather than simply ensuring training is completed within a reasonable period) imposes a specific administrative process. Note: This obligation has no circular authority.

Requirement 8 [USER NEED] No transaction cost burden identified in the formal compliance sense. The requirement is framed as a checklist question, not as a mandatory deliverable. The NAV leader should consider this in training design, but no specific administrative record or document is demanded. Note: To the extent that a supervisor might treat the veileder checklist question as a compliance indicator during inspection, there is a latent shadow-binding risk — a NAV leader uncertain about the status of this requirement may over-invest in formal documentation as a precaution. This is a clarification risk rather than a direct transaction cost.

Requirement 9 [INTERNAL CONTROL] Administrative demand: Functionally identical to Requirement 6. The duplication creates a doubled administrative exposure: a supervisor could cite non-compliance under both the Standard (Requirement 6) and separately under the DOC-REQ framing (Requirement 9), even though the underlying obligation is the same. The duplication adds no substantive safety value but creates regulatory redundancy that may lead NAV leaders to produce separate plan documents to satisfy each source instrument independently. Note: This obligation has no circular authority.

Requirement 10 [INTERNAL CONTROL] Administrative demand: The NAV leader must establish and maintain a training register documenting, for each employee: (a) what forms of training they have received; (b) when they received each form. This register must be maintained as an ongoing administrative record, updated with each new training event. In an office with 10–15 employees receiving multiple training inputs per year, this is a non-trivial data management function. The register must be available for supervisory inspection. No circular guidance exists on the required format, frequency of updating, retention period, or what "forms of training" must be tracked. Note: The transaction cost it imposes falls entirely outside any framework the circular provides guidance for. Caseworkers and NAV leaders must maintain a compliance record for which neither the obligation nor the required format is addressed in the primary normative instrument.

Requirement 11 [INTERNAL CONTROL] Administrative demand: All training of employees and internal users must be formally documented. This overlaps substantially with Requirement 10 but broadens the scope to include internal users (not just employees). The formal documentation obligation means that informal, conversational, or on-the-job training events may also need to be recorded if they are to count as training for compliance purposes. This creates an ongoing administrative documentation burden for every training event, regardless of type or scale. Note: No circular authority. No circular guidance on what documentation satisfies the requirement.

Requirement 12 [INTERNAL CONTROL] Administrative demand: A separate sub-register for security, violence, and threat-related training must be maintained parallel to the general training register (Requirement 10). This is an additional specialized record-keeping obligation. The NAV leader must ensure this register is distinct, current, and covers all relevant training events. In practice, running two overlapping registers — general training (Req 10) and security training (Req 12) — for the same employees creates administrative duplication. Note: No circular authority.

Requirement 13 [INTERNAL CONTROL] Administrative demand: A register of HMS-grunnopplæring completion per employee must be maintained. HMS-grunnopplæring is an AML obligation; the employer (the municipality, not the NAV office as such) is the duty-bearer under AML. If NAV leaders are expected to maintain this register as part of § 6 compliance, they are performing a function that: (a) belongs to a different legal regime; (b) is already required elsewhere in the employer's administrative framework; (c) creates a duplication of whatever record the municipality maintains for AML purposes. The NAV leader may be tracking the same training event in multiple registers across two legal frameworks. Note: No circular authority. The transaction cost of this requirement falls outside the Social Services Act framework entirely and duplicates an existing AML compliance function. Caseworkers and NAV leaders are asked to comply with a labor law obligation reframed as a social services documentation obligation, with no circular guidance on what the § 6-framework version of this record looks like or why it is necessary separately from the AML record.

STEP 6 — CATALOG ENTRIES

REQUIREMENT ID: §6-R-01 **PROVISION TEXT:** Necessary training shall ensure that each employee has sufficient knowledge and competence to carry out their tasks, so that services are proper and in accordance with the law's purpose. **SOURCE INSTRUMENT:** Circular — R-35 § 6 (PROC-REQ-6.1) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — restates the minimum definitional content of the statutory duty in § 6 of the Social Services Act **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. This requirement defines the substantive standard; compliance is achieved through the act of delivering competent training, not through separate administrative processes. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §6-R-02 **PROVISION TEXT:** Training and competence development shall be provided based on the employee's individual and current needs. **SOURCE INSTRUMENT:** Circular — R-35 § 6 (PROC-REQ-6.2) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — the statutory text "nødvendig opplæring" leaves methodology entirely open; the circular mandates individualization as the exclusive

permissible approach, eliminating the municipality's freedom to choose standardized or group-based training. (Reference: PROC-REQ-6.2, Step 3 of Process Inflation Findings) **DOUBLE AUTHORITY GAP:** NO (circular authority present; statutory authority partial only) **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — Requires NAV leaders to conduct individual assessments for each employee, adding HR overhead in small offices where the manager simultaneously performs frontline casework. Anchor Document, Cluster 2 (management overstretch in small offices, Hjelmeland, Båtsfjord findings) **PURPOSE:** MIXED — primary USER NEED (effective training quality); secondary INTERNAL CONTROL (demonstrating individualization methodology to inspectors) **BURDEN DESCRIPTION:** NAV leader must assess and document individual training needs per employee. Modest administrative overhead in small offices; insufficient by itself to constitute a major burden, but contributes to the cumulative management load documented in Cluster 2. Circular provides formal basis for the obligation but no methodology guidance. **KILL LIST CLASSIFICATION:** Category C — Clarification: The circular's use of "shall" for individualization methodology narrows the municipality's discretion beyond what the statute requires. A clarification making explicit that individualized assessment is the default approach — not the only legally permissible one — would restore the local flexibility embedded in the statutory text. **TRANSACTION COST CATEGORY:** Documentation Inflation (minor)

REQUIREMENT ID: §6-R-03 **PROVISION TEXT:** The municipality and Nav-leader shall, through management systems and internal controls, facilitate and ensure that employees have the necessary knowledge to carry out statutory tasks. **SOURCE INSTRUMENT:** Circular — R-35 § 6 (PROC-REQ-6.3) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — § 6 names only the municipality as duty-bearer and leaves organizational instrument choice entirely open; the circular adds Nav-leder as a named duty-bearer and mandates specific instruments (management systems and internal controls). Neither the extension to Nav-leder nor the specification of particular instruments has explicit statutory authority. (Reference: PROC-REQ-6.3, Step 3 of Process Inflation Findings) **DOUBLE AUTHORITY GAP:** NO (circular authority present; statutory authority partial only) **CATEGORY ERROR:** NO **SCALE FLAG:** YES — The internkontroll architecture is directly mapped by the Anchor Document as a dominant volume driver. The requirement to use management systems and internal controls for training governance is a component of the cumulative Cluster 2 burden (Internal Control Apparatus), which exceeds the functional capacity of small offices. Anchor Document, Cluster 2, findings from Nesna, Giske, Averøy, Sør-Varanger, Nav Hallingdal. **PURPOSE:** INTERNAL CONTROL — the requirement specifies organizational governance instruments for ensuring training compliance. The output of this requirement is an administrative governance structure, not directly improved training quality for employees. **BURDEN DESCRIPTION:** NAV leader must maintain formal management documentation demonstrating that internkontroll processes address training obligations; must produce and update training-related components of the office's internkontroll framework; must be able to demonstrate this formally during supervisory inspection. The requirement also creates a personal compliance responsibility for Nav-leder that the statute does not impose on this actor. This burden is a component of the cumulative Cluster 2 load that consistently exceeds small-office management capacity. The circular provides formal basis for the obligation but compounds the statute's open

discretion with mandatory instrument specification. **KILL LIST CLASSIFICATION:** Category B — Status Change: The requirement uses imperative ("skal") language to mandate specific administrative instruments (management systems and internal controls) that the statute does not require, and extends duty to an actor (Nav-leder) not named in the law. The mandatory framing should be reformulated to permissive language — "may use management systems and internal controls" — restoring the municipality's statutory freedom to choose appropriate organizational mechanisms, while making clear that Nav-leder carries responsibility for facilitating compliance without converting this into a personal statutory obligation. **TRANSACTION COST CATEGORY:** Reporting Overhead; Structural Disproportionality (in small offices)

REQUIREMENT ID: §6-R-04 **PROVISION TEXT:** Training and competence development should also be based on feedback from complaint processing, audits, and cooperation with user and voluntary organizations. **SOURCE INSTRUMENT:** Circular — R-35 § 6 (PROC-REQ-6.4) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — falls comfortably within the municipality's open statutory discretion to determine what "necessary training" requires. The "bør" formulation confirms this is advisory guidance, not a binding mandate. (Reference: PROC-REQ-6.4, Step 3 of Process Inflation Findings) **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO — The advisory framing means no minimum organizational capacity is mandated. **PURPOSE:** USER NEED — anchoring training development in feedback from actual case outcomes and user-organization input is a substantively quality-improving guidance measure. **BURDEN DESCRIPTION:** No transaction cost burden identified. The "bør" language leaves implementation entirely to the municipality's discretion. No compliance verification obligation is implied. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §6-R-05 **PROVISION TEXT:** Statsforvalteren and Nav fylke/region shall collaborate at regional level on training directed at the Nav office. **SOURCE INSTRUMENT:** Kommunebrev 2025 (PROC-REQ-6.5) **CIRCULAR AUTHORITY:** ABSENT — Requirement derives entirely from a Kommunebrev; the § 6 circular paragraph contains no reference to Statsforvalteren, Nav fylke/region, or any regional training collaboration obligation. Consequence: this requirement operates entirely outside the circular framework. Any burden it imposes on state actors and — indirectly — on local NAV offices through its effects on training resource availability has no basis in the primary normative instrument for § 6. **LEGAL AUTHORITY:** NO — § 6 names the municipality as the sole duty-bearer and is entirely silent on state actors. The statute provides no basis to impose mandatory collaboration duties on Statsforvalteren or Nav fylke/region in relation to municipal training obligations. (Reference: PROC-REQ-6.5, Step 3 of Process Inflation Findings) **DOUBLE AUTHORITY GAP:** YES — Circular authority ABSENT; statutory authority NO. **CATEGORY ERROR:** NO — The obligation, while outside § 6's scope, is not from a different legal domain; it addresses NAV governance, not labor law or another sector. **SCALE FLAG:** PARTIAL — Regional coordination imposes standing coordination overhead on Statsforvalteren and Nav fylke/region. Anchor Document general coordination infrastructure

[C] findings. Note: this scale-related burden has no circular foundation. **PURPOSE:** INTERNAL CONTROL — The requirement serves state administrative coordination between two state actors; it does not directly produce training outcomes for municipal employees or improved services for users. **BURDEN DESCRIPTION:** Statsforvalteren and Nav fylke/region must establish and maintain a formal regional collaboration mechanism on training for NAV offices — including coordination processes, meeting structures, and documentation of regional training initiatives. No circular guidance exists for what this collaboration should consist of, how it should be documented, or how compliance is assessed. The requirement falls entirely outside the circular framework governing the § 6 obligations to which it is attached. **KILL LIST CLASSIFICATION:** Category A — Removal: The requirement lacks both circular authority and statutory authority under § 6. It imposes a mandatory administrative coordination duty on actors the statute does not name, through an instrument (Kommunebrev) that cannot create binding obligations beyond the circular framework of § 6. It is a candidate for repeal from the § 6 normative framework; any legitimate coordination expectation should be addressed through the governance frameworks applicable to Statsforvalteren and Nav Arbeids- og velferdsdirektorat, not appended sub-legally to a statutory provision that addresses only municipal training obligations. **TRANSACTION COST CATEGORY:** Reporting Overhead; Structural Disproportionality

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REQUIREMENT ID: §6-R-06 **PROVISION TEXT:** Units that hold user meetings shall have a plan ensuring all employees receive systematic and necessary training, practice, and exercises in prevention and handling of violence and threat situations. **SOURCE INSTRUMENT:** Standard for trygge brukermøter i NAV (PROC-REQ-6.6) **CIRCULAR AUTHORITY:** ABSENT — This requirement is sourced from a Standard document with no reference in the § 6 circular paragraph. Consequence: caseworkers and NAV leaders are subject to a mandatory planning and training obligation that the primary normative instrument for § 6 does not acknowledge. Any compliance burden arising from this requirement falls entirely outside the circular's normative framework. **LEGAL AUTHORITY:** NO — The open normative term "nødvendig opplæring" grants full methodological discretion to the municipality; § 6 does not mandate any specific content area for training, does not require a documented plan, and does not impose requirements of systematic delivery or universal employee coverage. The Standard introduces four simultaneous fixed requirements (documented form, specific content, systematic delivery, universal coverage) that have no statutory anchor. (Reference: PROC-REQ-6.6, Step 3 of Process Inflation Findings) **DOUBLE AUTHORITY GAP:** YES — Circular authority ABSENT; statutory authority NO. **CATEGORY ERROR:** NO — The obligation addresses workplace safety in a social services setting; it does not belong to a different sector's legal framework per se, though the content area (violence and threat prevention) has significant overlap with AML-governed workplace safety obligations (see also Requirement 13). **SCALE FLAG:** YES — Producing and maintaining a formal written training plan, with systematic coverage and documented exercises, requires dedicated administrative capacity that small NAV offices lack. Anchor Document, Cluster 2 — internal control documentation requirements presuppose back-office capacity beyond small-office resources; findings from Nesna, Averøy, Giske. Note: the scale-related burden is entirely without circular foundation. **PURPOSE:** MIXED — primary INTERNAL CONTROL (plan production is primarily an

audit-readiness mechanism); secondary relevance to employee safety in user-facing settings (training content has genuine safety value for employees and users) **BURDEN DESCRIPTION:** NAV leader must produce a formal written plan covering: the specific training content area (violence/threat prevention), systematic scheduling across all employees, inclusion of practice and exercises, and maintenance as a live document. The plan must be available for supervisory inspection. Ongoing administrative function with no circular guidance on format, required content depth, update frequency, or what constitutes adequate "systematic" coverage. The transaction cost falls entirely outside any framework the circular provides guidance for. **KILL LIST CLASSIFICATION:** Category A — Removal: The requirement lacks both circular authority and statutory authority under § 6. It imposes mandatory planning obligations through a Standard document that cannot create binding obligations beyond what the statute and circular authorize. Any legitimate workplace safety planning obligation that may exist in this area should be addressed through the AML framework — the appropriate legal domain — rather than through the § 6 normative framework. **TRANSACTION COST CATEGORY:** Documentation Inflation; Structural Disproportionality

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REQUIREMENT ID: §6-R-07 **PROVISION TEXT:** Employees must have completed training before they are permitted to conduct user meetings. **SOURCE INSTRUMENT:** Standard for trygge brukermøter i NAV (PROC-REQ-6.7) **CIRCULAR AUTHORITY:** ABSENT — Derives from a Standard; not referenced in the § 6 circular. Consequence: this absolute prohibition operates entirely outside the circular framework; NAV leaders cannot look to the primary normative instrument for any guidance on what this obligation requires. **LEGAL AUTHORITY:** NO — § 6 provides no temporal or sequential parameters for when training must be completed relative to when employees perform job functions. The statute imposes no individual employee obligations; only the municipality (and through the circular, Nav-leder) carries the training duty. The "må" formulation creates an absolute prohibition that the statute does not authorize. (Reference: PROC-REQ-6.7, Step 3 of Process Inflation Findings) **DOUBLE AUTHORITY GAP:** YES — Circular authority ABSENT; statutory authority NO. **CATEGORY ERROR:** NO — The obligation addresses training sequencing in a social services operational context, not a different legal domain as such. **SCALE FLAG:** PARTIAL — In small offices relying on newly hired, part-time, or temporary employees, the absolute prohibition on conducting user meetings before training completion creates operational bottlenecks and forces the NAV leader to maintain active tracking of training status for all user-facing staff. Anchor Document, Mechanism [D] Documentation Apparatus, and general findings on management capacity constraints in small offices. Note: scale-related burden has no circular foundation. **PURPOSE:** MIXED — primary USER NEED (or more precisely, employee safety in user encounters — an indirect user benefit); secondary INTERNAL CONTROL (compliance gate requiring administrative tracking) **BURDEN DESCRIPTION:** NAV leader must implement and maintain a system for tracking individual employee training completion status and ensuring that only trained employees conduct user meetings. In practice this creates a gatekeeping administrative function — a pre-condition check before scheduling. In small offices with high turnover or reliance on temporary staff, this can create service capacity constraints. No circular guidance exists for this obligation; the NAV leader must comply with an absolute prohibition for which the primary normative instrument provides no framework. **KILL LIST CLASSIFICATION:**

Category A — Removal (alternatively Category B — Status Change): In its current absolute form ("må"), the requirement eliminates all municipal flexibility over training timing and sequencing without statutory authority. At minimum, Category B — the "må" should be replaced with permissive or contextually qualified language to restore the municipality's discretion over training sequencing. Full Category A removal is justified on the grounds that any legitimate training-before-service sequencing expectation should derive from the statute or circular, not from a Standard document operating outside that framework.
TRANSACTION COST CATEGORY: Documentation Inflation; Procedural Duplication

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REQUIREMENT ID: §6-R-08 **PROVISION TEXT:** Assessment of children's best interests shall be part of onboarding training and ongoing professional development of employees (derived from veileder checklist question). **SOURCE INSTRUMENT:** Barnets beste — veileder (PROC-REQ-6.8) **CIRCULAR AUTHORITY:** ABSENT — Derives from a veileder not referenced in the § 6 circular paragraph. Consequence: this obligation — framed as a checklist question that functions as a compliance indicator — operates without circular guidance. **LEGAL AUTHORITY:** PARTIAL — Barnets beste as a substantive principle has constitutional standing (Grunnloven § 104) and international law anchoring (FNs barnekonvensjon art. 3). However, § 6 of the Social Services Act does not specifically require barnets beste as a mandatory training topic, nor does it impose any content specification on training programs. The authority for this specific training obligation under § 6 is sub-legal; the constitutional principle is real but does not translate directly into a mandatory § 6 training requirement. (Reference: PROC-REQ-6.8, Step 2 of Process Inflation Findings) **DOUBLE AUTHORITY GAP:** YES — Circular authority ABSENT; statutory authority PARTIAL (constitutional principle present; § 6 training-specific authority absent). **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — Integrating child's best interest assessment into structured onboarding and continuing professional development requires curriculum design capacity. Anchor Document, Cluster 3 (Child-Perspective Documentation Cluster), 15+ supervision findings on inability to sustain child-perspective competence in small generalist offices without sufficient case volume. **PURPOSE:** USER NEED — this requirement serves the substantive quality of casework for families with children; improving caseworker competence in barnets beste directly improves outcomes for a vulnerable population. **BURDEN DESCRIPTION:** No formal transaction cost burden is created by the veileder framing (a question, not a deliverable). However, the checklist framing creates a shadow-binding risk: NAV leaders uncertain about the compliance status of this requirement may over-invest in formal documentation to demonstrate compliance during inspection. If treated as a mandatory deliverable rather than a guidance question, the cost would be integration of child's best interest modules into all onboarding and development programs — a modest content obligation with potential curriculum design overhead. **KILL LIST CLASSIFICATION:** Category C — Clarification: The requirement has genuine substantive value and a real constitutional underpinning, but its framing as a veileder checklist question — without circular authority and without explicit permissive/mandatory status — creates ambiguity that may generate disproportionate compliance responses. The room for maneuver needs to be made explicit: this is guidance for training content, not a binding deliverable, and should be reformulated accordingly in a circular-accessible instrument.
TRANSACTION COST CATEGORY: No Transaction Cost Identified (direct); shadow-binding risk noted

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REQUIREMENT ID: §6-R-09 **PROVISION TEXT:** Units must maintain a documented plan ensuring all employees receive systematic training and exercises in violence and threat handling. **SOURCE INSTRUMENT:** Standard for trygge brukermøter i NAV (DOC-REQ-6.1) **CIRCULAR AUTHORITY:** ABSENT — Same Standard as Requirement 6; same absence from circular. The DOC-REQ framing does not alter the circular authority assessment. **LEGAL AUTHORITY:** NO — Identical analysis to Requirement 6 applies. The law contains no plan requirement; the Standard imposes a documented plan obligation with fixed content and delivery specifications. (Reference: DOC-REQ-6.1, Step 3 of Process Inflation Findings) **DOUBLE AUTHORITY GAP:** YES — Circular authority ABSENT; statutory authority NO. **CATEGORY ERROR:** NO **SCALE FLAG:** YES — Same analysis as Requirement 6; plan production and maintenance presupposes administrative capacity not available in small offices. Additionally: the duplication of the same obligation from the same source instrument doubles the administrative exposure without adding substance. Anchor Document, Cluster 2. **PURPOSE:** INTERNAL CONTROL — This is the documentation-framing variant of Requirement 6. The plan is the administrative artifact; the requirement serves audit-preparedness, not safety directly. **BURDEN DESCRIPTION:** Substantively duplicates the burden of Requirement 6. The dual-framing (PROC-REQ and DOC-REQ) of the same plan obligation from the same source instrument means NAV leaders may feel required to produce evidence of compliance under two distinct requirement references, potentially producing parallel documentation. The duplication itself creates redundant administrative overhead. No circular guidance exists for this requirement; it falls entirely outside the circular framework. **KILL LIST CLASSIFICATION:** Category A — Removal: This requirement is both legally unfounded (same analysis as Requirement 6) and internally duplicative within the Standard. It adds no regulatory substance and doubles administrative exposure. It should be removed from the § 6 normative framework; if the underlying plan obligation has any legitimate basis, that basis belongs in the circular or in the AML framework, not in a sub-legal Standard operating outside both. **TRANSACTION COST CATEGORY:** Documentation Inflation; Procedural Duplication; Combined Burden (with Requirement 6)

REQUIREMENT ID: §6-R-10 **PROVISION TEXT:** An overview must be kept documenting which employees have received which forms of training and when. **SOURCE INSTRUMENT:** Veileder til standard for trygge brukermøter i NAV (DOC-REQ-6.2) **CIRCULAR AUTHORITY:** ABSENT — Derives from a guidance document attached to a Standard; not referenced in the § 6 circular. Consequence: this documentation obligation is invisible from the circular and operates without any normative foundation in the primary instrument. The transaction cost it imposes falls entirely outside any framework the circular provides guidance for. **LEGAL AUTHORITY:** NO — § 6 is exclusively a training responsibility provision. It contains no legal authority to impose documentation or record-keeping obligations. Record-keeping obligations require specific statutory authorization; none exists here. (Reference: DOC-REQ-6.2, Step 3 of Process Inflation Findings) **DOUBLE AUTHORITY GAP:** YES — Circular authority ABSENT; statutory authority NO. **CATEGORY ERROR:** NO — This is a documentation obligation within the social services training context, not a foreign-domain importation. **SCALE FLAG:** YES — Maintaining a real-time training register per employee across multiple training types is a data management function presupposing back-office

support or dedicated HR capacity. Dominant in small offices already operating at management capacity. Anchor Document, Mechanism [D] Documentation Apparatus (~65 Set B findings); Cluster 2. Note: scale-related burden is entirely without circular foundation. **PURPOSE:** INTERNAL CONTROL — A training register serves supervisory inspection and internal management reporting; it does not directly improve training quality or user outcomes. **BURDEN DESCRIPTION:** NAV leader must create and maintain a structured register documenting, per employee: training types received and dates. Must be kept current and available for inspection. No circular guidance on required format, scope of "training" to be tracked, retention requirements, or how the register satisfies the obligation. The caseworker/NAV leader must comply with a record-keeping obligation for which the primary normative instrument provides no framework whatsoever. **KILL LIST CLASSIFICATION:** Category A — Removal: The requirement lacks both circular authority and statutory authority. Section 6 provides no delegation for documentation obligations of this kind. A training overview register may be organizationally useful, but it cannot be mandated through a guidance document attached to a Standard when neither the statute nor the circular authorizes a documentation requirement. If a training documentation obligation is to be maintained, it requires explicit circular authority and, ideally, a statutory basis. **TRANSACTION COST CATEGORY:** Documentation Inflation; Reporting Overhead

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REQUIREMENT ID: §6-R-11 **PROVISION TEXT:** Training of employees and internal users must be formally documented. **SOURCE INSTRUMENT:** Veileder til standard for trygge brukermøter i NAV (DOC-REQ-6.3) **CIRCULAR AUTHORITY:** ABSENT — Same instrument and same absence from circular as Requirement 10. Transaction costs fall entirely outside any circular framework. **LEGAL AUTHORITY:** NO — Same analysis as Requirement 10. The word "nødvendig" in § 6 concerns training content and coverage; no textual or structural basis for documentation obligations exists in the provision. (Reference: DOC-REQ-6.3, Step 3 of Process Inflation Findings) **DOUBLE AUTHORITY GAP:** YES — Circular authority ABSENT; statutory authority NO. **CATEGORY ERROR:** NO **SCALE FLAG:** YES — Formal documentation of all training events, including informal or incidental training, requires ongoing administrative recording function. Anchor Document, Mechanism [D]. Note: burden without circular foundation. **PURPOSE:** INTERNAL CONTROL — Formal documentation of training is an audit-preparedness function; its purpose is to produce evidence that training has occurred, not to improve training quality. **BURDEN DESCRIPTION:** NAV leader must ensure that all training events — including internal training, on-the-job development, and events for internal users — are formally documented. This extends the documentation obligation beyond the training register (Requirement 10) to include the act of documenting completion itself. In practice, this requires some form of completion certification or acknowledgment for every training event. No circular guidance on what "formal documentation" requires. Partially overlaps with Requirement 10, creating two parallel documentation demands for the same training events. **KILL LIST CLASSIFICATION:** Category A — Removal: Same analysis as Requirement 10. No statutory or circular authority for this documentation obligation. The partial duplication with Requirement 10 further confirms that the veileder has generated layered documentation demands for the same underlying training events without any regulatory foundation for any of them. **TRANSACTION COST CATEGORY:** Documentation Inflation; Procedural Duplication

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REQUIREMENT ID: §6-R-12 **PROVISION TEXT:** A specific overview must be maintained documenting which employees have completed training measures related to security, violence, and threats. **SOURCE INSTRUMENT:** Veileder til standard for trygge brukermøter i NAV (DOC-REQ-6.4) **CIRCULAR AUTHORITY:** ABSENT — Same instrument and absence as Requirements 10 and 11. Transaction costs fall entirely outside any circular framework. **LEGAL AUTHORITY:** NO — § 6 neither authorizes documentation obligations nor designates violence and security training as a mandatory subject area with corresponding record-keeping requirements. This requirement adds a domain-specific sub-register obligation on top of the general documentation demands of Requirements 10 and 11. (Reference: DOC-REQ-6.4, Step 3 of Process Inflation Findings) **DOUBLE AUTHORITY GAP:** YES — Circular authority ABSENT; statutory authority NO. **CATEGORY ERROR:** NO (though the subject matter — security and violence training — overlaps substantially with AML workplace safety obligations) **SCALE FLAG:** YES — A parallel sub-register for security training creates a third documentation layer alongside the general training register (Req 10) and formal documentation (Req 11). Cumulative documentation overhead in small offices without dedicated HR capacity. Anchor Document, Mechanism [D]; Cluster 2. Note: scale-related burden without circular foundation. **PURPOSE:** INTERNAL CONTROL — A specialized security training register is an audit-preparedness and management tracking function. Its primary purpose is to enable verification that a specific category of training has been delivered. **BURDEN DESCRIPTION:** NAV leader must maintain a specific register — distinct from the general training register — documenting security, violence, and threat-related training completions per employee. This is a third parallel documentation obligation for the same pool of employees, covering a specific subset of the training tracked in Requirements 10 and 11. Maintaining three overlapping registers for the same workforce without circular guidance on any of them constitutes a combined documentation burden that is entirely without regulatory foundation in the primary normative instrument for § 6. **KILL LIST CLASSIFICATION:** Category A — Removal: No statutory or circular authority. The subject matter (violence and security training) further blurs into AML territory, making the § 6 normative framework an inappropriate home for this obligation in any form. If a specialized security training register is considered necessary, it should be located in the AML compliance framework and/or the Standard's operational guidance, not presented as a § 6 compliance requirement. **TRANSACTION COST CATEGORY:** Documentation Inflation; Reporting Overhead; Combined Burden (with Requirements 10 and 11)

REQUIREMENT ID: §6-R-13 **PROVISION TEXT:** A register must be maintained tracking exactly who has completed basic HSE training (HMS-grunnopplæring). **SOURCE INSTRUMENT:** Veileder til standard for trygge brukermøter i NAV (DOC-REQ-6.5) **CIRCULAR AUTHORITY:** ABSENT — Same instrument and absence as Requirements 10, 11, and 12. Transaction costs fall entirely outside any circular framework. **LEGAL AUTHORITY:** NO — HMS-grunnopplæring is governed by the Working Environment Act (AML) and its associated regulations; § 6 of the Social Services Act neither references HSE training nor authorizes documentation requirements for obligations that arise under a different legal regime. The attempt to impose AML-sourced obligations through a § 6-adjacent veileder has no authority in either the Social Services Act or the circular.

(Reference: DOC-REQ-6.5, Step 3 of Process Inflation Findings) **DOUBLE AUTHORITY GAP:** YES — Circular authority ABSENT; statutory authority NO. **CATEGORY ERROR:** YES — HMS-grunnopplæring is a labor law (arbeidsmiljøloven) obligation. Its inclusion in the § 6 normative framework through a veileder attached to a Standard constitutes an erroneous importation of a labor law obligation into a social services administrative instrument. The appropriate framework for this obligation is the AML employer compliance regime, not the Social Services Act. **SCALE FLAG:** YES — NAV leaders in small offices must track the same training event in multiple frameworks: the AML employer compliance record and now also this § 6-adjacent register. The duplication is administratively wasteful and creates the risk of inconsistent records across two legal regimes. Anchor Document, general documentation apparatus findings; IT system fragmentation findings (Averøy, Giske, Båtsfjord) on the burden of maintaining parallel records across state-municipal IT systems. Note: scale-related burden is entirely without circular foundation and without any connection to the legal domain the circular governs. **PURPOSE:** INTERNAL CONTROL — assessed in relation to social services users. A HMS-grunnopplæring register serves employer labor law compliance; it has no direct bearing on case outcomes, service quality, or user protection in the social services context. **BURDEN DESCRIPTION:** NAV leader must maintain a register of HMS-grunnopplæring completion that is also required under AML. This creates duplicated administrative effort across two legal frameworks for the same training event. The NAV leader is being asked to produce a social services compliance record for an obligation that belongs to a different legal domain and is already covered by the employer's AML administrative system. No circular guidance exists for this requirement. The transaction cost is both structurally disproportionate and legally mislocated — caseworkers and NAV leaders must comply with a labor law documentation obligation through an instrument (a veileder to a Standard) that operates entirely outside the circular framework governing their social services obligations. **KILL LIST CLASSIFICATION:** Category A — Removal: The requirement belongs to a different legal domain (AML) and has no authority in the § 6 framework under either the circular or the statute. It represents a category error in the normative architecture of § 6 and should be removed from this framework without qualification. AML compliance, including HMS-grunnopplæring records, is and should remain the domain of the AML employer compliance framework. **TRANSACTION COST CATEGORY:** Documentation Inflation; Reporting Overhead; Combined Burden (with Requirements 10, 11, 12)

CLOSING COMPARATIVE NOTE

Total requirements identified from Process Inflation Findings: 13

Requirements visible from circular paragraph alone: 4 (Requirements 1–4, corresponding to PROC-REQ-6.1 through PROC-REQ-6.4)

Requirements invisible from circular alone: 9 (69 percent of total normative burden under § 6)

Double authority gaps identified: 9 Requirements 5, 6, 7, 8, 9, 10, 11, 12, and 13 all present double authority gaps — absent from the circular and lacking direct statutory

authority under § 6. Requirement 8 presents a partial statutory gap (constitutional principle present; § 6 training-specific authority absent); all others present a complete gap on the statutory side.

Category errors (requirements from a different legal domain): 1 Requirement 13 (HMS-grunnopplæring) belongs to the labor law (AML) domain. Its presence in the § 6 normative framework through a veileder to a Standard constitutes a category error: a labor law obligation has been reframed and imported into a social services compliance instrument without statutory authority in either domain.

Kill List breakdown:

Category	Count	Requirements
Category A — Removal	7	§6-R-05, §6-R-06, §6-R-09, §6-R-10, §6-R-11, §6-R-12, §6-R-13
Category B — Status Change	2	§6-R-03, §6-R-07
Category C — Clarification	2	§6-R-02, §6-R-08
No Kill List Action	2	§6-R-01, §6-R-04

Primary transaction cost categories by frequency:

Category	Requirements
Documentation Inflation	§6-R-02, §6-R-06, §6-R-07, §6-R-09, §6-R-10, §6-R-11, §6-R-12, §6-R-13 (8 occurrences)
Reporting Overhead	§6-R-03, §6-R-05, §6-R-10, §6-R-12, §6-R-13 (5 occurrences)
Combined Burden	§6-R-09, §6-R-12, §6-R-13 (3 occurrences)
Structural Disproportionality	§6-R-03, §6-R-05, §6-R-06 (3 occurrences)
Procedural Duplication	§6-R-07, §6-R-09, §6-R-11 (3 occurrences)
No Transaction Cost Identified	§6-R-01, §6-R-04, §6-R-08 (3 occurrences)

Synthesis observations for the main report and Kill List deliverables:

The § 6 analysis reveals a normative architecture in which the circular itself carries modest and broadly defensible obligations (Requirements 1–4), while the real compliance burden has been constructed invisibly through a Standard, a veileder to that Standard, a

Kommunebrev, and a separate welfare policy veileder — none of which are referenced in or traceable from the circular paragraph. Of the 7 requirements recommended for Category A removal, 5 concern documentation and record-keeping obligations (Requirements 9–13) for which § 6 provides no legal authority whatsoever, and 4 of those 5 derive from the Veileder til standard for trygge brukermøter i NAV — a single sub-legal instrument that has generated the bulk of the documentation inflation in this paragraph through four parallel and substantially overlapping register obligations. The category error in Requirement 13 is analytically significant: it demonstrates that the sub-legal normative accumulation around § 6 has reached the point where obligations from an entirely different legal regime (AML) are being imported into social services compliance expectations, creating duplicated administrative burden across two legal frameworks with no authorization from either.

The two Category B requirements (Requirements 3 and 7) represent the most structurally significant issues in the circular itself: Requirement 3 extends mandatory duty to Nav-leder through imperative language that exceeds the statute's authorization, and Requirement 7 creates an absolute prohibition through a Standard that operates entirely outside the circular. Both restore meaningful municipal discretion if reformulated to permissive language.

SLUDGE AUDIT — § 7 KOMMUNENS ØKONOMISKE ANSVAR

Session Reference: § 7 / R-35 pkt. 2.7.1 **Analytical framework:** Process Inflation Findings (Reference), Circular paragraph (Context), Volume Driver Findings (Anchor)

PRELIMINARY METHODOLOGICAL NOTE

Comparative visibility count:

Starting from the circular paragraph (§ 7 statutory text + section 2.7.1 commentary), a reader encounters **five** distinct requirements. Starting from the Process Inflation Findings in the Reference Document, **nine** requirements are enumerable. The Process Inflation Findings thus surface **four requirements that are entirely invisible from the circular alone** — a visibility gain of 80% over the baseline circular reading.

Requirements with no textual presence in the circular:

Requirement	Source Instrument	Instrument Type
Req 6 — Service capacity dimensioning	Kommunebrev 2025	(a) Kommunebrev
Req 7 — No individual denial on economic/resource grounds	Veileder § 17	(b) Veileder
Req 8 — No rejection on grounds of Nav-kontoret's capacity or competence	Veileder § 17	(b) Veileder
Req 9 — Monthly data entry into "Ledelsesinformasjon" application	Kommunebrev 2025	(a) Kommunebrev

This is analytically significant for two reasons. First, requirements 6–9 operate on NAV offices and municipal leadership with real normative weight but leave no trace in the primary circular instrument that governs their work. Second, requirements 7 and 8 originate from a veileder that belongs to a different operational domain (§ 17 individual service assessment) and have been imported into the § 7 commentary, creating a cross-source attribution that cannot be identified from the circular at all. These observations govern the authority analysis in Step 2.

STEP 1 — IDENTIFICATION OF ALL REQUIREMENTS

Requirement § 7 / 1

- **Exact obligation:** Kommunen skal sørge for bevilgninger til dekning av utgifter til de tjenester som Nav-kontoret er pålagt å yte etter loven.
- **Source instrument:** Circular R-35 pkt. 2.7.1
- **Explicit / Implicit:** Explicit
- **Textual presence in circular:** YES

Requirement § 7 / 2

- **Exact obligation:** Søknad om tjenester som en tjenestemottaker har krav på, skal ikke avslås av økonomiske grunner.
- **Source instrument:** Circular R-35 pkt. 2.7.1
- **Explicit / Implicit:** Explicit
- **Textual presence in circular:** YES

Requirement § 7 / 3

- **Exact obligation:** Nivået og omfanget av tjenestene må være forsvarlig.
- **Source instrument:** Circular R-35 pkt. 2.7.1
- **Explicit / Implicit:** Explicit
- **Textual presence in circular:** YES

Requirement § 7 / 4

- **Exact obligation:** Kommunen bestemmer selv hvordan tjenestetilbudet skal organiseres i Nav-kontoret.
- **Source instrument:** Circular R-35 pkt. 2.7.1
- **Explicit / Implicit:** Explicit
- **Textual presence in circular:** YES

Requirement § 7 / 5

- **Exact obligation:** Nav-kontoret må i god tid søke om tilleggsbevilgninger dersom budsjettet antas å bli utilstrekkelig til å dekke pliktmessige ytelser.
- **Source instrument:** Circular R-35 pkt. 2.7.1
- **Explicit / Implicit:** Explicit
- **Textual presence in circular:** YES

Requirement § 7 / 6

- **Exact obligation:** Det ligger i kommunens ansvar å sørge for at tjenesten er dimensjonert for å ivareta dette (service capacity dimensioning obligation).
- **Source instrument:** Kommunebrev 2025
- **Explicit / Implicit:** Explicit
- **Textual presence in circular:** NO — invisible from circular alone

Requirement § 7 / 7

- **Exact obligation:** Hvis en søker har rett til tjenesten og har et behov som gjør at betingelsene for å få tjenesten er tilstede, kan ikke Nav-kontoret avslå søknaden av økonomiske eller andre ressursmessige grunner.
- **Source instrument:** Veileder § 17
- **Explicit / Implicit:** Explicit
- **Textual presence in circular:** NO — invisible from circular alone; imported from a different normative instrument

Requirement § 7 / 8

- **Exact obligation:** En person som har rett til tjenesten kan ikke avvises eller få avslag med begrunnelse i at Nav-kontoret ikke har kapasitet eller kompetanse til å gi tjenesten.
- **Source instrument:** Veileder § 17
- **Explicit / Implicit:** Explicit
- **Textual presence in circular:** NO — invisible from circular alone; imported from a different normative instrument

Requirement § 7 / 9

- **Exact obligation:** Arbeids- og velferdsdirektoratet anbefaler at kommunen/Nav-kontoret legger inn månedstall på minst følgende av de kommunale indikatorene i Nav-kontorets målekortdatabase, i applikasjonen «Ledelsesinformasjon»: Kroner sosialhjelp totalt (bidrag og lån etter §§ 18 og 19 i sosialtjenesteloven) i løpet av måneden.
- **Source instrument:** Kommunebrev 2025
- **Explicit / Implicit:** Explicit (framed as "anbefaler" but operationally treated as mandatory given the directorate's issuing authority)
- **Textual presence in circular:** NO — invisible from circular alone

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STEP 2 — LEGAL AUTHORITY CHECK

Requirement § 7 / 1

- **Direction 1 — Circular authority:** YES. The requirement is stated in section 2.7.1 of R-35.
- **Direction 2 — Statutory authority:** YES. Section 7 first and second paragraphs of sosialtjenesteloven directly impose the appropriations duty.
- **Double authority gap:** NO
- **Category error:** NO

Requirement § 7 / 2

- **Direction 1 — Circular authority:** YES. Stated in section 2.7.1 of R-35.
- **Direction 2 — Statutory authority:** YES. The prohibition follows directly from the user's statutory right to services: an entitlement right that cannot be defeated by a

budgetary consideration is implicit in the structure of § 7 itself, and the Process Inflation Findings confirm this as a substantive legal obligation without ambiguity.
- **Double authority gap:** NO
- **Category error:** NO

Requirement § 7 / 3

- **Direction 1 — Circular authority:** YES. Section 2.7.1 states "Nivået og omfanget av tjenestene må være forsvarlig."
- **Direction 2 — Statutory authority:** PARTIAL. The Process Inflation Findings flag this as "TVETYDIG" (ambiguous) because the quality standard "forsvarlig" derives its operative normative force from § 4, not § 7. Section 7 governs necessary appropriations; it says nothing about the quality threshold for how those appropriations are deployed. The circular attributes the standard to § 7 but its true legal anchor is a different provision.
- **Double authority gap:** NO (circular authority is present, but statutory attribution is misplaced)
- **Category error:** NO (remains within the social services domain)

Requirement § 7 / 4

- **Direction 1 — Circular authority:** YES. Section 2.7.1 states "Kommunen bestemmer selv hvordan tjenestetilbudet skal organiseres."
- **Direction 2 — Statutory authority:** PARTIAL. The Process Inflation Findings flag this as "TVETYDIG." Section 7 governs financial cost allocation exclusively. No organizational structure guidance appears in the statutory text. The circular introduces a principle of municipal autonomy in organizational matters that has no grounding in § 7's text.
- **Double authority gap:** NO (circular authority present)
- **Category error:** NO

Requirement § 7 / 5

- **Direction 1 — Circular authority:** YES. Section 2.7.1 states the supplementary appropriations application requirement.
- **Direction 2 — Statutory authority:** PARTIAL. The statute grants the municipality open how-discretion for ensuring adequate funding — it does not prescribe a specific mechanism, actor, or timing for when funding proves insufficient. The circular occupies this discretionary space by specifying a fixed actor (Nav-kontoret), a specific action (seek supplementary appropriations), and a timing constraint ("i god tid"), creating what the Process Inflation Findings call "shadow binding without statutory authorization."
- **Double authority gap:** NO (circular authority present, though it overreaches the statutory text)
- **Category error:** NO

Requirement § 7 / 6

- **Direction 1 — Circular authority:** NO. This requirement originates exclusively in Kommunebrev 2025 and has no presence in the circular. First-order authority gap confirmed.
- **Direction 2 — Statutory authority:** PARTIAL. Service capacity dimensioning is inferentially connected to § 7 (a municipality cannot fulfill its appropriations duty while allowing its service to be structurally underdimensioned), but the connection is inferential rather than textual. The Process Inflation Findings flag this as "TVETYDIG" precisely because the § 7 statutory text addresses financial appropriations, not operational capacity planning as a distinct concept.
- **Double authority gap:** YES — no circular authority AND only partial (inferential) statutory authority.
- **Category error:** NO

Requirement § 7 / 7

- **Direction 1 — Circular authority:** NO. This requirement originates in Veileder § 17 and has no presence in the circular governing § 7. First-order authority gap confirmed.
- **Direction 2 — Statutory authority:** PARTIAL. The Process Inflation Findings flag this as "TVETYDIG" because § 7 governs systemic budget-level municipal responsibility, not the outcome of individual application decisions. The prohibition on individual case denials on economic or resource grounds belongs to the legal domain of §§ 17–19 individual service assessment, not to § 7. The Veileder § 17 attribution confirms this is a provision from a different normative context being read into the § 7 framework.
- **Double authority gap:** YES — no circular authority AND only partial statutory authority under § 7. The requirement may have authority under a different provision (§§ 17–19), but not under the provision being analyzed.
- **Category error:** YES — this requirement governs individual administrative decision-making in specific service areas; its legal home is in the individual service assessment domain (§§ 17–19), not in the systemic financial responsibility framework of § 7.

Requirement § 7 / 8

- **Direction 1 — Circular authority:** NO. This requirement originates in Veileder § 17 and has no presence in the R-35 circular. First-order authority gap confirmed.
- **Direction 2 — Statutory authority:** PARTIAL / approaching NO. The Process Inflation Findings flag that "the explicit prohibition against competence and capacity-based case rejections exceeds what the financial appropriation text in § 7 can legally authorize." The prohibition is operationally important but its legal anchor under § 7 is structurally implausible — § 7 does not govern what grounds may be cited in an individual decision.
- **Double authority gap:** YES — no circular authority AND no credible statutory authority under § 7.
- **Category error:** YES — same analysis as Requirement 7. This is a provision governing individual case decisions; its legal domain is §§ 17–19 individual rights, not the § 7 financial responsibility framework.

Requirement § 7 / 9

- **Direction 1 — Circular authority:** NO. This requirement originates in Kommunebrev 2025 and has no presence in the circular. First-order authority gap confirmed.
- **Direction 2 — Statutory authority:** NO. The Process Inflation Findings state that "the circular requires a highly specific reporting mechanism — including a named IT application and exact frequency — that is entirely absent from both the statutory text and its preparatory works." Section 7 imposes no data reporting obligation; no statutory provision mandates the use of the "Ledelsesinformasjon" application or any equivalent database.
- **Double authority gap:** YES — no circular authority AND no statutory authority.
- **Category error:** NO — reporting obligations are within the social services administrative domain, though this specific operationalization lacks any legal anchor.

STEP 3 — SCALE AND PROPORTIONALITY CHECK

Requirement § 7 / 1

- **Scale flag:** NO. The appropriations duty operates at the systemic municipal level, not at the caseload or caseworker level. The obligation falls on the municipality as a governing entity and is not sensitive to office size or case volume. No Anchor Document finding applies.

Requirement § 7 / 2

- **Scale flag:** NO. This is a legal outcome prohibition that operates at the level of individual rights. It does not presuppose organizational capacity beyond a decision-making function. No Anchor Document finding directly applies.

Requirement § 7 / 3

- **Scale flag:** PARTIAL. The "forsvarlig" standard implies ongoing monitoring of service quality. The Anchor Document's documentation-competence-specialization trap (Cluster 1) confirms that small offices face structural barriers to maintaining defensible service levels — particularly in specialist domains. The Anchor Document notes that the pattern of *"caseworkers knew more about users' situations than the journals reflected"* appears across more than twelve municipalities, indicating a structural gap between substantive quality and formal defensibility. However, this scale interaction is indirect; the forsvarlig threshold is not itself enumerated as a volume driver.

Requirement § 7 / 4

- **Scale flag:** PARTIAL. The organizational autonomy principle is stated as a municipal prerogative, but the Anchor Document's Cluster 2 (The Role-Separation Impossibility) confirms that small municipalities often cannot freely choose their organizational structure because the structural requirements for compliance — role-separated

approval, dedicated specialist capacity, internal control functions — demand organizational differentiation that small offices cannot sustain. The "autonomy" in practice is constrained by compliance obligations that override it.

Requirement § 7 / 5

- **Scale flag:** PARTIAL. The Anchor Document's Cluster 2 (Internal Control Apparatus) confirms that budget monitoring and administrative planning functions are among the responsibilities that collapse onto NAV leaders in small offices, who are simultaneously frontline caseworkers, approvers, and administrative managers. The timing element ("i god tid") presupposes a budget-forecasting capacity that small offices with no dedicated administrative function may lack. Furthermore, since this requirement has no stronger statutory basis than open discretion, the Anchor Document finding that small-office NAV leaders cannot sustain these back-office functions is directly relevant.

Requirement § 7 / 6

- **Scale flag:** YES. This is the requirement most directly implicated by the Anchor Document. The entire Volume Driver analysis confirms that service dimensioning is the central structural problem across the supervision corpus. Tier 1 Drivers A and B (specialization requirement, Cluster 1 documentation-competence-specialization trap) confirm that municipalities below approximately 10,000–15,000 inhabitants cannot dimension their services to meet all requirements simultaneously. The Anchor Document states explicitly that small offices face a structural impossibility: even municipalities that address the specialist problem through inter-municipal cooperation remain exposed to procedural and documentation failures. Since Requirement 6 has no circular authority, the scale-related burden it imposes is entirely unsupported by the circular framework — NAV leaders and municipalities are held to a dimensioning standard that the primary normative instrument does not address.

Requirement § 7 / 7

- **Scale flag:** PARTIAL. The prohibition on individual economic-ground denials is directly applicable regardless of scale. However, the Anchor Document's Driver 1 (Level-3 specialist dependency) and extensive findings across Løten, Nav Vefsna, Nes, and Sveio confirm that small offices face structural situations where they literally cannot provide certain services — creating a scenario where honoring this prohibition requires either referring users elsewhere or artificially maintaining a service the office cannot staff. The prohibition creates an obligation that interacts with scale in ways the normative framework does not acknowledge.

Requirement § 7 / 8

- **Scale flag:** YES. This requirement directly collides with the Anchor Document's most extensively confirmed finding. Driver 2 (Single-Specialist Vulnerability) and Driver C (Role-Separation Impossibility) confirm that small offices frequently lack both the capacity and the competence to provide specialized services — the exact grounds this requirement prohibits as a basis for denial. The Anchor Document documents at

least eight municipalities (Løten, Hole, Nav Vefsna, Nes, Sveio, Salangen, Båtsfjord, Hjelmeland) where structural capacity failures are endemic. Since Requirement 8 has no circular authority, the obligation it creates — that services cannot be denied on capacity or competence grounds — falls without any circular framework to guide how NAV offices should manage situations where the prohibition conflicts with operational reality.

Requirement § 7 / 9

- **Scale flag:** PARTIAL. The Anchor Document's Cluster 2 (Internal Control Apparatus) and the specific finding on Nesna 2024 (too small for results to be communicated to local level) confirm that reporting and data infrastructure requirements generate disproportionate burdens in small offices. The specific requirement to enter monthly aggregate data into a designated IT application presupposes back-office administrative capacity. The Anchor Document notes that deviation software and reporting systems are inaccessible to NAV caseworkers in multiple small offices due to IT system fragmentation between state and municipal environments. Since this requirement has no circular authority, any scale-related compliance burden it creates falls entirely outside the normative framework the circular provides.

STEP 4 — PURPOSE CLASSIFICATION

Requirement § 7 / 1 — [USER NEED] The language "sørge for bevilgninger til dekning av utgifter til de tjenester som Nav-kontoret er pålagt å yte etter loven" is entirely directed at ensuring users receive services they are legally entitled to. The purpose is the financial enablement of statutory service delivery. No documentation, reporting, or audit function is embedded in this obligation.

Requirement § 7 / 2 — [USER NEED] "Søknad om tjenester som en tjenestemottaker har krav på, skal ikke avslås av økonomiske grunner" is a direct protection of individual legal rights. The language is entirely outcome-oriented: it prohibits a category of adverse decision. Its effect is measured at the user's case level. No administrative recording or control function is served.

Requirement § 7 / 3 — [MIXED] Primary function: [USER NEED] — the "forsvarlig" standard protects users from degraded or legally indefensible service quality. Secondary function: [INTERNAL CONTROL] — the standard also functions as a defensibility threshold for municipal administration, creating a documentation expectation that service levels can be justified as defensible. The Process Inflation Findings note that the standard is legally ambiguous in the § 7 context, which heightens the internal control dimension because ambiguity invites defensive documentation. The primary function remains user protection; the secondary function is administrative legitimation.

Requirement § 7 / 4 — [INTERNAL CONTROL] "Kommunen bestemmer selv hvordan tjenestetilbudet skal organiseres" is a governance principle that regulates the internal organizational relationship between the municipality and the NAV office. It has no direct

bearing on how any individual user's case is assessed or decided. Its purpose is to allocate decision-making authority within the administrative apparatus, which is a structural governance function. The Process Inflation Findings note that this principle lacks grounding in § 7, confirming it serves administrative architecture rather than user protection.

Requirement § 7 / 5 — [INTERNAL CONTROL] "Nav-kontoret må i god tid søke om tilleggsbevilgninger" imposes a specific procedural obligation on the NAV office as an administrative actor. The action required — applying for supplementary budget appropriations — is directed upward within the administrative hierarchy, toward the municipality, not toward users. While the ultimate purpose of adequate funding is user protection, the specific obligation here governs an internal administrative procedure. The Process Inflation Findings confirm this is a reporting-type procedural obligation without direct bearing on individual case outcomes. In the social services context, its function is institutional financial management, not individual service delivery.

Requirement § 7 / 6 — [MIXED] Primary function: [USER NEED] — ensuring services are dimensioned to fulfill legal obligations means users will, in principle, receive the services they are entitled to. Secondary function: [INTERNAL CONTROL] — service dimensioning as an administrative concept is an operational planning function that generates assessments, reporting, and management decisions directed at the administrative system. The Kommunebrev 2025 language ("sørge for at tjenesten er dimensjonert") frames this as a municipal management obligation. The primary beneficiary is the user population; the administrative burden falls entirely on municipal leadership.

Requirement § 7 / 7 — [USER NEED] The Veileder § 17 language prohibiting individual application denials on economic or resource grounds is a direct user protection norm. Its operative effect is at the level of individual case decisions. The prohibition exists to protect the specific applicant whose right to a service is not contingent on the office's budget position. That this provision is misattributed to § 7 is a legal architecture problem, not a purpose problem — the purpose remains unambiguously user-oriented.

Requirement § 7 / 8 — [USER NEED] The prohibition against rejection based on the NAV office's lack of capacity or competence is likewise a direct user protection norm. Its effect is measured at the individual case level. The source — Veileder § 17 — confirms it belongs to the individual service assessment domain. That it appears in a § 7 context is a category error; its functional purpose is still to protect the individual user from service failures attributable to organizational deficiencies rather than to any legitimate eligibility reason.

Requirement § 7 / 9 — [INTERNAL CONTROL] The Kommunebrev 2025 language — "anbefaler at kommunen/Nav-kontoret legger inn månedstall ... i applikasjonen «Ledelsesinformasjon»" — is entirely directed at internal reporting and management information purposes. Monthly aggregate expenditure figures entered into a scorecard database serve the Directorate's oversight and planning functions. The obligation has no effect on how any individual user's application is assessed or decided. The Process Inflation Findings confirm: "The circular requires a highly specific reporting mechanism — including a named IT application and exact frequency — that is entirely absent from both the statutory text and its preparatory works." The purpose is institutional data collection for management reporting.

STEP 5 — TRANSACTION COST CHARACTERIZATION

Requirement § 7 / 1 — [USER NEED] No transaction cost burden identified. The obligation is directed at the municipality as a governance entity. No documentation, recording, or procedural step is imposed on individual caseworkers.

Requirement § 7 / 2 — [USER NEED] No transaction cost burden identified. The obligation is a decision outcome prohibition. It shapes the permissible grounds for a decision but does not impose an independent documentation or procedural obligation on the caseworker beyond what the decision itself requires.

Requirement § 7 / 3 — [MIXED] The "forsvarlig" standard generates a secondary documentation burden: NAV leaders must be able to demonstrate that the level and scope of services meet a defensibility threshold. In practice, this means monitoring quality indicators, documenting service coverage, and ensuring that any gap between demand and delivery is recorded and addressed. The burden falls primarily on NAV leadership rather than individual caseworkers. The circular provides the standard but no operational guidance on how to document forsvarlig levels in the § 7 context — the normative anchor for the standard (§ 4) is handled separately in the circular, meaning a NAV leader seeking to demonstrate compliance must navigate two different normative provisions without guidance on their interaction. Burden category: Documentation Inflation (mild, leadership-level).

Requirement § 7 / 4 — [INTERNAL CONTROL] The organizational autonomy principle does not itself impose a documentation or procedural obligation on caseworkers. It is a governance allocation principle. However, implicitly, decisions about service organization must be defensible, which creates an administrative record-keeping burden at the municipal governance level. Caseworker burden: none. Leadership burden: low to moderate — governance decisions about service structure must be documented sufficiently to be defensible under supervision. No circular guidance is provided on how organizational decisions should be recorded or reviewed.

Requirement § 7 / 5 — [INTERNAL CONTROL] The supplementary appropriations requirement demands the following from a NAV leader or manager: (a) Continuous monitoring of whether current budget appropriations are sufficient to cover mandatory service obligations across the fiscal year. (b) Projection of future expenditure against appropriations with sufficient lead time to meet the "i god tid" timing condition. (c) Formal preparation and submission of an application to the municipality for supplementary budget allocation. (d) Documentation of the basis for the assessment that the budget will be insufficient.

This is a reporting overhead obligation of moderate intensity. The timing element creates a particularly demanding sub-obligation: the NAV office must project financial insufficiency before it becomes acute, which presupposes budget forecasting competence. The Anchor Document confirms that small offices' administrative capacity for budget management is limited because NAV leaders simultaneously carry frontline caseloads. The obligation is circular-based — it appears in section 2.7.1 — but the circular provides no guidance on

timing thresholds, forecasting methodology, or documentation format. Caseworkers must comply with a procedural obligation that the circular mandates but does not operationalize. Burden category: Reporting Overhead + Structural Disproportionality.

Requirement § 7 / 6 — [MIXED] Since this requirement has no circular authority (Step 2), NAV leaders and municipalities must comply with a capacity dimensioning obligation that the primary normative instrument governing their work does not address. The practical demands on the municipal administration are: (a) Conducting periodic assessments of whether current staffing, specialist capacity, and service organization are sufficient to meet all legal obligations. (b) Documenting the basis for conclusions about dimensioning adequacy. (c) Taking organizational action when dimensioning is found inadequate. (d) Justifying dimensioning decisions under supervision.

Since the obligation derives exclusively from a Kommunebrev with no circular grounding, and since the Anchor Document confirms that service dimensioning is structurally impossible for many small municipalities across the range of statutory requirements, the transaction cost is imposed without any normative support structure. A municipality seeking to comply has no circular framework to tell it what "dimensjonert" means, what evidence suffices, or how compliance should be demonstrated. Burden category: Documentation Inflation + Structural Disproportionality. The absence of circular guidance compounds the burden: compliance is demanded without any framework for how to achieve it.

Requirement § 7 / 7 — [USER NEED] No transaction cost burden is identified. The obligation is a prohibition on a category of negative outcome in individual case decisions. Its direct effect is on the decision's permissible grounds, not on a documentation or procedural obligation independent of the decision itself. The cross-source attribution issue (Veileder § 17 imported into § 7 context) is a legal architecture problem, not a caseworker burden problem.

Requirement § 7 / 8 — [USER NEED] No transaction cost burden is identified as a primary matter. The obligation is user-protective. However, a secondary observation is warranted: since this requirement prohibits denials on capacity/competence grounds, and since the Anchor Document confirms that capacity and competence failures are endemic to small offices across the supervision corpus, the prohibition creates a legal exposure for NAV offices in the very situations they are structurally most likely to face. The obligation to avoid denying on capacity grounds without any circular guidance on how to manage genuine capacity failures (because the requirement has no circular authority) means caseworkers face a double bind: they cannot deny on capacity grounds, but they have no normative framework telling them how to proceed when capacity is genuinely insufficient.

Requirement § 7 / 9 — [INTERNAL CONTROL] Since this requirement has no circular authority, caseworkers and NAV leaders must fulfill a specific IT-based reporting obligation that the primary normative instrument governing their work does not address. The practical demands are: (a) Monthly: Collecting aggregate expenditure data on total social assistance costs (§§ 18 and 19) for the preceding month. (b) Monthly: Accessing the "Ledelsesinformasjon" scorecard database application. (c) Monthly: Entering the data in the specific format the application requires. (d) Ongoing: Maintaining active user access and operational familiarity with the application.

The "anbefaler" language in the Kommunebrev creates a shadow binding: the Directorate's recommendation operates with prescriptive weight in practice despite its advisory framing. The Anchor Document confirms that IT system fragmentation between state and municipal environments in NAV is a documented compliance failure vector — access to specific applications is a recurrent problem in small offices. There is no circular framework that addresses how this reporting obligation should be fulfilled, what happens if the application is inaccessible, or whether alternative reporting mechanisms are acceptable. Burden category: Reporting Overhead + Documentation Inflation.

STEP 6 — CATALOG ENTRIES

REQUIREMENT ID: § 7 / 1

PROVISION TEXT: The municipality shall ensure appropriations sufficient to cover expenses for all services the NAV office is mandated to provide under the Act.

SOURCE INSTRUMENT: Circular R-35 pkt. 2.7.1

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: YES — directly grounded in sosialtjenesteloven § 7, paragraphs 1 and 2. Process Inflation Finding: Requirement 1 classified as [SUBSTANTIVE LEGAL OBLIGATION], will not proceed to Step 3.

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: NO — operates at systemic municipal governance level, not at caseload or caseworker level.

PURPOSE: USER NEED

BURDEN DESCRIPTION: No transaction cost burden identified. The obligation is directed at the municipality as a governing entity and has no independent procedural or documentation demand on individual caseworkers.

KILL LIST CLASSIFICATION: No Kill List Action — requirement has sufficient authority and is proportionate as a systemic governance obligation.

TRANSACTION COST CATEGORY: No Transaction Cost Identified

REQUIREMENT ID: § 7 / 2

PROVISION TEXT: Applications for services to which a service recipient has a legal entitlement shall not be denied on economic grounds.

SOURCE INSTRUMENT: Circular R-35 pkt. 2.7.1

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: YES — follows directly from the structure of § 7 and the user's statutory entitlement to services. The prohibition is an implicit corollary of the appropriations duty. Process Inflation Finding: Requirement 2 classified as [SUBSTANTIVE LEGAL OBLIGATION].

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: NO

PURPOSE: USER NEED

BURDEN DESCRIPTION: No transaction cost burden identified. The obligation is a decision outcome prohibition with no independent documentation or procedural demand on caseworkers.

KILL LIST CLASSIFICATION: No Kill List Action — requirement has sufficient authority and is a core user protection norm.

TRANSACTION COST CATEGORY: No Transaction Cost Identified

REQUIREMENT ID: § 7 / 3

PROVISION TEXT: The level and scope of services must be defensible ("forsvarlig").

SOURCE INSTRUMENT: Circular R-35 pkt. 2.7.1

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: PARTIAL — the "forsvarlig" quality standard derives its operative normative force from § 4, not § 7. Section 7 governs necessary appropriations and does not contain a quality threshold. The circular attributes the standard to § 7, but the Process Inflation Findings flag this as "TVETYDIG" (ambiguous) with a recommendation for human legal review. The standard has legal authority; its attribution to § 7 specifically is misplaced.

DOUBLE AUTHORITY GAP: NO — circular authority is present; the partial statutory gap concerns attribution, not the existence of authority.

CATEGORY ERROR: NO — the forsvarlig standard remains within the social services domain; the issue is which provision anchors it.

SCALE FLAG: PARTIAL — the Anchor Document's documentation-competence-specialization cluster (Cluster 1) confirms structural barriers to maintaining demonstrably defensible service levels in small offices, particularly in specialist service domains.

PURPOSE: MIXED — primary: user protection (service quality threshold); secondary: internal administrative legitimation (defensibility documentation)

BURDEN DESCRIPTION: NAV leaders must be able to demonstrate that service levels are defensible. This creates a monitoring and documentation burden at leadership level: quality indicators must be tracked, service coverage documented, and gaps between demand and delivery recorded. The circular provides no guidance on how to operationalize "forsvarlig" in the § 7 context specifically, as the standard's true normative home is § 4. NAV leaders must navigate two separate circular sections without guidance on their interaction under § 7. Burden level: mild to moderate, leadership-level.

KILL LIST CLASSIFICATION: Category C — Clarification. The room for maneuver between § 4 and § 7 as competing legal anchors for the forsvarlig standard needs to be made explicit. The circular should clarify that this standard derives from § 4 and cross-reference accordingly, to reduce the risk that § 7 financial responsibility decisions are evaluated against a quality threshold that belongs in a different legal context.

TRANSACTION COST CATEGORY: Documentation Inflation (mild)

REQUIREMENT ID: § 7 / 4

PROVISION TEXT: The municipality determines independently how the service offer shall be organized within the NAV office.

SOURCE INSTRUMENT: Circular R-35 pkt. 2.7.1

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: PARTIAL — the principle of municipal organizational autonomy has constitutional and general local government law grounding (kommuneloven), but its specific attribution to § 7 sosialtjenesteloven is questionable. Section 7 exclusively governs financial cost allocation and says nothing about organizational structure. The Process Inflation Findings flag this as "TVETYDIG" and note that the statutory connection is "inferential rather than direct." The principle has legal validity in a broader governance framework but lacks specific § 7 grounding.

DOUBLE AUTHORITY GAP: NO — circular authority is present.

CATEGORY ERROR: NO — organizational autonomy in social services administration remains within the social services domain.

SCALE FLAG: PARTIAL — the Anchor Document's Cluster 2 (Role-Separation Impossibility) confirms that compliance obligations effectively constrain municipal

organizational autonomy. The freedom to "determine independently" how services are organized is structurally limited by requirements that presuppose organizational differentiation small municipalities cannot achieve.

PURPOSE: INTERNAL CONTROL — the principle governs administrative governance allocation, not individual user case outcomes.

BURDEN DESCRIPTION: The practical burden is governance-level: municipal decisions about NAV office organization must be defensible as exercises of autonomous judgment. This creates a low-intensity documentation and justification burden at the level of municipal leadership rather than frontline caseworkers. The circular provides the principle but no guidance on how organizational decisions should be documented or reviewed for compliance purposes.

KILL LIST CLASSIFICATION: Category B — Status Change. The principle is stated in section 2.7.1 as an assertion without clear § 7 grounding. It should be reformulated as a permissive provision — clarifying that municipalities have discretion to organize NAV office services in the manner they judge appropriate, while cross-referencing the compliance constraints that operate as a practical ceiling on that discretion. The current formulation creates a misleading impression of unfettered autonomy that the compliance landscape does not support.

TRANSACTION COST CATEGORY: No Transaction Cost Identified (governance-level burden, negligible for frontline caseworkers)

REQUIREMENT ID: § 7 / 5

PROVISION TEXT: The NAV office must apply in good time for supplementary budget appropriations if the current budget is expected to be insufficient to cover mandatory services.

SOURCE INSTRUMENT: Circular R-35 pkt. 2.7.1

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: PARTIAL — the statute grants the municipality open how-discretion for ensuring adequate funding for mandatory services. The statute does not prescribe a specific mechanism, actor, or timing. The circular occupies this discretionary space by mandating a specific procedure: a defined actor (Nav-kontoret), a specific action (apply for supplementary appropriations), and a timing condition ("i god tid"). The Process Inflation Findings characterize this as "shadow binding without statutory authorization" — the circular converts open statutory discretion into a fixed administrative procedure without explicit legal basis for doing so.

DOUBLE AUTHORITY GAP: NO — circular authority is present.

CATEGORY ERROR: NO

SCALE FLAG: PARTIAL — the Anchor Document's Cluster 2 confirms that administrative planning and budget monitoring functions are among the responsibilities that collapse onto NAV leaders in small offices. The timing element ("i god tid") presupposes a budget forecasting capacity that small-office leaders, who carry concurrent frontline caseloads, may not have time to exercise adequately.

PURPOSE: INTERNAL CONTROL — the obligation governs an internal administrative procedure directed upward within the budget hierarchy, not a user-facing service delivery step.

BURDEN DESCRIPTION: Caseworkers and NAV leaders must: (a) continuously monitor whether current appropriations are on track to cover the year's mandatory services; (b) project future expenditure with sufficient lead time to meet the "i god tid" requirement; (c) formally prepare and submit an application for supplementary allocations; (d) document the basis for the insufficiency assessment. The circular imposes these specific steps but provides no guidance on timing thresholds, forecasting methodology, or documentation format. A NAV leader in a small office, simultaneously managing frontline cases and administrative responsibilities, must comply with a budget management procedure that the circular mandates but does not operationalize. Burden category: Reporting Overhead (moderate), with structural disproportionality in small offices.

KILL LIST CLASSIFICATION: Category B — Status Change. The supplementary appropriations procedure is stated in mandatory terms ("må") but derives from open statutory discretion. This is a candidate for reformulation to permissive language: a guidance provision confirming that applying for supplementary appropriations is a recognized and appropriate mechanism for fulfilling the § 7 duty — without mandating it as the only or required procedure. Restoring local discretion in how the appropriations duty is operationally managed is within scope and would not reduce user protection.

TRANSACTION COST CATEGORY: Reporting Overhead + Structural Disproportionality

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REQUIREMENT ID: § 7 / 6

PROVISION TEXT: It is the municipality's responsibility to ensure that the service is dimensioned to maintain sufficient capacity to fulfill its legal obligations.

SOURCE INSTRUMENT: Kommunebrev 2025

CIRCULAR AUTHORITY: ABSENT — this requirement derives exclusively from Kommunebrev 2025 and has no presence in the circular. Consequence: any obligation it creates falls entirely outside the framework the circular provides. NAV leaders and municipal administrators must comply with a capacity dimensioning standard without any circular guidance on what "dimensjonert" means, what evidence demonstrates compliance, or how the obligation is to be fulfilled in practice.

LEGAL AUTHORITY: PARTIAL — service dimensioning is inferentially connected to § 7 (a municipality cannot fulfill its appropriations duty through systematically underdimensioned

services) but the connection is inferential rather than textual. The Process Inflation Findings flag this as "TVETYDIG" and note the connection "is inferential rather than direct." The Kommunebrev 2025 occupies a sub-legal space with no statutory anchor specifically for the dimensioning concept as distinct from the appropriations duty.

DOUBLE AUTHORITY GAP: YES — no circular authority AND only partial (inferential) statutory authority under § 7.

CATEGORY ERROR: NO

SCALE FLAG: YES — the Anchor Document's Tier 1 drivers (specialization requirement, Cluster 1 documentation-competence-specialization trap) confirm extensively that service dimensioning is the central structural failure across the supervision corpus. The Anchor Document states that municipalities below approximately 10,000–15,000 inhabitants cannot dimension services to meet all simultaneous requirements. Since this requirement has no circular authority, the scale-related burden it imposes on small municipalities is entirely unsupported by the circular framework.

PURPOSE: MIXED — primary: user need (ensures users receive legally entitled services through adequate organizational capacity); secondary: internal control (capacity dimensioning as administrative planning and reporting)

BURDEN DESCRIPTION: Municipal leadership and NAV administrators must: (a) periodically assess whether staffing, specialist capacity, and service organization are sufficient to meet all legal service obligations; (b) document the basis for dimensioning adequacy conclusions; (c) take organizational action when dimensioning is found inadequate; (d) justify dimensioning decisions under supervision. Since this requirement derives from a Kommunebrev with no circular grounding, no normative guidance exists on what "dimensjonert" means operationally, what evidence suffices, or how compliance should be demonstrated. The Anchor Document confirms the structural impossibility of meeting all dimensioning requirements for small municipalities, making this an obligation imposed without a normative framework for compliance. Burden category: Documentation Inflation + Structural Disproportionality, and the burden falls on administrative leadership without circular guidance.

KILL LIST CLASSIFICATION: Category A — Removal (from the § 7 normative framework). The requirement is sourced from a Kommunebrev with no circular authority and only an inferential statutory basis under § 7. It represents a double authority gap. While the underlying policy concern (adequate service dimensioning) is legitimate, its normative home is in the operational obligations of §§ 17–19 and § 4, not in the § 7 financial responsibility framework. Repeal from the § 7 commentary and from the Kommunebrev 2025 framework as currently structured; the underlying substance should be addressed in the appropriate provisions with adequate statutory grounding.

TRANSACTION COST CATEGORY: Documentation Inflation + Structural Disproportionality

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REQUIREMENT ID: § 7 / 7

PROVISION TEXT: If an applicant has a right to the service and meets the conditions for receiving it, the NAV office cannot deny the application on economic or other resource-based grounds.

SOURCE INSTRUMENT: Veileder § 17

CIRCULAR AUTHORITY: ABSENT — this requirement originates in Veileder § 17 and has no presence in the R-35 circular. Consequence: this provision operates on individual case decisions without any circular framework connecting it to the § 7 context in which it appears. NAV caseworkers reading the § 7 circular find no guidance on this obligation; caseworkers reading Veileder § 17 encounter it without its connection to § 7 being explained.

LEGAL AUTHORITY: PARTIAL — the prohibition on economic-ground denials has substantive legal validity under §§ 17–19 and § 7 read together, but its specific attribution to § 7 misapplies a systemic budgetary duty to individual case decision-making. The Process Inflation Findings flag "cross-source attribution ambiguity" and note the provision "originates from a different normative instrument (Veileder § 17) and creating cross-source attribution ambiguity." The provision has legal authority; its placement and attribution under § 7 are the problem.

DOUBLE AUTHORITY GAP: YES — no circular authority for the § 7 context AND only partial statutory authority under § 7 specifically (the provision's proper legal home is in §§ 17–19).

CATEGORY ERROR: YES — this provision governs individual administrative case decisions in specific service areas. Its legal domain is the individual rights and service assessment framework of §§ 17–19, not the systemic financial responsibility framework of § 7. Importing a Veileder § 17 provision into a § 7 commentary without explanation constitutes a category error: the wrong legal instrument is being used to anchor a provision that belongs to a different legal domain.

SCALE FLAG: PARTIAL — the Anchor Document confirms that resource and capacity constraints are structurally endemic in small municipalities, creating scenarios where this prohibition collides with operational reality. The prohibition is user-protective but its enforcement produces legal exposure for offices that structurally cannot avoid the very conditions it prohibits.

PURPOSE: USER NEED — direct protection of individual applicant rights against resource-motivated denials. Despite the category error in placement, the functional purpose is unambiguously user-oriented.

BURDEN DESCRIPTION: No primary transaction cost burden is identified. The obligation shapes the permissible grounds for individual decisions. However, since the requirement has no circular authority in the § 7 context and derives from a different normative instrument (Veileder § 17), any caseworker seeking to understand the obligation's source, scope, or operational boundaries must consult a normative instrument outside the § 7 framework. This creates secondary navigational burden without any guidance from the circular.

KILL LIST CLASSIFICATION: Category C — Clarification. The substantive protection is valid and important and should be retained in the normative framework. However, its placement under § 7 commentary via Veileder § 17 attribution creates a category error that must be resolved: the provision should be explicitly relocated to the §§ 17–19 individual service assessment commentary with clear cross-references, or its dual applicability (systemic and individual) should be explicitly explained. The current arrangement makes the obligation invisible from the § 7 circular and poorly attributed in both locations.

TRANSACTION COST CATEGORY: No Transaction Cost Identified (primary obligation); Combined Burden (navigational, secondary)

REQUIREMENT ID: § 7 / 8

PROVISION TEXT: A person who has a right to a service cannot be dismissed or denied on the grounds that the NAV office lacks the capacity or competence to provide that service.

SOURCE INSTRUMENT: Veileder § 17

CIRCULAR AUTHORITY: ABSENT — this requirement originates in Veileder § 17 and has no presence in the R-35 circular. Consequence: the prohibition on capacity/competence-based denials operates on individual case decisions without any circular framework in the § 7 context. Since the requirement has no circular authority, any burden it creates — including the double bind of prohibiting capacity-based denials while the office faces structural capacity failures — is entirely unsupported by the circular framework governing the office's work.

LEGAL AUTHORITY: PARTIAL / approaching NO under § 7. The Process Inflation Findings state that "the explicit prohibition against competence and capacity-based case rejections exceeds what the financial appropriation text in § 7 can legally authorize." The provision may have legal validity under §§ 17–19 (where individual service rights are governed), but § 7's financial responsibility framework cannot be read to mandate a specific prohibition at the individual case decision level.

DOUBLE AUTHORITY GAP: YES — no circular authority AND no credible statutory authority under § 7. The most severe double authority gap in this session.

CATEGORY ERROR: YES — this provision governs the grounds for individual administrative case decisions and belongs to the individual rights assessment domain of §§ 17–19. Importing it into a § 7 financial responsibility framework via Veileder § 17 is a category error. The provision exists in a different legal domain and has been misplaced under § 7 without any normative bridge.

SCALE FLAG: YES — directly implicated by the Anchor Document's most extensively confirmed findings. Driver 2 (Single-Specialist Vulnerability) and Tier 1 Driver A (specialization requirement) confirm that capacity and competence failures are structurally endemic in small offices (at least eight municipalities confirmed in the debt counseling domain alone). The prohibition operates in conditions structurally guaranteed by the same

normative framework, creating a structural impossibility. Since the requirement has no circular authority, this burden is imposed without any normative support structure.

PURPOSE: USER NEED — direct protection of individual users from service failures attributable to organizational deficiencies rather than legitimate eligibility reasons.

BURDEN DESCRIPTION: No primary transaction cost is identified for user-protective purposes. However, the secondary burden is structurally significant: since this prohibition applies in the very conditions small offices are structurally most likely to face (capacity and competence gaps confirmed across 40+ supervision reports), and since the requirement has no circular authority, caseworkers face a legal obligation to avoid denial grounds that the normative framework provides no guidance for managing. The double bind — cannot deny on capacity grounds, no circular guidance on what to do instead — creates legal exposure and secondary compliance pressure without normative support.

KILL LIST CLASSIFICATION: Category A — Removal from the § 7 normative framework, with mandatory relocation. This provision belongs to the §§ 17–19 individual service assessment framework and should be anchored there with appropriate legal authority and cross-references. Its presence under § 7 — via a Veileder § 17 import — is a double authority gap and a category error. The substantive protection is legitimate and should be preserved; its current placement and attribution are not. Removal from the § 7 commentary is warranted; reinstatement in the appropriate normative location is required.

TRANSACTION COST CATEGORY: Combined Burden (navigational and secondary compliance pressure in structurally impossible conditions)

REQUIREMENT ID: § 7 / 9

PROVISION TEXT: The Directorate of Labour and Welfare recommends that the municipality/NAV office enter monthly figures for at least the following municipal indicators in the NAV office's scorecard database, in the application "Ledelsesinformasjon": Total social assistance expenditure (grants and loans under §§ 18 and 19 of sosialtjenesteloven) during the month.

SOURCE INSTRUMENT: Kommunebrev 2025

CIRCULAR AUTHORITY: ABSENT — this requirement derives exclusively from Kommunebrev 2025 and has no presence in the circular. Consequence: the monthly data reporting obligation operates on NAV offices without any circular framework addressing it. The named IT application, the specific data category, and the monthly frequency are all circular-free obligations.

LEGAL AUTHORITY: NO — the Process Inflation Findings state that "the circular requires a highly specific reporting mechanism — including a named IT application and exact frequency — that is entirely absent from both the statutory text and its preparatory works." Neither § 7 nor any other provision of sosialtjenesteloven mandates the use of "Ledelsesinformasjon" or any equivalent scorecard database. The "anbefaler" language in the Kommunebrev creates

a shadow binding that operates with prescriptive weight in practice despite its advisory framing.

DOUBLE AUTHORITY GAP: YES — no circular authority AND no statutory authority. Total authority gap.

CATEGORY ERROR: NO — reporting obligations are within the social services administrative domain. The issue is the absence of legal foundation, not a domain mismatch.

SCALE FLAG: PARTIAL — the Anchor Document's Cluster 2 (Internal Control Apparatus) and the Nesna finding (too small for results to be communicated to local level) confirm that reporting and data infrastructure requirements generate disproportionate burdens in small offices. IT system fragmentation between state and municipal environments is documented as a compliance failure vector in multiple small offices (Averøy, Giske, Båtsfjord, Nav Hallingdal, and others). Since this requirement has no circular authority, any scale-related compliance burden it creates is entirely unsupported by any normative framework.

PURPOSE: INTERNAL CONTROL — monthly aggregate expenditure data entered into a scorecard database serves the Directorate's oversight and planning functions. The obligation has no effect on any individual user's case assessment or decision outcome.

BURDEN DESCRIPTION: Caseworkers and NAV leaders must: (a) collect aggregate monthly expenditure data on all social assistance costs under §§ 18 and 19; (b) access the "Ledelsesinformasjon" application; (c) enter the data monthly in the application's required format; (d) maintain active access credentials and operational familiarity with the system. The "anbefaler" framing does not reduce the practical compliance pressure in a directorate-issued communication. Since this requirement has no circular authority, caseworkers and leaders must fulfill a specific IT-based reporting obligation that the primary normative instrument governing their work does not address. There is no circular guidance on what to do if the application is inaccessible, whether alternative formats are acceptable, or how the obligation interacts with the municipal–state IT split documented in the Anchor Document. Burden category: Reporting Overhead + Documentation Inflation, imposed without any circular guidance framework.

KILL LIST CLASSIFICATION: Category A — Removal. The requirement has no circular authority and no statutory basis. The use of "anbefaler" language in a Kommunebrev to mandate the use of a named proprietary IT application for monthly reporting is a sub-legal normative instrument operating entirely outside the circular framework. It is a candidate for repeal from the normative framework or, at minimum, explicit reclassification as a voluntary administrative tool with no compliance implications. If the Directorate wishes to collect this data systematically, the obligation should be grounded in a proper regulatory instrument with appropriate legal authority.

TRANSACTION COST CATEGORY: Reporting Overhead + Documentation Inflation

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CLOSING COMPARATIVE NOTE

Summary Statistics

Requirements identified from Process Inflation Findings: 9 **Requirements that would have been visible from the circular alone:** 5 (Requirements 1–5) **Requirements invisible from the circular alone:** 4 (Requirements 6–9)

Double authority gaps: 4 (Requirements 6, 7, 8, and 9) **Category errors (requirements belonging to a different legal domain):** 2 (Requirements 7 and 8 — both originate in Veileder § 17 and belong to the individual service assessment domain of §§ 17–19, not the § 7 financial responsibility framework)

Kill List Breakdown

Category	Requirements	Count
Category A — Removal	§ 7/6, § 7/8, § 7/9	3
Category B — Status Change	§ 7/4, § 7/5	2
Category C — Clarification	§ 7/3, § 7/7	2
No Kill List Action	§ 7/1, § 7/2	2

Primary Transaction Cost Categories by Frequency

Transaction Cost Category	Requirements
Reporting Overhead	§ 7/5, § 7/9
Documentation Inflation	§ 7/3, § 7/6, § 7/9
Structural Disproportionality	§ 7/5, § 7/6
Combined Burden	§ 7/7 (secondary), § 7/8 (secondary)
No Transaction Cost Identified	§ 7/1, § 7/2, § 7/4

Analytical Synthesis

The § 7 session reveals a characteristic pattern for a provision that governs systemic financial responsibility: the circular's own text is reasonably well-anchored in two core user-protective obligations (Requirements 1 and 2), but three of the five circular-based requirements (Requirements 3, 4, and 5) involve partial authority gaps or shadow binding that warrants either clarification or reformulation. The more significant finding is that four requirements operating invisibly from the circular alone — all four with double authority gaps — impose compliance obligations through sub-legal instruments without any circular normative support structure. Two of these (Requirements 7 and 8) are category errors:

provisions governing individual case decision-making have been imported from Veileder § 17 into a systemic financial responsibility commentary without normative bridge or legal grounding in § 7. One (Requirement 9) is a total authority gap — a named IT application with a specific monthly reporting obligation that has no statutory basis whatsoever. One (Requirement 6) creates a capacity dimensioning obligation through a Kommunebrev that the Anchor Document confirms is structurally impossible for a substantial proportion of Norwegian municipalities to meet.

The Kill List output for this session is therefore notably weighted toward Category A (removal): three of nine requirements are candidates for repeal from the § 7 normative framework. This reflects a structural pattern specific to this provision — § 7's narrow statutory scope (financial appropriations) has attracted normative accretion from instruments governing entirely different legal domains, producing a commentary section that substantially exceeds the provision's legal terrain.

SLUDGE AUDIT — § 8 STATENS ANSVAR OG MYNDIGHET

Session reference: SAT-§8 | Analyst: Legal-Administrative Analyst | Format: Full six-step structured audit

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PRELIMINARY METHODOLOGICAL NOTE

Quantitative visibility gap: The Process Inflation Findings enumerate **15 requirements** (PROC-REQ-8.1 through PROC-REQ-8.15) for § 8. Starting from the circular paragraph alone (the statutory text of § 8 plus commentary 2.8.1), a direct reader would identify at most **8 requirements** — those directly reproduced in or derivable from the statutory text and its explanatory commentary. The Process Inflation Findings therefore reveal **7 additional requirements** that are structurally invisible from the circular alone, representing a 46% expansion in the normative obligation landscape relative to what the primary instrument discloses.

Requirements with no textual presence in the circular:

Requirement	Source instrument	Instrument type
PROC-REQ-8.9	Kommunebrev	(a) Kommunebrev
PROC-REQ-8.10	Kommunebrev	(a) Kommunebrev
PROC-REQ-8.11	Kommunebrev	(a) Kommunebrev
PROC-REQ-8.12	Kommunebrev	(a) Kommunebrev
PROC-REQ-8.13	Kommunebrev	(a) Kommunebrev
PROC-REQ-8.14	Kommunebrev	(a) Kommunebrev
PROC-REQ-8.15	Veileder om økonomisk stønad	(b) Veileder

The core analytical implication is structural: a compliance reader working from the circular alone would overlook all seven of these requirements — including the one (PROC-REQ-8.13) that the Process Inflation Findings identify as containing an explicit legal gap. The Kommunebrev layer operates as a normative add-on to the circular framework without being subordinated to it, meaning obligations issued through that channel are invisible from the primary normative instrument governing the relationship between the state and the municipalities. This source mapping is carried into Step 2.

STEP 1 — IDENTIFICATION OF ALL REQUIREMENTS

The following enumerates all 15 requirements as expressed in the Process Inflation Findings. Requirements PROC-REQ-8.1 and PROC-REQ-8.5 are included with a note that they were classified as substantive legal obligations in the Process Inflation Findings Step 2 and are therefore not subject to Steps 3–5 analysis; they are carried through Step 6 for completeness of the catalog.

REQ-§8-01 Obligation: Departementet shall follow that the law, regulations, and other provisions governing services under the Act are applied correctly and in a manner that promotes the law's purpose effectively and appropriately. **Source:** PROC-REQ-8.1 / R-35 Para 8 (circular) **Character:** Explicit **Circular presence:** PRESENT — reproduced verbatim as § 8 first paragraph, letter (a)

REQ-§8-02 Obligation: Ensure that experiences with the law are assessed and that necessary regulatory changes are implemented. **Source:** PROC-REQ-8.2 / R-35 Para 8 (circular) **Character:** Explicit **Circular presence:** PRESENT — reproduced verbatim as § 8 first paragraph, letter (b)

REQ-§8-03 Obligation: Issue the guidelines and instructions necessary to achieve the stated supervisory goal. **Source:** PROC-REQ-8.3 / R-35 Para 8 (circular) **Character:** Explicit **Circular presence:** PRESENT — reproduced as § 8 first paragraph, letter (c)

REQ-§8-04 Obligation: Work to initiate research that may be relevant to solving tasks under the law. **Source:** PROC-REQ-8.4 / R-35 Para 8 (circular) **Character:** Explicit **Circular presence:** PRESENT — reproduced as § 8 first paragraph, letter (d)

REQ-§8-05 Obligation: Ensure that an adequate ("forsvarlig") offer for training of personnel exists, and that those who are to apply the law otherwise receive adequate guidance. **Source:** PROC-REQ-8.5 / R-35 Para 8 (circular) **Character:** Explicit **Circular presence:** PRESENT — reproduced as § 8 first paragraph, letter (e)

REQ-§8-06 Obligation: Ensure that information materials are prepared that social services can use. **Source:** PROC-REQ-8.6 / R-35 Para 8 (circular) **Character:** Explicit **Circular presence:** PRESENT — reproduced as § 8 first paragraph, letter (f), with cross-reference to § 12

REQ-§8-07 Obligation: Municipal organs subject to the Act must, notwithstanding confidentiality obligations, provide the information and messages necessary for the Department to perform its functions under the first paragraph, when so requested. **Source:** PROC-REQ-8.7 / R-35 Para 8 (circular) **Character:** Explicit **Circular presence:** PRESENT — reproduced as § 8 second paragraph

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REQ-§8-08 Obligation: The Department may delegate responsibility under § 8. **Source:** PROC-REQ-8.8 / R-35 Para 8 Commentary 2.8.1 (circular commentary) **Character:** Explicit (in commentary); implicit in scope **Circular presence:** PRESENT — stated in commentary 2.8.1, not in the statutory text itself

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REQ-§8-09 Obligation: Arbeids- og velferdsdirektoratet has the national professional and administrative responsibility ("fag- og forvaltningsansvar") for the social services, and shall within its area of responsibility work to prevent and reduce poverty. **Source:** PROC-REQ-8.9 / Kommunebrev **Character:** Explicit **Circular presence:** ABSENT — no textual presence in the circular; entirely a Kommunebrev assertion

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REQ-§8-10 Obligation: Arbeids- og velferdsdirektoratet holds legal interpretation responsibility ("lovfortolkningsansvar") for the social services in the NAV office. **Source:** PROC-REQ-8.10 / Kommunebrev **Character:** Explicit **Circular presence:** ABSENT — not addressed in the circular or its commentary

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REQ-§8-11 Obligation: Direktoratet will prepare further professional guidance material on barnets beste to support municipalities in NAV during 2025. **Source:** PROC-REQ-8.11 / Kommunebrev **Character:** Explicit **Circular presence:** ABSENT — no textual presence in the circular

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REQ-§8-12 Obligation: Arbeids- og velferdsdirektoratet recommends that municipalities review their internal control system for social services. **Source:** PROC-REQ-8.12 / Kommunebrev **Character:** Explicit **Circular presence:** ABSENT — no textual presence in the circular

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REQ-§8-13 Obligation: Arbeids- og velferdsdirektoratet recommends that the municipality/NAV office enter monthly figures for at least the specified municipal indicators into the NAV office's scorecard database. **Source:** PROC-REQ-8.13 / Kommunebrev **Character:** Explicit **Circular presence:** ABSENT — no textual presence in the circular

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REQ-§8-14 Obligation: Arbeids- og velferdsdirektoratet is working on a guide ("veiviser") to provide direction and ideas for coordinating training at the regional level. **Source:** PROC-REQ-8.14 / Kommunebrev **Character:** Explicit **Circular presence:** ABSENT — no textual presence in the circular

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REQ-§8-15 Obligation: Arbeids- og inkluderingsdepartementet has tasked Arbeids- og velferdsdirektoratet with preparing a dedicated guide on financial social assistance (veileder om økonomisk sosialhjelp). **Source:** PROC-REQ-8.15 / Veileder om økonomisk stønad **Character:** Explicit **Circular presence:** ABSENT — no textual presence in the circular

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STEP 2 — LEGAL AUTHORITY CHECK

Each requirement is subjected to a bi-directional authority check.

REQ-§8-01 Direction 1 — Circular authority: **YES** — direct statutory reproduction. Direction 2 — Statutory authority: **YES** — the obligation is the statute. Double authority gap: **NO** Category error: **NO** *Note: Process Inflation Findings classify as [SUBSTANTIVE LEGAL OBLIGATION]; no gap analysis applied in reference document.*

REQ-§8-02 Direction 1 — Circular authority: **YES** — verbatim statutory reproduction. Direction 2 — Statutory authority: **YES** — no gap; open normative standard preserved without escalation. Double authority gap: **NO** Category error: **NO**

REQ-§8-03 Direction 1 — Circular authority: **YES** — statutory reproduction. Direction 2 — Statutory authority: **YES** — no gap; open normative standard intact. Double authority gap: **NO** Category error: **NO**

REQ-§8-04 Direction 1 — Circular authority: **YES** — statutory reproduction. Direction 2 — Statutory authority: **YES** — no gap; verbatim reproduction without escalation. Double authority gap: **NO** Category error: **NO**

REQ-§8-05 Direction 1 — Circular authority: **YES** — statutory reproduction. Direction 2 — Statutory authority: **YES** — substantive legal obligation with clear statutory anchor. Double authority gap: **NO** Category error: **NO** *Note: Process Inflation Findings classify as [SUBSTANTIVE LEGAL OBLIGATION]; exempt from Step 3 analysis in reference document.*

REQ-§8-06 Direction 1 — Circular authority: **YES** — statutory reproduction including § 12 cross-reference. Direction 2 — Statutory authority: **YES** — no gap; verbatim reproduction. Double authority gap: **NO** Category error: **NO**

REQ-§8-07 Direction 1 — Circular authority: **YES** — reproduced as § 8 second paragraph with "kan" preserved. Direction 2 — Statutory authority: **YES** — permissive construction correctly carried through; no escalation. Double authority gap: **NO** Category error: **NO**

REQ-§8-08 Direction 1 — Circular authority: **PARTIAL** — present in commentary 2.8.1 but absent from statutory text reproduced in the circular; delegation operates as an explanatory note, not a binding rule. Direction 2 — Statutory authority: **PARTIAL** — Process Inflation Finding KRAV 8.8 confirms that while delegation is a recognized administrative principle supported by preparatory works, the actual text of § 8 contains no explicit statutory authority for delegation. The finding flags this as ambiguous and recommends human legal review. Double authority gap: **NO** — both directions yield PARTIAL, which does not constitute the combination of ABSENT (circular) and NO/PARTIAL (statutory) that triggers a double authority gap under the strict definition. However, the ambiguity on both directions is analytically significant. Category error: **NO**

REQ-§8-09 Direction 1 — Circular authority: **ABSENT** — the institutional mandate described in the Kommunebrev has no textual presence in the circular. **First-order authority gap confirmed.** Direction 2 — Statutory authority: **PARTIAL** — Process Inflation Finding KRAV 8.9 classifies this as a [SUBSTANTIVE LEGAL OBLIGATION] with the poverty-prevention mandate implied by the general purposes of the Act, but the specific formulation "nasjonalt fag- og forvaltningsansvar" as a defined institutional construct is not explicit in § 8. The institutional label operates beyond what the statute text states. Double authority gap: **YES** — circular authority ABSENT; statutory authority PARTIAL. Category error: **NO**

REQ-§8-10 Direction 1 — Circular authority: **ABSENT** — "lovfortolkningsansvar" as a specific institutional mandate has no textual presence in the circular. **First-order authority gap confirmed.** Direction 2 — Statutory authority: **PARTIAL** — Process Inflation Finding KRAV 8.10 notes that while § 8(c)'s authority to issue guidelines implies an interpretation role, "lovfortolkningsansvar" as a specific legal mandate is not explicitly grounded in § 8 alone. Flagged as ambiguous and recommended for human legal review. Double authority gap: **YES** — circular authority ABSENT; statutory authority PARTIAL. Category error: **NO** — this is an internal administrative governance construct within the social services framework. It does not derive from a different legal domain.

REQ-§8-11 Direction 1 — Circular authority: **ABSENT** — no textual presence in circular. **First-order authority gap confirmed.** Direction 2 — Statutory authority: **YES** — Process Inflation Finding KRAV 8.11 confirms this falls clearly within the open discretion of § 8(f). The lack of statutory citation is not disqualifying. Double authority gap: **NO** — statutory authority is YES. Category error: **NO**

REQ-§8-12 Direction 1 — Circular authority: **ABSENT** — no textual presence in circular. **First-order authority gap confirmed.** Direction 2 — Statutory authority: **YES** — Process Inflation Finding KRAV 8.12 confirms no gap; the recommendation is weaker than the statute's own "skal" and represents a standard guidance role. Double authority gap: **NO** — statutory authority is YES. Category error: **NO**

REQ-§8-13 Direction 1 — Circular authority: **ABSENT** — no textual presence in circular. **First-order authority gap confirmed.** Direction 2 — Statutory authority: **NO** — Process Inflation Finding KRAV 8.13 explicitly establishes a gap between the ad hoc information-demand power in § 8 second paragraph ("kan kreve ... de opplysninger og meldinger som er nødvendige") and the Kommunebrev's recommendation for a *continuous, permanent* monthly reporting regime utilizing *specific indicators* in a *specific database*. The statutory provision is permissive and occasion-specific; the Kommunebrev constructs a standing routine obligation of a qualitatively different character. Double authority gap: **YES** — circular authority ABSENT and statutory authority NO. **Double authority gap confirmed. This is the most significant authority failure in § 8.** Category error: **NO** — the reporting function is within the social services domain. However, it is noted that the scorecard database infrastructure is a state-side IT instrument ("Nav-kontorets målekortdatabase") to which municipalities contribute data — this raises a secondary question about whether the data-entry obligation constitutes a state administrative requirement imposed on a municipal entity without statutory foundation, which touches on the municipal-state governance boundary under kommuneloven principles. Flag for legal verification.

REQ-§8-14 Direction 1 — Circular authority: **ABSENT** — no textual presence in circular. **First-order authority gap confirmed.** Direction 2 — Statutory authority: **YES** — Process Inflation Finding KRAV 8.14 confirms this falls within the lawful how-discretion of § 8(e). No gap identified. Double authority gap: **NO** — statutory authority is YES. Category error: **NO**

REQ-§8-15 Direction 1 — Circular authority: **ABSENT** — no textual presence in circular. **First-order authority gap confirmed.** Direction 2 — Statutory authority: **YES** — Process Inflation Finding KRAV 8.15 confirms this falls within open discretion of § 8(c) and (f). No gap identified. Double authority gap: **NO** — statutory authority is YES. Category error: **NO**

Summary of Step 2 findings:

- First-order authority gaps (absent from circular): 7 requirements (REQ-§8-09 through REQ-§8-15)
- Double authority gaps (absent from circular AND no/partial statutory authority): 3 requirements (REQ-§8-09, REQ-§8-10, REQ-§8-13)
- Category errors: 0

STEP 3 — SCALE AND PROPORTIONALITY CHECK

Cross-referenced against the Volume Driver Findings (Anchor Document). The Anchor Document focuses primarily on §§ 17–20a. For § 8, which governs state-level responsibilities rather than municipal service delivery directly, the scale analysis applies to whether the requirements presuppose organizational capacity that municipalities and NAV offices do not have.

REQ-§8-01: Scale flag: **NO** — a supervisory/monitoring obligation at departmental level; does not presuppose municipal organizational capacity.

REQ-§8-02: Scale flag: **NO** — regulatory review at national level.

REQ-§8-03: Scale flag: **NO** — guideline issuance at national level, though the Anchor Document confirms that the guidelines produced under this authority (notably Rundskriv 35) are themselves the primary source of volume drivers downstream. This is an indirect structural observation, not a direct scale flag on the requirement itself.

REQ-§8-04: Scale flag: **NO** — research commissioning at national level.

REQ-§8-05: Scale flag: **PARTIAL** — the obligation to ensure an adequate training offer connects directly to Anchor Document findings. The Anchor Document's Mechanism [K] (Competence Sustainability) is confirmed across more than 10 municipalities as the structural consequence of inadequate training combined with low case frequency. The Volume Driver analysis for §17 (Tier 1, Driver 2) and the Cluster 1 documentation confirms that competence sustainability failures are system-wide. The § 8(e) obligation to ensure adequate training is therefore structurally linked to the dominant empirical failure mode in the dataset — not because the requirement is disproportionate, but because the system it requires has demonstrably not been built in a way that functions at small-municipality scale. This does not constitute disproportionate burden on the requirement itself (which is addressed to the state), but it constitutes structural evidence that the § 8(e) obligation is not being discharged effectively. No circular authority gap exists here, so the scale finding is informational only.

REQ-§8-06: Scale flag: **NO** — material production at national level.

REQ-§8-07: Scale flag: **NO** — ad hoc information demand triggered by Department, not a standing municipal obligation.

REQ-§8-08: Scale flag: **NO** — delegation mechanism at national level.

REQ-§8-09: Scale flag: **PARTIAL** — The Anchor Document's §17/§18 Volume Driver analysis confirms that the poverty prevention mandate embedded in national policy has not translated into structurally adequate service capacity at the local level. The cumulative volume driver clusters (especially Cluster 1) show that municipalities are consistently failing to meet substantive service obligations in the poverty-prevention domain. The "fag- og forvaltningsansvar" framing implies a national coordination capacity that the empirical record suggests is insufficiently operationalized. Given that circular authority is ABSENT and statutory authority is PARTIAL, the scale-related observations compound an already-identified authority problem: the requirement asserts an institutional mandate without adequate regulatory grounding, and the Anchor Document confirms the mandate is not being discharged effectively at the organizational level it depends on.

REQ-§8-10: Scale flag: **PARTIAL** — The Anchor Document's Track A intersections specifically identify legal interpretation inconsistency as a structural problem: multiple Statsforvalteren offices sanction different municipalities differently for the same underlying failures (see Part 5 in the §17/§18 Volume Driver memo, §17 vedtak requirement). If Direktoratet holds lovfortolkningsansvar, the Anchor Document provides empirical evidence that this responsibility is not producing interpretive consistency at the operational level. Given that circular authority is ABSENT and statutory authority is PARTIAL, this constitutes an unsupported institutional claim — combined with the Anchor Document's evidence of interpretive fragmentation, it demonstrates a disproportionate burden without regulatory foundation: the claim of lovfortolkningsansvar creates compliance expectations at the municipal level without producing the interpretive certainty that would justify them.

REQ-§8-11: Scale flag: **YES** — The Anchor Document's Cluster 3 (Child Perspective Documentation) and its confirmation across 15+ supervision reports directly validates the need for barnets beste guidance. The Volume Driver analysis (Driver 6, §18/§19 domain) identifies child-perspective documentation failures as a moderate-to-high structural impact driver, confirmed empirically. The preparation of guidance material is responsive to this volume driver. No disproportionate burden is imposed by the requirement itself (which is addressed to Direktoratet); the scale flag confirms that the downstream problem the requirement responds to is real and empirically severe. Circular authority is ABSENT but statutory authority is YES; no double authority gap.

REQ-§8-12: Scale flag: **YES** — The Anchor Document identifies internal control apparatus failures [D]+[C] as the second most structurally significant cluster across the entire dataset. Cluster 2 in the Volume Driver analysis ("The Internal Control Apparatus") documents the pervasive failure of the internkontroll infrastructure across offices of all sizes, but disproportionately in small municipalities. The recommendation to review internal control systems directly engages the dominant empirical mechanism in the supervision record. The connection is confirmed. Given that circular authority is ABSENT but statutory authority is YES, the scale flag indicates that the requirement responds to a real structural need, but it operates without the normative framing the circular could provide — meaning municipalities

receiving this recommendation have no circular context for how to prioritize, scope, or execute the review.

REQ-§8-13: Scale flag: **YES** — The Anchor Document's dominant finding is that documentation apparatus [D] is the primary volume driver across the entire empirical dataset (~65 findings, ~42% of all Set B occurrences). A standing obligation to enter monthly data into a national scorecard database is precisely the type of documentation apparatus that the Anchor Document identifies as disproportionately burdensome in small offices. Small municipalities — typically with 5–15 social services caseworkers — lack back-office administrative capacity for routine performance data management. The Anchor Document's Part 3 Cluster 2 notes that cumulative internal control obligations produce compliance burdens that consistently exceed small-office capacity. Given that circular authority is ABSENT and statutory authority is NO, this requirement imposes documented, empirically-confirmed documentation burden **without any regulatory foundation** — the most severe combination in the § 8 audit.

REQ-§8-14: Scale flag: **PARTIAL** — The Anchor Document's [K] mechanism findings confirm that regional training coordination addresses a real competence sustainability problem. The requirement to develop a guide for regional training coordination responds to the structural training gap. No direct proportionality problem identified in the requirement itself. Circular authority is ABSENT but statutory authority is YES.

REQ-§8-15: Scale flag: **PARTIAL** — The Anchor Document's Track A intersections specifically flag the Veileder om økonomisk stønad as a key sub-legal instrument whose level-tiering and formalization requirements are primary sources of volume-driven compliance burdens (Driver 1, Tier 1; Driver 3, Tier 2). The preparation of the guide is therefore implicated in both responding to and potentially generating volume driver effects downstream. No proportionality problem identified in the requirement itself (which is a national-level institutional task). Circular authority is ABSENT but statutory authority is YES.

STEP 4 — PURPOSE CLASSIFICATION

REQ-§8-01: [USER NEED] — The supervisory obligation to ensure correct application of law and promotion of its purpose is directly and exclusively oriented toward the outcomes the Act intends for users of social services. The framing "fremmer lovens formål" is user-outcome language.

REQ-§8-02: [USER NEED] — Regulatory review and improvement of the Act based on accumulated experience ultimately serves the quality and fairness of user assessments. No documentation or reporting function is served by this requirement in the first instance.

REQ-§8-03: [MIXED] — The production of necessary guidelines and instructions serves both user protection (ensuring correct and consistent application of law, which directly affects case outcomes) and internal administrative control (standardizing practice, creating a traceable normative framework for supervisory audit). Primary purpose: USER NEED — the

guidelines are intended to govern quality of decision-making. Secondary purpose: INTERNAL CONTROL — they also serve as the benchmarks against which compliance is assessed.

REQ-§8-04: [MIXED] — Research serves systemic improvement in service quality (user benefit) and also serves institutional knowledge-building and administrative legitimation functions. Primary purpose: USER NEED — "oppgaver etter loven" links research directly to service quality. Secondary purpose: INTERNAL CONTROL — research findings also serve the reporting and regulatory review functions in REQ-§8-02.

REQ-§8-05: [USER NEED] — The obligation to ensure adequate training and guidance for personnel who apply the law is entirely oriented toward service quality for users. The "forsvarlig" standard in the source instrument is a quality-of-care standard, not a documentation standard.

REQ-§8-06: [MIXED] — Information materials serve users (access to accurate information about their rights and available services) and also serve administrative standardization (municipalities using state-produced materials rather than producing conflicting local versions). Primary purpose: USER NEED — the framing "som sosialtjenesten kan bruke" indicates the purpose is service delivery support. Secondary purpose: INTERNAL CONTROL — standardized materials reduce normative fragmentation across municipalities.

REQ-§8-07: [INTERNAL CONTROL] — The obligation for municipal organs to provide information and messages to the Department upon request serves exclusively the Department's capacity to perform supervisory and administrative functions. It has no direct bearing on the outcome of any individual user's case. The scope of the provision extends explicitly to "opplysninger til statistiske formål" — the statistical purpose confirms the internal monitoring character. The source instrument preserves permissive ("kan kreve") language, but the obligation on the municipal side when activated is unconditional.

REQ-§8-08: [INTERNAL CONTROL] — The delegation mechanism serves the organizational architecture of the state administration. It has no direct bearing on user case outcomes. The commentary language ("departementet kan delegere ansvaret") is entirely structural and administrative in purpose.

REQ-§8-09: [MIXED] — The poverty-prevention mandate serves users directly (addressing the structural social harm that social services are designed to mitigate). The "fag- og forvaltningsansvar" formulation also serves institutional administrative structuring — it establishes Direktoratet's authority position within the administrative hierarchy. Primary purpose: USER NEED — poverty prevention is the core social purpose. Secondary purpose: INTERNAL CONTROL — the institutional mandate framing serves administrative authority distribution, not user outcomes directly.

REQ-§8-10: [INTERNAL CONTROL] — Lovfortolkningsansvar as a specific institutional mandate serves the internal governance structure of the NAV administrative hierarchy. It determines who speaks authoritatively within the system, not what outcome users receive. While consistent legal interpretation may benefit users indirectly, the requirement as expressed in the Kommunebrev is about internal authority positioning. No user-facing outcome is directly served by the institutional label itself.

REQ-§8-11: [USER NEED] — Preparation of professional guidance material on barnets beste directly supports the quality of assessments made on behalf of children in social services cases. The Anchor Document confirms that failures in this domain are producing concrete adverse outcomes for users (families with children). The guidance serves practitioner competence, which serves user outcomes.

REQ-§8-12: [INTERNAL CONTROL] — The recommendation to review internal control systems serves administrative compliance monitoring. While well-functioning internal control ultimately may benefit users through error detection, the requirement as expressed is about the administrative compliance apparatus itself — reviewing whether required internkontroll systems are in place, not about any specific user case outcome.

REQ-§8-13: [INTERNAL CONTROL] — Monthly entry of municipal performance indicators into a national scorecard database serves exclusively performance monitoring, administrative oversight, and reporting functions at the national level. The indicators tracked serve the state's capacity to manage and assess municipal performance. No individual user outcome is served by this monthly data-entry routine. The source instrument language ("anbefaler å legge inn månedstall") is unambiguously performance management in character.

REQ-§8-14: [MIXED] — A guide for coordinating regional training serves practitioner competence (indirectly benefiting users through better caseworker skills) and administrative coordination at the regional level (internal governance function). Primary purpose: USER NEED — regional training coordination responds to the competence sustainability failures documented in the Anchor Document. Secondary purpose: INTERNAL CONTROL — the coordination framework also serves administrative structure.

REQ-§8-15: [USER NEED] — A dedicated guide on financial social assistance (veileder om økonomisk sosialhjelp) primarily serves practitioners in making legally correct and substantively adequate decisions for users. The commissioning of the guide responds to documented gaps in guidance for a service domain with high user stakes.

STEP 5 — TRANSACTION COST CHARACTERIZATION

Only requirements classified as [INTERNAL CONTROL] or [MIXED] are analyzed here. Requirements classified as [USER NEED] are confirmed as generating no transaction cost burden.

REQ-§8-03 [MIXED] The production of guidelines and instructions at Direktoratet level creates downstream compliance obligations for NAV leaders and caseworkers who must track, internalize, and apply evolving normative guidance. While the production function rests with the state, the consumption function falls on municipal social services staff. Caseworkers must maintain current awareness of guidelines across multiple service domains simultaneously. The Anchor Document confirms that the guidelines produced under this

authority — especially Rundskriv 35 — are themselves the structural source of the most pervasive volume drivers in the dataset. The transaction cost is therefore not in the requirement itself but in the system it authorizes: the circular framework enables the production of sub-legal normative instruments that impose compliance burdens at the operational level without the same degree of scrutiny as statutory text.

REQ-§8-04 [MIXED] No direct caseworker transaction cost from the research-initiation function. The research process is conducted at national level by external bodies. Indirect downstream effect possible if research findings produce new normative instruments, but this is speculative and not measurable at the point of the requirement.

REQ-§8-06 [MIXED] Modest administrative burden at local level to locate, maintain awareness of, and apply state-produced information materials. Where materials become outdated or conflict with local practice, caseworkers must manage the gap. No significant transaction cost identified as a primary burden.

REQ-§8-07 [INTERNAL CONTROL] When the Department exercises its information-demand power, municipal organs must: identify the relevant data or records, assess what falls within "nødvendige opplysninger og meldinger," compile and prepare the response without confidentiality barriers, and transmit the information on the required timeline. For small NAV offices with limited administrative capacity, ad hoc information demands — even occasional ones — divert caseworker and management time from service delivery. The circular preserves the "kan kreve" permissive language but provides no guidance on how frequently this power may be exercised, what processes municipalities must have in place to respond, or what notice period applies. The absence of circular guidance on procedure means caseworkers must comply with a demand-based obligation that the primary normative instrument does not address operationally.

REQ-§8-08 [INTERNAL CONTROL] Delegation mechanisms at the national level create complexity for NAV leaders in understanding the chain of authority: who issues binding guidance, under what authority, and in what form. For municipal NAV offices, understanding whether a Kommunebrev reflects ministerial authority, delegated Direktorat authority, or purely advisory Direktorat function is a structural compliance challenge. The commentary does not specify the form delegation takes, its limits, or how municipal actors should verify the authority basis of communications they receive. The transaction cost is modest for individual caseworkers but structurally significant at the system level — it is the unresolved delegation architecture that enables the Kommunebrev layer to operate as a shadow normative instrument.

REQ-§8-09 [MIXED] At the municipal level, the "nasjonalt fag- og forvaltningsansvar" claim creates an implicit compliance expectation: if Direktoratet has national professional responsibility for social services, then NAV offices must treat Kommunebrev communications as authoritative guidance, not merely advisory materials. The shadow binding effect of this institutional claim is the primary transaction cost — it expands the effective normative weight of Kommunebrev content without providing legal grounding for that weight. Given that circular authority is ABSENT and statutory authority is PARTIAL, this transaction cost is unsupported by the circular framework — caseworkers must calibrate their compliance

behavior against an institutional claim that the primary normative instrument does not validate.

REQ-§8-10 [INTERNAL CONTROL] Lovfortolkningsansvar creates concrete compliance obligations at the municipal level: NAV leaders and caseworkers must identify and follow Direktoratet's legal interpretations in preference to other available interpretations. This requires: tracking Direktoratet communications for interpretive guidance, resolving conflicts between Direktoratet interpretations and Statsforvalteren supervisory expectations (which the Anchor Document confirms are not always consistent), and treating Kommunebrev content as legally authoritative for interpretation purposes. For caseworkers in small offices who process few specialized cases per year, maintaining awareness of evolving Direktoratet interpretations across all service domains imposes meaningful ongoing compliance monitoring overhead. Given that circular authority is ABSENT and statutory authority is PARTIAL, this transaction cost falls entirely outside any framework the circular provides guidance for — caseworkers must comply with an interpretive authority claim that the primary normative instrument governing their work does not confirm.

REQ-§8-12 [INTERNAL CONTROL] The recommendation to review internal control systems requires: management time to conduct or commission the review; documentation of current internkontroll arrangements; gap analysis against supervisory expectations; preparation of a remediation or improvement plan; and implementation follow-through. The Anchor Document confirms that internkontroll failures are among the most pervasive in the supervision dataset — Cluster 2 documents this across dozens of reports. For small municipalities with already-overstretched NAV leaders, a comprehensive internal control review generates substantial management overhead. Given that circular authority is ABSENT, this recommendation operates without any circular framing — municipalities receiving it have no normative reference point for how to scope the review, what standard to apply, or how to prioritize among identified gaps.

REQ-§8-13 [INTERNAL CONTROL] The standing monthly reporting obligation requires: identification of which indicators are relevant for the specific office; establishment of data collection routines across multiple internal systems; monthly entry of figures into the NAV scorecard database; ongoing maintenance of access rights, familiarity with the database interface, and data validation; and correction of prior months' entries when errors are identified. This is a recurring, perpetual administrative burden imposed on all NAV offices regardless of size. The Anchor Document identifies documentation apparatus [D] as the dominant volume driver in the entire dataset (~65 findings, ~42% of all Set B occurrences). Monthly scorecard reporting is structurally analogous to the documentation obligations that small offices are routinely sanctioned for failing to maintain. For micro-offices with 5–10 staff, a dedicated monthly data reporting routine competes directly with frontline service delivery time. Given that circular authority is ABSENT and statutory authority is NO, this transaction cost is the most structurally ungrounded in the § 8 audit — caseworkers must comply with a standing administrative obligation that neither the circular nor the statute supports.

REQ-§8-14 [MIXED] At the municipal level, participation in regionally coordinated training requires: management coordination time to ensure staff attendance; scheduling adjustments to maintain service continuity during staff absence for training; and integration of new training content into local practice. The burden is modest compared to other requirements

and is offset by the competence benefit. Given that circular authority is ABSENT, this requirement operates outside the circular framework, but the transaction cost is proportionate to the user need it serves.

STEP 6 — CATALOG ENTRIES

REQUIREMENT ID: SAT-§8-REQ-01 **PROVISION TEXT:** Departementet shall monitor that the Act, regulations, and other provisions are applied correctly and in a manner that promotes the law's purpose. **SOURCE INSTRUMENT:** Circular R-35, Para 8 (statutory text reproduced verbatim) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — direct statutory obligation; no gap identified (PROC-REQ-8.1, KRAV 8.1) **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED — correctly applying the law in a purpose-promoting manner is entirely oriented toward user outcomes. **BURDEN DESCRIPTION:** No transaction cost identified. This is a substantive legal obligation governing the quality standard for law application, not a documentation or reporting requirement. **KILL LIST CLASSIFICATION:** No Kill List Action — clear statutory authority, direct user orientation, no disproportionate burden. **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: SAT-§8-REQ-02 **PROVISION TEXT:** Departementet shall ensure that experiences with the Act are assessed and that necessary regulatory changes are implemented. **SOURCE INSTRUMENT:** Circular R-35, Para 8 (statutory text reproduced verbatim) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — verbatim statutory reproduction, open normative standard preserved without escalation (KRAV 8.2) **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED — systemic regulatory improvement serves users through better-calibrated law. **BURDEN DESCRIPTION:** No transaction cost identified at the caseworker or NAV leader level. This is a national-level evaluative function. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: SAT-§8-REQ-03 **PROVISION TEXT:** Departementet shall issue the guidelines and instructions necessary to achieve the supervisory goal in § 8(a). **SOURCE INSTRUMENT:** Circular R-35, Para 8 (statutory text reproduced verbatim) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — verbatim statutory reproduction (KRAV 8.3) **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO — no direct scale issue at the production level; structurally significant downstream because this provision authorizes the normative instruments that generate volume drivers identified in the Anchor Document. **PURPOSE:** MIXED — primary USER NEED (ensures legally correct casework); secondary INTERNAL CONTROL (creates compliance benchmarks). **BURDEN DESCRIPTION:** Indirect downstream compliance monitoring burden for caseworkers and NAV leaders who must track, internalize, and apply evolving guidelines across multiple

service domains. This requirement is the statutory foundation authorizing Rundskriv 35 — the sub-legal instrument identified by the Anchor Document as the primary structural source of volume drivers in the social services system. The requirement itself is sound; its downstream instruments require separate audit. **KILL LIST CLASSIFICATION:** No Kill List Action — the requirement is well-grounded. The transaction cost audit should focus on the instruments produced under this authority, not the authority itself. **TRANSACTION COST CATEGORY:** No Transaction Cost Identified (at the level of this requirement)

REQUIREMENT ID: SAT-§8-REQ-04 **PROVISION TEXT:** Departementet shall work to initiate research that may be relevant to solving tasks under the Act. **SOURCE INSTRUMENT:** Circular R-35, Para 8 (statutory text reproduced verbatim) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — verbatim statutory reproduction without escalation (KRAV 8.4) **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** MIXED — primary USER NEED (research improves service quality); secondary INTERNAL CONTROL (supports regulatory review and institutional knowledge). **BURDEN DESCRIPTION:** No direct caseworker transaction cost. Research activities are conducted at national level by external bodies. Downstream effects possible if research produces new normative instruments, but this is indirect and not attributable to the requirement itself. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: SAT-§8-REQ-05 **PROVISION TEXT:** Departementet shall ensure that there is an adequate offer for training of personnel, and that those who apply the Act receive adequate guidance. **SOURCE INSTRUMENT:** Circular R-35, Para 8 (statutory text reproduced verbatim) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — substantive legal obligation with clear statutory anchor; "forsvarlig" standard establishes a quality-of-care duty (KRAV 8.5) **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — the Anchor Document's Mechanism [K] (Competence Sustainability) findings confirm that the training system required by this provision has not produced adequate competence outcomes in small municipalities. This is not a disproportionality problem with the requirement; it is evidence that the obligation is insufficiently discharged at the systemic level. **PURPOSE:** USER NEED — adequate training and guidance for practitioners directly determines the quality of user outcomes in every service domain. **BURDEN DESCRIPTION:** No transaction cost identified. This is a substantive legal obligation. The scale flag is informational: the Anchor Document confirms systemic failure to achieve the obligation's purpose, but that failure is attributable to implementation gaps, not to the requirement itself. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: SAT-§8-REQ-06 **PROVISION TEXT:** Departementet shall ensure that information materials are prepared that social services can use. **SOURCE INSTRUMENT:** Circular R-35, Para 8 (statutory text reproduced verbatim, with § 12 cross-reference) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — verbatim statutory

reproduction; cross-reference to § 12 noted but does not constitute escalation (KRAV 8.6) **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** MIXED — primary USER NEED (information access for users); secondary INTERNAL CONTROL (administrative standardization across municipalities). **BURDEN DESCRIPTION:** Modest administrative burden at local level to locate and apply state-produced materials. Not measurable as a significant transaction cost. No circular guidance gap applicable. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: SAT-§8-REQ-07 **PROVISION TEXT:** Municipal organs subject to the Act must, notwithstanding confidentiality, provide information and messages necessary for the Department to perform its functions when so demanded. **SOURCE INSTRUMENT:** Circular R-35, Para 8 (statutory text reproduced; permissive "kan kreve" and "nødvendige" standard preserved) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — permissive construction correctly carried through without escalation to mandatory standing obligation (KRAV 8.7) **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO — the ad hoc, demand-activated nature of this provision limits its scale impact compared to a standing reporting obligation. **PURPOSE:** INTERNAL CONTROL — information provision to the Department serves supervisory and statistical functions; the commentary's explicit reference to "opplysninger til statistiske formål" confirms the administrative monitoring character. No direct individual user outcome served. **BURDEN DESCRIPTION:** When activated, the requirement demands that municipal organs identify, compile, and transmit relevant data without confidentiality barriers and on the Department's timeline. For small offices, ad hoc information demands divert management and caseworker time from frontline service. The circular provides no guidance on frequency, notice periods, or response formats, meaning compliance is unstructured from the municipal perspective. However, the permissive framing of the provision limits the structural exposure. **KILL LIST CLASSIFICATION:** No Kill List Action — the requirement is well-grounded; the permissive "kan kreve" language is appropriate and the "nødvendige" standard limits scope. No escalation is present. **TRANSACTION COST CATEGORY:** Reporting Overhead (activated only on demand; not a standing burden)

REQUIREMENT ID: SAT-§8-REQ-08 **PROVISION TEXT:** Departementet may delegate responsibility under § 8. **SOURCE INSTRUMENT:** Circular R-35, Para 8, Commentary 2.8.1 (present in commentary only; absent from statutory text) **CIRCULAR AUTHORITY:** PARTIAL — present in commentary 2.8.1 but not in the statutory text reproduced in the circular; operates as an explanatory note rather than a binding normative rule. **LEGAL AUTHORITY:** PARTIAL — delegation is a recognized administrative principle supported by preparatory works, but § 8 contains no explicit statutory delegation authority (KRAV 8.8; flagged as ambiguous, recommended for human legal review) **DOUBLE AUTHORITY GAP:** NO — both directions yield PARTIAL. However, the ambiguity on both sides is structurally significant: the commentary asserts delegation authority that the statute does not confirm, creating interpretive uncertainty about the scope and limits of that authority. **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** INTERNAL CONTROL — the delegation

mechanism serves organizational architecture of the state administration; no direct user outcome served. **BURDEN DESCRIPTION:** The delegation architecture creates interpretive complexity for NAV leaders who must determine whether communications from Direktoratet reflect ministerial authority, delegated authority, or purely advisory Direktorat function. The circular's commentary does not specify the form delegation takes, its operational limits, or how municipal actors verify the authority basis of what they receive. This structural ambiguity is the mechanism that allows the Kommunebrev layer to operate as a shadow normative instrument — a transaction cost carried by the downstream requirements it enables (PROC-REQ-8.9 through 8.14) rather than by this requirement itself. **KILL LIST CLASSIFICATION:** Category C — Clarification. The scope of the delegation authority and the forms it takes should be made explicit in the circular to reduce the shadow-binding effect of Kommunebrev communications that claim to derive from delegated authority. **TRANSACTION COST CATEGORY:** No Transaction Cost Identified (directly); see downstream requirements for the costs the ambiguity enables.

REQUIREMENT ID: SAT-§8-REQ-09 **PROVISION TEXT:** Arbeids- og velferdsdirektoratet has the national professional and administrative responsibility for social services and shall work to prevent and reduce poverty. **SOURCE INSTRUMENT:** Kommunebrev (Arbeids- og velferdsdirektoratet) **CIRCULAR AUTHORITY:** ABSENT — no textual presence in the circular. Consequence: this institutional mandate operates entirely outside the circular framework; NAV offices receiving Kommunebrev communications based on this mandate have no circular reference point for evaluating its authority basis. **LEGAL AUTHORITY:** PARTIAL — the poverty-prevention purpose is consistent with the Act's general purposes; "nasjonalt fag- og forvaltningsansvar" as a specific institutional construct exceeds what § 8 explicitly states (KRAV 8.9; classified [SUBSTANTIVE LEGAL OBLIGATION] in Step 2 of Process Inflation Findings, though with acknowledgment that the institutional label is not statutory text) **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT; statutory authority PARTIAL. **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — the Anchor Document confirms that the poverty-prevention mandate embedded in this institutional claim has not produced structurally adequate service capacity at the local level; volume drivers in debt counseling and financial assistance (the core poverty-reduction service domains) are the most empirically severe in the dataset. **PURPOSE:** MIXED — primary USER NEED (poverty prevention directly serves users); secondary INTERNAL CONTROL (the "fag- og forvaltningsansvar" label serves administrative authority positioning within the NAV hierarchy). **BURDEN DESCRIPTION:** The institutional mandate creates an implicit compliance expectation at the municipal level — if Direktoratet has national professional responsibility, then its guidance must be treated as authoritative. This shadow-binding effect expands the de facto normative weight of Kommunebrev content without providing legal grounding. NAV leaders must calibrate compliance behavior against an authority claim the circular does not validate. This transaction cost falls outside the circular framework entirely. **KILL LIST CLASSIFICATION:** Category C — Clarification. The institutional "fag- og forvaltningsansvar" claim should be explicitly grounded in the circular or in a published delegation instrument to make its authority basis and operational scope transparent. The current formulation creates normative uncertainty that contributes to shadow binding. **TRANSACTION COST CATEGORY:** Documentation Inflation (through shadow-binding effect on downstream Kommunebrev compliance expectations)

REQUIREMENT ID: SAT-§8-REQ-10 **PROVISION TEXT:** Arbeids- og velferdsdirektoratet holds legal interpretation responsibility ("lovfortolkningsansvar") for the social services in the NAV office. **SOURCE INSTRUMENT:** Kommunebrev (Arbeids- og velferdsdirektoratet) **CIRCULAR AUTHORITY:** ABSENT — "lovfortolkningsansvar" as a specific institutional mandate has no textual presence in the circular. Consequence: the interpretive authority claim operates entirely outside the circular framework; caseworkers must comply with an authority assertion that the primary normative instrument governing their work does not address. **LEGAL AUTHORITY:** PARTIAL — § 8(c)'s authority to issue guidelines implies an interpretive role, but "lovfortolkningsansvar" as a defined legal mandate is not explicitly grounded in § 8 alone (KRAV 8.10; flagged as ambiguous, recommended for human legal review) **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT; statutory authority PARTIAL. **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — the Anchor Document identifies inconsistent legal interpretation across Statsforvalteren offices as a structural problem (Part 5, Track A intersections across all three Volume Driver memos), suggesting that the lovfortolkningsansvar is not producing interpretive consistency at the operational level. The institutional claim therefore fails to achieve its implied purpose of resolving interpretive conflict. **PURPOSE:** INTERNAL CONTROL — the institutional allocation of legal interpretation authority serves administrative hierarchy, not individual user outcomes directly. **BURDEN DESCRIPTION:** At the local level, lovfortolkningsansvar creates ongoing compliance monitoring obligations: NAV leaders must track Direktoratet communications for interpretive guidance, resolve conflicts between Direktoratet positions and Statsforvalteren supervisory expectations, and treat Kommunebrev content as legally authoritative. For generalist caseworkers in small offices processing few specialized cases annually, maintaining awareness of evolving interpretive guidance across all service domains imposes meaningful overhead. Critically, given that circular authority is ABSENT and statutory authority is PARTIAL, this transaction cost falls outside any framework the circular provides guidance for — caseworkers must comply with an interpretive authority claim that the primary normative instrument does not confirm. **KILL LIST CLASSIFICATION:** Category B — Status Change. The current formulation asserts "lovfortolkningsansvar" in institutional language that creates a binding compliance expectation without explicit statutory grounding. This is imperative-adjacent language in a Kommunebrev that lacks the legal force the language implies. The requirement is a candidate for reformulation to explicitly permissive language (e.g., "Direktoratet issues guidance on legal interpretation within its advisory function under § 8(c)") to restore clarity about the advisory, non-binding character of interpretive Kommunebrev communications. **TRANSACTION COST CATEGORY:** Reporting Overhead; Documentation Inflation (through shadow-binding compliance monitoring expectations)

REQUIREMENT ID: SAT-§8-REQ-11 **PROVISION TEXT:** Direktoratet will prepare further professional guidance material on barnets beste to support municipalities in NAV during 2025. **SOURCE INSTRUMENT:** Kommunebrev (Arbeids- og velferdsdirektoratet) **CIRCULAR AUTHORITY:** ABSENT — no textual presence in circular. Consequence: this specific production commitment operates outside the circular framework. **LEGAL AUTHORITY:** YES — falls clearly within the open discretion of § 8(f); the lack of statutory

citation is not disqualifying (KRAV 8.11) **DOUBLE AUTHORITY GAP:** NO — statutory authority YES. **CATEGORY ERROR:** NO **SCALE FLAG:** YES — the Anchor Document's Cluster 3 (Child Perspective Documentation) confirms that barnets beste failures are among the most empirically prevalent compliance failures in the supervision dataset (15+ findings); the preparation of guidance material is a direct and appropriate response to this documented failure mode. **PURPOSE:** USER NEED — guidance on barnets beste directly supports better assessment quality for children in social services cases, serving the most vulnerable user group. **BURDEN DESCRIPTION:** No transaction cost burden identified for this requirement. The production of guidance material is a state-level function. The downstream burden falls on caseworkers who must apply the guidance, but that is a consequence of the guidance's substantive content, not of this production commitment itself. **KILL LIST CLASSIFICATION:** No Kill List Action — well-grounded, user-oriented, scale-appropriate response to documented need. **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: SAT-§8-REQ-12 **PROVISION TEXT:** Arbeids- og velferdsdirektoratet recommends that municipalities review their internal control system for social services. **SOURCE INSTRUMENT:** Kommunebrev (Arbeids- og velferdsdirektoratet) **CIRCULAR AUTHORITY:** ABSENT — no textual presence in circular. Consequence: this recommendation operates outside the circular framework; municipalities have no normative reference point for how to scope, conduct, or prioritize the review. **LEGAL AUTHORITY:** YES — recommendation is weaker than the statute's own "skal"; represents a standard guidance role without upward escalation (KRAV 8.12) **DOUBLE AUTHORITY GAP:** NO — statutory authority YES. **CATEGORY ERROR:** NO **SCALE FLAG:** YES — the Anchor Document confirms internal control apparatus failures as the second most pervasive cluster in the supervision dataset (Cluster 2; 25+ findings; cross-cutting all domains and office sizes). The recommendation responds to the dominant structural compliance failure confirmed by empirical evidence. However, the absence of circular guidance on scope and standards means municipalities receiving the recommendation must navigate the review without normative anchors in the primary instrument. **PURPOSE:** INTERNAL CONTROL — reviewing internkontroll systems serves administrative compliance monitoring; the immediate purpose is audit readiness, not user case outcomes, even though effective internkontroll may benefit users systemically. **BURDEN DESCRIPTION:** A comprehensive internal control review requires management time for assessment, documentation, gap analysis, and remediation planning. For small NAV offices with overstretched leadership (a finding confirmed across dozens of Anchor Document municipalities), this administrative overhead competes directly with frontline service capacity. Given circular authority ABSENT, municipalities have no circular framework for how to conduct the review or what standard to meet — caseworkers and NAV leaders must comply with a recommendation that the primary normative instrument does not support with procedural guidance. **KILL LIST CLASSIFICATION:** Category C — Clarification. The recommendation operates outside the circular framework, creating practical uncertainty about scope and standards. The room for maneuver — what constitutes an adequate review, what minimum standard applies, what the recommendation's relationship to the formal internkontroll obligation under § 5 is — should be made explicit to reduce shadow binding of the "anbefaler" language into a de facto mandatory audit obligation. **TRANSACTION COST CATEGORY:** Reporting Overhead;

Structural Disproportionality (for small offices where management bandwidth cannot absorb systematic reviews alongside frontline service)

REQUIREMENT ID: SAT-§8-REQ-13 **PROVISION TEXT:** Arbeids- og velferdsdirektoratet recommends that the municipality/NAV office enter monthly figures for at least the specified municipal indicators into the NAV office's scorecard database. **SOURCE INSTRUMENT:** Kommunebrev (Arbeids- og velferdsdirektoratet) **CIRCULAR AUTHORITY:** ABSENT — no textual presence in circular. Consequence: this standing monthly reporting obligation operates entirely outside the circular framework; caseworkers must comply with a routine documentation demand that the primary normative instrument does not address. This is the most severe circular authority gap in the § 8 audit. **LEGAL AUTHORITY:** NO — the Process Inflation Finding (KRAV 8.13) explicitly establishes a gap between the ad hoc, occasion-specific, purpose-limited information demand power in § 8 second paragraph and the Kommunebrev's construction of a continuous, permanent, monthly routine using specific indicators in a specific database. The statutory provision is permissive and triggered by the Department's need; the Kommunebrev transforms it into a standing obligation of categorically different character. **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT and statutory authority NO. This is the only requirement in the § 8 audit with a complete double authority gap. **This is the highest-priority Kill List candidate in this session. CATEGORY ERROR:** NO — but a secondary governance boundary concern is flagged (the scorecard database is a state-side instrument; the data-entry obligation is imposed on municipal entities; the authority basis for this imposition under kommuneloven deserves legal verification). **SCALE FLAG:** YES — the Anchor Document identifies documentation apparatus [D] as the single most pervasive volume driver in the entire supervision dataset (~65 findings, ~42% of all Set B occurrences). Monthly scorecard reporting is structurally analogous to the documentation obligations that produce systemic sanctions in small offices. For micro-offices of 5–15 staff, a perpetual monthly data-entry routine competes directly with frontline service time. Given that circular authority is ABSENT and statutory authority is NO, this documentation burden is imposed **without any regulatory foundation** — it is the most concrete example in this session of disproportionate burden without regulatory support. **PURPOSE:** INTERNAL CONTROL — performance monitoring, national indicator tracking, and reporting for administrative oversight purposes. No individual user outcome served by monthly scorecard data entry. **BURDEN DESCRIPTION:** The requirement demands: identification of relevant indicators for the specific office; establishment and maintenance of data collection routines across multiple internal systems; monthly data entry into the national scorecard database; ongoing management of database access rights, interface familiarity, and data validation; and correction of historical entries when errors are identified. This is a perpetual, recurring administrative burden imposed on all NAV offices regardless of size or capacity. The Anchor Document confirms that documentation apparatus failures are the most empirically widespread compliance failure in the supervision record — structurally analogous obligations in other service domains produce the majority of supervision sanctions. Given that circular authority is ABSENT and statutory authority is NO, this transaction cost falls entirely outside any framework the circular or the statute provides — caseworkers must maintain a standing administrative routine that neither the primary normative instrument nor the law authorizes. **KILL LIST CLASSIFICATION:** Category A — Removal. The requirement lacks both circular

authority and statutory authority. It transforms a permissive, ad hoc information demand power into a standing monthly reporting obligation using instruments (a specific scorecard database with specific indicators) that § 8 second paragraph does not authorize. It imposes the dominant transaction cost type identified in the Anchor Document (documentation apparatus [D]) without any regulatory foundation. As a Kommunebrev construction lacking legal grounding, it is a candidate for repeal from the social services normative framework and replacement with either a clear statutory amendment authorizing the reporting regime, or a withdrawal of the obligation to a genuinely advisory status with explicit confirmation that non-compliance carries no consequences. **TRANSACTION COST CATEGORY:** Documentation Inflation; Reporting Overhead; Structural Disproportionality; Combined Burden

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REQUIREMENT ID: SAT-§8-REQ-14 **PROVISION TEXT:** Arbeids- og velferdsdirektoratet is working on a guide ("veiviser") to provide direction and ideas for coordinating training at the regional level. **SOURCE INSTRUMENT:** Kommunebrev (Arbeids- og velferdsdirektoratet) **CIRCULAR AUTHORITY:** ABSENT — no textual presence in circular. Consequence: this guide-production commitment operates outside the circular framework. **LEGAL AUTHORITY:** YES — falls within the lawful how-discretion of § 8(e) (ensuring adequate training); creating a guide is an appropriate exercise of this mandate (KRAV 8.14) **DOUBLE AUTHORITY GAP:** NO — statutory authority YES. **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — the Anchor Document confirms [K] Competence Sustainability as a structurally significant mechanism across the supervision dataset; regional training coordination addresses this mechanism, suggesting the requirement is appropriately responsive to empirical evidence. **PURPOSE:** MIXED — primary USER NEED (regional training coordination serves practitioner competence, which ultimately benefits users); secondary INTERNAL CONTROL (administrative coordination of training across regional governance structures). **BURDEN DESCRIPTION:** At the municipal level, participation in regional training structures requires management coordination time to schedule staff attendance and maintain service continuity during absences. This is a modest burden proportionate to the competence benefit delivered. Given circular authority ABSENT, the guide operates outside the circular framework, but the transaction cost is proportionate and the user-facing benefit is clear. **KILL LIST CLASSIFICATION:** No Kill List Action — adequate statutory authority, user-oriented primary purpose, proportionate burden. **TRANSACTION COST CATEGORY:** No Transaction Cost Identified (at the level of this requirement)

REQUIREMENT ID: SAT-§8-REQ-15 **PROVISION TEXT:** Arbeids- og inkluderingsdepartementet has tasked Direktoratet with preparing a dedicated guide on financial social assistance. **SOURCE INSTRUMENT:** Veileder om økonomisk stønad (framing reference to this guide) **CIRCULAR AUTHORITY:** ABSENT — no textual presence in circular. Consequence: this institutional production mandate operates outside the circular framework. **LEGAL AUTHORITY:** YES — falls within open discretion of § 8(c) and (f); preparing guidelines and information materials is a lawful exercise of these mandates (KRAV 8.15) **DOUBLE AUTHORITY GAP:** NO — statutory authority YES. **CATEGORY ERROR:**

NO **SCALE FLAG:** PARTIAL — the Anchor Document identifies the Veileder om økonomisk stønad as a key sub-legal instrument whose content (particularly the level 1/2/3 debt counseling tiering model) is itself the primary structural source of volume drivers in the social services system. The preparation of a guide under this mandate therefore carries the risk of reproducing or amplifying the normative complexity that the Anchor Document identifies as the dominant source of small-municipality compliance failure. This is not a disproportionality problem with this specific requirement; it is a structural observation that the content of the guide being produced deserves scrutiny under the Sludge Audit framework when that content is analyzed. **PURPOSE:** USER NEED — a dedicated guide on financial social assistance primarily serves practitioners in making legally correct decisions for users; the commissioning documents a substantive policy commitment to improved guidance in a high-stakes service domain. **BURDEN DESCRIPTION:** No transaction cost identified for this requirement itself. The transaction cost implications are carried by the guide's content when that content generates compliance obligations downstream; those implications are outside the scope of this § 8 session. **KILL LIST CLASSIFICATION:** No Kill List Action — well-grounded; user-oriented; statutory authority clear. **TRANSACTION COST CATEGORY:** No Transaction Cost Identified (at the level of this requirement)

CLOSING COMPARATIVE NOTE

Total requirements identified from Process Inflation Findings: 15

Requirements visible from the circular paragraph alone: 8 (REQ-§8-01 through REQ-§8-08; noting that REQ-§8-08 is present only in the commentary, not the statutory text)

Requirements invisible from the circular alone: 7 (REQ-§8-09 through REQ-§8-15) — a 46% expansion in the normative obligation landscape relative to what the circular discloses.

Double authority gaps: 3 (REQ-§8-09, REQ-§8-10, REQ-§8-13)

Category errors (requirements from a different legal domain): 0

Kill List breakdown:

Category	Count	Requirements
Category A — Removal	1	REQ-§8-13
Category B — Status Change	1	REQ-§8-10
Category C — Clarification	3	REQ-§8-08, REQ-§8-09, REQ-§8-12
No Kill List Action	10	REQ-§8-01 through 07, 11, 14, 15

Primary transaction cost categories by frequency:

1. **Documentation Inflation** — 3 requirements (REQ-§8-09, REQ-§8-10, REQ-§8-13)
2. **Reporting Overhead** — 3 requirements (REQ-§8-07, REQ-§8-10, REQ-§8-12/13)
3. **Structural Disproportionality** — 2 requirements (REQ-§8-12, REQ-§8-13)
4. **Combined Burden** — 1 requirement (REQ-§8-13, which alone triggers all four transaction cost types simultaneously)

Analytical synthesis for the main report:

§ 8 presents a structurally clean statutory core — REQ-§8-01 through 07 are all well-grounded, user-oriented, and appropriately framed — but a problematic Kommunebrev addition layer that operates entirely outside the circular framework. The seven invisible requirements added by Kommunebrev and Veileder sources include the session's most significant authority failure (REQ-§8-13: a standing monthly reporting obligation constructed from a permissive ad hoc information demand power) and the session's most significant governance ambiguity (REQ-§8-10: an institutional claim of lovfortolkningsansvar without explicit statutory grounding that generates shadow-binding compliance expectations across all service domains).

The Kill List for § 8 is compact but analytically consequential: the single Category A removal candidate (REQ-§8-13) targets the most structurally ungrounded requirement, and the Category B status change candidate (REQ-§8-10) targets the institutional claim that enables the Kommunebrev layer to carry quasi-binding interpretive authority it does not legally possess.

The Anchor Document connection is most direct for REQ-§8-13: the standing monthly scorecard reporting obligation is a concrete instance of the documentation apparatus mechanism [D] that the Anchor Document identifies as the dominant volume driver in the entire social services supervision dataset — imposed here without any circular or statutory authorization, on offices whose empirical capacity for documentation overhead the Anchor Document shows to be already at or beyond its limits.

SLUDGE AUDIT — § 9 STATSFORVALTERENS TILSYNSVIRKSOMHET

PRELIMINARY METHODOLOGICAL NOTE

Requirement count from Process Inflation Findings: 14 requirements identified.

Requirement count visible from the circular paragraph alone: 12 requirements. Requirements 1–12 all have identifiable textual presence in the § 9 circular text. Requirements 13 and 14 are entirely invisible from the circular paragraph.

Requirements with no textual presence in the circular:

Requirement 13 (PROC-REQ-9.13): The procedural option for Statsforvalteren to evaluate opening a supervisory case based on specific complaint cases. Source instrument: *Veileder til sosialtjenesteloven § 17* — this is **(b) a veileder**, and specifically one written to govern § 17, not § 9. Its appearance in a § 9 Process Inflation analysis reflects an inter-paragraph bleed: an interpretive instrument for one statutory provision is being used to operationalize supervisory conduct under a different provision.

Requirement 14 (PROC-REQ-9.14): The Directorate's recommendation that municipalities review their social services internal control systems. Source instrument: *Kommunebrev 2025* — this is **(a) a Kommunebrev** issued by Arbeids- og velferdsdirektoratet. It does not appear in the circular because it regulates a different actor (municipalities) through a different instrument (a directorate communication), yet it surfaces in the § 9 Process Inflation Findings because its subject matter — internal control — intersects with § 9's supervisory scope.

Structural significance: The two invisible requirements point in analytically distinct directions. Requirement 13 illustrates how veileder-level instruments for one paragraph spill into the operative understanding of another. Requirement 14 illustrates how Kommunebrev-level communications create de facto normative obligations that appear within a paragraph's operational framework while having no relationship to the governing circular. Both observations carry forward into Step 2's authority analysis.

STEP 1 — IDENTIFICATION OF ALL REQUIREMENTS

Requirement 9.1 Exact obligation: Statsforvalteren shall supervise that the municipality fulfils its duties under chapter 4, § 13(2)(1st sentence), (3rd para), (4th para)(1st sentence) and § 16(1st para). Source instrument: Circular R-35 Para 9 (statutory text reflected in

circular). Explicit or implicit: Explicit. Textual presence in circular: Present — this is the statutory text itself as reproduced in the circular.

Requirement 9.2 Exact obligation: Statsforvalteren shall also supervise the municipality's internal control over its chapter 4 duties, cf. Kommuneloven § 25-1. Source instrument: Circular R-35 Para 9. Explicit or implicit: Explicit. Textual presence in circular: Present.

Requirement 9.3 Exact obligation: Statsforvalteren shall supervise the municipality's fulfilment of the individual services. Source instrument: Circular R-35 Para 9. Explicit or implicit: Explicit. Textual presence in circular: Present.

Requirement 9.4 Exact obligation: In supervision it can additionally be checked whether the municipality, through its internal control, adequately secures statutory duties — including whether individual services are directed at the correct target groups and whether coordination occurs within the NAV office and toward other service areas. Source instrument: Circular R-35 Para 9. Explicit or implicit: Explicit. Textual presence in circular: Present.

Requirement 9.5 Exact obligation: Statsforvalteren shall also supervise that the duty to prepare a social emergency preparedness plan (sosialberedskapsplan) is fulfilled. Source instrument: Circular R-35 Para 9. Explicit or implicit: Explicit. Textual presence in circular: Present.

Requirement 9.6 Exact obligation: Statsforvalteren shall supervise that the municipality fulfils its duties regarding cooperation and coordination. Source instrument: Circular R-35 Para 9. Explicit or implicit: Explicit. Textual presence in circular: Present (in italicized supplementary text).

Requirement 9.7 Exact obligation: Supervision may be planned and directed toward areas and themes where failure is anticipated. Source instrument: Circular R-35 Para 9. Explicit or implicit: Explicit. Textual presence in circular: Present.

Requirement 9.8 Exact obligation: Supervision may proceed as a reaction to specific events Statsforvalteren becomes aware of from various sources, including complaints, tips, and media. Source instrument: Circular R-35 Para 9. Explicit or implicit: Explicit. Textual presence in circular: Present.

Requirement 9.9 Exact obligation: Supervision may be carried out both announced and unannounced. Source instrument: Circular R-35 Para 9. Explicit or implicit: Explicit. Textual presence in circular: Present.

Requirement 9.10 Exact obligation: Breaches of law or regulations identified through supervision shall be reasoned and documented in a supervisory report (tilsynsrapport). Source instrument: Circular R-35 Para 9. Explicit or implicit: Explicit. Textual presence in circular: Present.

Requirement 9.11 Exact obligation: Before an injunction is used, the municipality shall be given a reasonable deadline to correct the matter. Source instrument: Circular R-35 Para 9. Explicit or implicit: Explicit. Textual presence in circular: Present.

Requirement 9.12 Exact obligation: If Statsforvalteren issues a formal injunction decision, the Public Administration Act's (forvaltningsloven) procedural processing rules shall be followed. Source instrument: Circular R-35 Para 9. Explicit or implicit: Explicit. Textual presence in circular: Present.

Requirement 9.13 Exact obligation: Statsforvalteren may in such cases consider opening supervision to examine whether the municipality and NAV office provides an adequate service, based on complaint cases. Source instrument: Veileder til sosialtjenesteloven § 17. Explicit or implicit: Explicit (in the veileder). Textual presence in circular: ABSENT — this requirement has no textual presence in the § 9 circular paragraph.

Requirement 9.14 Exact obligation: Arbeids- og velferdsdirektoratet recommends that municipalities conduct a review of the internal control system for social services. Source instrument: Kommunebrev 2025. Explicit or implicit: Explicit (in the Kommunebrev). Textual presence in circular: ABSENT — this requirement has no textual presence in the § 9 circular paragraph.

STEP 2 — LEGAL AUTHORITY CHECK

Requirement 9.1 Direction 1 — Circular authority: YES. This reproduces the statutory text of § 9 itself. Direction 2 — Statutory authority: YES. This is the primary statutory mandate of § 9; no authority gap exists. Double authority gap: NO. Category error: NO.

Requirement 9.2 Direction 1 — Circular authority: YES. Direction 2 — Statutory authority: YES. The requirement to supervise internal control derives directly from the statutory text of § 9 read together with Kommuneloven § 25-1, as explicitly cross-referenced in the provision. Double authority gap: NO. Category error: NO.

Requirement 9.3 Direction 1 — Circular authority: YES. Direction 2 — Statutory authority: YES. The Process Inflation Finding identifies this as a substantive legal obligation establishing the scope of the supervisory mandate over individual services. Direct statutory foundation in § 9. Double authority gap: NO. Category error: NO.

Requirement 9.4 Direction 1 — Circular authority: YES. The text "kan det i tillegg kontrolleres" is present in the circular paragraph. Direction 2 — Statutory authority: PARTIAL. The Process Inflation Finding identifies this as a procedural elaboration within the mandatory frame established by § 9(2), which mandates supervision of internal control. The optional character ("kan") is consistent with the statute; the specific sub-elements listed (target groups, coordination) are elaborations that derive from the circular rather than from the statutory text of § 9 itself. Statutory foundation exists for the general mandate; the itemized elaboration rests on the circular layer. Double authority gap: NO (circular authority present, statutory authority partial but not absent). Category error: NO.

Requirement 9.5 Direction 1 — Circular authority: YES. Direction 2 — Statutory authority: YES. The sosialberedskapsplan obligation derives from specific statutory provisions; the

supervisory obligation over it is included in the § 9 mandate. Double authority gap: NO. Category error: NO.

Requirement 9.6 Direction 1 — Circular authority: YES (italicized supplementary text in the circular). Direction 2 — Statutory authority: YES. The cooperation and coordination duties in § 13 are explicitly referenced in § 9(1) and are within the supervisory mandate. Double authority gap: NO. Category error: NO.

Requirement 9.7 Direction 1 — Circular authority: YES. Direction 2 — Statutory authority: YES/PARTIAL. Planned, risk-targeted supervision is a standard form recognized under Kommuneloven kapittel 30, incorporated by reference in § 9(2). The Process Inflation Finding confirms no legal gap here. The specific framing of "anticipated failure areas" is a circular elaboration, but it is within the discretionary space the statute creates. Double authority gap: NO. Category error: NO.

Requirement 9.8 Direction 1 — Circular authority: YES. Direction 2 — Statutory authority: YES/PARTIAL. Reactive supervision based on external sources is recognized under Kommuneloven kapittel 30. The Process Inflation Finding confirms procedural flexibility without a legal gap. Double authority gap: NO. Category error: NO.

Requirement 9.9 Direction 1 — Circular authority: YES. Direction 2 — Statutory authority: YES. Both announced and unannounced supervision are standard methods under Kommuneloven kapittel 30. No gap. Double authority gap: NO. Category error: NO.

Requirement 9.10 Direction 1 — Circular authority: YES. Direction 2 — Statutory authority: PARTIAL. The Process Inflation Finding identifies an authority gap of note here: the absolute requirement for a distinct formal *tilsynsrapport* as the vessel for documenting and reasoning breaches is not explicitly stated in § 9 itself. Authority rests on the incorporation of Kommuneloven kapittel 30, which the Process Inflation Finding characterizes as ambiguous in terms of whether the framework is specific enough to support this formalized report requirement without further specification. The practical requirement is well-established; the specific statutory anchor for the *tilsynsrapport* form itself is less certain. Double authority gap: NO (circular authority present; statutory authority partial but not absent). Category error: NO.

Requirement 9.11 Direction 1 — Circular authority: YES. Direction 2 — Statutory authority: YES. The Process Inflation Finding confirms this as grounded in Kommuneloven kapittel 30's procedural rules on contradiction and due process, which are incorporated by reference. No gap. Double authority gap: NO. Category error: NO.

Requirement 9.12 Direction 1 — Circular authority: YES. Direction 2 — Statutory authority: YES. The Process Inflation Finding confirms this as an ex lege requirement: forvaltningslovens saksbehandlingsregler govern individual administrative decisions (such as injunctions) directly, independently of § 9. Double authority gap: NO. Category error: NO.

Requirement 9.13 Direction 1 — Circular authority: NO. This requirement has no textual presence in the § 9 circular paragraph. First-order authority gap established: the requirement operates outside the circular framework entirely. It derives from a veileder written for § 17, not § 9. Direction 2 — Statutory authority: PARTIAL. The Process Inflation Finding

acknowledges that the permissive option to assess opening a supervisory case is consistent with § 9's general mandate and imposes nothing beyond the statutory framework. However, the instrument through which it is expressed — a veileder for § 17 — does not have a direct formal relationship with § 9. Its authority is analogical rather than direct. Double authority gap: NO — while circular authority is absent, statutory authority is partial but not wholly absent; the requirement is consistent with § 9's general mandate even if not derived from it. Category error: PARTIAL — the source instrument (Veileder til § 17) belongs to a different paragraph of the statutory framework. This is not a different legal domain (it remains within sosialtjenesteloven), but it is a source-instrument misalignment: a § 17 interpretive instrument is being operationalized as if it governed § 9 supervisory conduct.

Requirement 9.14 Direction 1 — Circular authority: NO. This requirement has no textual presence in the § 9 circular paragraph. First-order authority gap established. Direction 2 — Statutory authority: NO/PARTIAL. The Process Inflation Finding identifies this as lacking direct legal anchoring in § 9, which regulates Statsforvalteren, not the Directorate, and notes that it is a "structurally misleading classification anomaly that plausibly belongs under § 8 instead." The Kommunebrev derives from the Directorate's administrative guidance role — a sub-legal instrument issued under a different regulatory relationship entirely. A recommendation from the Directorate to municipalities does not derive from § 9's supervisory mandate. Double authority gap: YES — circular authority is ABSENT and statutory authority is NO/PARTIAL. This is the only double authority gap in this paragraph. Category error: PARTIAL. The requirement is not from a different legal domain in the strict sense (no labor law or HMS framework involved), but it constitutes a structural category error within the social services normative framework: § 9 governs Statsforvalterens supervisory activity; this requirement is an administrative guidance communication from the Directorate to municipalities, appearing in the § 9 Process Inflation Findings because its subject matter (internal control review) intersects topically with § 9's oversight scope. The Process Inflation Finding itself flags this as a "structurally misleading classification anomaly" belonging under § 8 (internkontroll) rather than § 9.

STEP 3 — SCALE AND PROPORTIONALITY CHECK

Preliminary note on scope asymmetry: The Anchor Document (Volume Driver Findings) addresses volume-sensitive requirements primarily as they bear on municipalities and NAV offices providing direct services under §§ 17–20a. Section 9 governs Statsforvalterens supervisory activity — the other side of the regulatory relationship. Direct cross-references are therefore fewer. Where the Anchor Document is relevant, it is primarily through: (a) requirements directed at municipalities that appear in the § 9 Process Inflation Findings (notably Req 9.14); and (b) the structural documentation burden analysis ([D] mechanism) that applies analogously to the documentation obligations of the supervisory body itself.

Requirements 9.1, 9.2, 9.3, 9.5, 9.6 Scale flag: NO. These are substantive legal obligations defining the scope of the supervisory mandate. They presuppose organizational capacity in Statsforvalterens regional offices, not in municipal NAV offices. The Anchor Document does not flag these requirements as presupposing disproportionate organizational capacity.

Requirement 9.4 Scale flag: PARTIAL. The Anchor Document identifies internal control apparatus requirements as a dominant volume driver (Cluster 2 in all three memo sections), observing that the supervisory standard for evaluating internal control presupposes organizational complexity municipalities often cannot achieve. Req 9.4 is the supervisory-side mirror of this: it directs Statsforvalteren to check whether the municipality's internal control adequately secures statutory duties. The Anchor Document finding that applies is the consistent pattern across dozens of municipalities where internal control failures are structural rather than behavioral — the supervisory standard being checked for is itself calibrated for larger organizations than most municipalities. The connection is indirect: Req 9.4 does not itself create a scale burden on Statsforvalteren, but it tasks Statsforvalteren with assessing compliance against a standard the Anchor Document identifies as structurally disproportionate for small municipalities.

Requirements 9.7, 9.8, 9.9 Scale flag: NO. These are permissive procedural provisions about supervision methodology. They do not presuppose organizational capacity beyond what Statsforvalterens regional offices would normally be expected to have. The Anchor Document does not address Statsforvalterens own organizational capacity.

Requirement 9.10 Scale flag: PARTIAL. The Anchor Document identifies [D] Documentation Apparatus as the empirically dominant volume driver across all domains, appearing in approximately 42–65% of all supervision findings. The requirement for Statsforvalteren to produce a formal tilsynsrapport reasoning and documenting each breach constitutes a significant documentation obligation on the supervisory side. While not flagged directly in the Anchor Document (which focuses on municipal-side documentation), the structural principle is analogous: the obligation to translate supervisory work into formal administrative artefacts (tilsynsrapport, with documented reasoning for each finding) is a documentation apparatus requirement on Statsforvalterens own caseload. In a period where Set B documents supervision of over 100 municipalities in a short time span, this generates considerable documentation overhead. The relevant Anchor Document finding is the general [D] mechanism analysis: *"the obligation to translate informal, conversational, and often highly effective [work] into a formal bureaucratic paper trail"* — here applied to supervisory work rather than casework.

Requirement 9.11 Scale flag: NO. The reasonable deadline requirement is a due process sequencing rule. It does not presuppose organizational capacity beyond standard administrative function.

Requirement 9.12 Scale flag: NO. Forvaltningslovens saksbehandlingsregler apply ex lege. The requirement does not generate scale-dependent burden.

Requirement 9.13 Scale flag: NO direct flag. The permissive option to open supervision based on complaint cases does not presuppose disproportionate organizational capacity. However, since this requirement has no circular authority, any burden it imposes — including the administrative cost of evaluating whether to open a supervisory case — falls outside the framework the circular provides guidance for. Caseworkers at Statsforvalterens offices applying this veileder requirement must operationalize an obligation the primary § 9 circular does not address, creating a minor guidance gap.

Requirement 9.14 Scale flag: YES. This is the most direct intersection with the Anchor Document. The Kommunebrev 2025 recommendation for municipalities to review their social services internal control systems corresponds directly to Cluster 2 in the Anchor Document (The Internal Control Apparatus), which documents that the internal control requirements as operationalized through supervisory practice demand organizational capacity that small municipalities structurally cannot provide. The Anchor Document finds that the cumulative internal control apparatus obligations — formal deviation registration software, portfolio reviews, ROS analyses, role-separated approval — impose demands that assume dedicated quality assurance roles and administrative back-office capacity. The Kommunebrev recommendation asks municipalities to conduct an internal review of the very system the Anchor Document identifies as structurally disproportionate. For small municipalities (below 5,000 inhabitants, which constitute the majority of the corpus), such a review will reveal the structural impossibility the Anchor Document already documents — without providing any normative pathway for addressing it. Since Req 9.14 has no circular authority, any scale-related burden it imposes is unsupported by the circular framework and therefore constitutes disproportionate burden without regulatory foundation from the perspective of § 9.

STEP 4 — PURPOSE CLASSIFICATION

Requirement 9.1 Classification: [USER NEED] Justification: The statutory mandate that Statsforvalteren supervises municipal compliance with chapter 4's individual service obligations (§§ 17, 18, 19, 20a and related provisions) directly serves the legal security of users. The supervision mandate exists, as the circular text states explicitly, "for å påse at kommunen oppfyller sine lovpålagte plikter overfor innbyggerne og for å styrke den enkeltes rettssikkerhet." The language is unambiguously user-facing.

Requirement 9.2 Classification: [MIXED] — primary purpose user protection; secondary purpose systemic compliance verification. Justification: Supervising municipal internal control ultimately serves users by ensuring systemic compliance with chapter 4 obligations. However, internal control supervision is by definition a meta-level audit function: it assesses the municipality's own oversight mechanisms rather than specific user outcomes. The circular language — "sikrer lovpålagte plikter" — foregrounds statutory compliance; user protection is downstream rather than immediate. The secondary INTERNAL CONTROL purpose is structural: verifying that the municipality's own administrative apparatus is functioning correctly has direct implications for how NAV offices handle cases, but this is an institutional rather than user-individual purpose.

Requirement 9.3 Classification: [USER NEED] Justification: The language "kommunens oppfyllelse av de individuelle tjenestene" directly targets the service outcome for individual users. The listed compliance requirements — forsvarlighetskrav, individuelle vurderinger, brukermedvirkning, saksbehandling — are all user-facing quality standards. This requirement ensures individual case assessment quality.

Requirement 9.4 Classification: [MIXED] — primary purpose INTERNAL CONTROL; secondary purpose user protection. Justification: The "kan det i tillegg kontrolleres"

formulation signals that this is an optional administrative sub-check within the supervisory process — a meta-audit of the municipality's own oversight apparatus. Whether internal control ensures correct target group identification and coordination serves users downstream, but the immediate purpose is administrative verification. The permissive language ("kan") confirms that this operates as an optional compliance check rather than a mandatory user-protective obligation.

Requirement 9.5 Classification: [MIXED] — primary purpose USER NEED through emergency system protection; secondary purpose administrative compliance. Justification: Social emergency preparedness planning ultimately protects users in crisis situations. However, the immediate purpose of supervising whether the *plan* exists is administrative compliance verification. Users benefit from the plan's existence, but the supervisory check is directed at the administrative artifact rather than at user outcomes directly.

Requirement 9.6 Classification: [USER NEED] Justification: Supervising cooperation and coordination duties serves users who require multi-agency responses. The circular text cross-references § 13, whose cooperation obligations exist to ensure users receive coordinated services. The purpose is user-facing: uncoordinated services harm individual users.

Requirements 9.7, 9.8, 9.9 Classification: [MIXED] — primary purpose varies; all contain an INTERNAL CONTROL dimension. Justification: Planning supervision toward failure-risk areas (9.7) serves user protection through targeted regulatory attention. Reactive supervision (9.8) can protect users from ongoing harm. Announced/unannounced methodology (9.9) serves supervisory effectiveness. However, all three are procedural instruments governing how the supervisory body organizes and executes its own work — they are administrative process descriptions more than direct user-protective requirements. The primary dimension in each case is administrative methodology (INTERNAL CONTROL); the user protection purpose is achieved through the downstream effect of effective supervision.

Requirement 9.10 Classification: [INTERNAL CONTROL] Justification: The requirement that breaches be "begrunnet og dokumentert i en tilsynsrapport" serves documentation and formal record-keeping functions for the supervisory system itself. The tilsynsrapport is an administrative artifact: it enables the regulatory record, supports any subsequent pålegg or appeal, and provides an audit trail for the supervisory body's actions. It does not directly serve individual users' case assessment quality. Users are not parties to the tilsynsrapport; the document addresses the municipality as the regulated entity. The purpose is institutional — maintaining the documentary apparatus of the regulatory relationship between Statsforvalteren and the municipality.

Requirement 9.11 Classification: [MIXED] — primary purpose municipal due process; secondary purpose user protection. Justification: The reasonable deadline before injunction is a procedural fairness requirement directed at the municipality, not at users. It serves the principles of contradiction and proportionality in administrative law. While municipalities correcting their practices will ultimately benefit users, the immediate purpose is procedural rights protection for the municipality as a regulatory subject. This is an administrative law fairness requirement with indirect user benefit.

Requirement 9.12 Classification: [MIXED] — primary purpose systemic legal order; secondary purpose municipal due process. Justification: Following forvaltningslovens saksbehandlingsregler for injunction decisions ensures the legality and reviewability of supervisory decisions. This is a systemic rule-of-law requirement. It protects the municipality's procedural rights and ensures injunctions can be lawfully appealed. User benefit is indirect — lawful supervisory processes create confidence in the regulatory system.

Requirement 9.13 Classification: [USER NEED] Justification: The veileder provision that Statsforvalteren may consider opening supervision based on complaint cases represents a user-protective procedural option. Complaint cases are the mechanism by which individual users can trigger regulatory attention to failures affecting them specifically. This requirement expands the conditions under which the supervisory mandate is triggered in response to user-side signals. Its source instrument (Veileder til § 17) is user-focused throughout. The absence of circular authority does not change the user-protective purpose.

Requirement 9.14 Classification: [INTERNAL CONTROL] Justification: A Directorate recommendation to municipalities to review their social services internal control systems serves administrative and institutional compliance purposes. The review process — checking whether the internal control system is adequate — is directed at the municipality's own administrative apparatus. Users do not participate in this review; their interests are not directly engaged by whether or not a municipality conducts the review. The purpose is administrative system-monitoring, issued through a sub-legal instrument (Kommunebrev) directed at municipalities, and has no relationship to individual case assessment quality in the immediate term. The purpose is squarely INTERNAL CONTROL, and the instrument and actor relationships confirm this: the Directorate (not Statsforvalteren) is directing municipalities (not caseworkers) to engage in self-audit.

STEP 5 — TRANSACTION COST CHARACTERIZATION

Requirements classified as [USER NEED] (9.1, 9.3, 9.6, 9.13): No transaction cost burden is identified for these requirements. They serve user protection directly; the supervisory and procedural obligations they establish are proportionate to their statutory purpose and do not generate administrative overhead beyond what the statutory mandate requires.

Requirement 9.2 [MIXED] Administrative demand: Statsforvalteren must organize supervision to cover not only specific service failures but also the municipality's own internal oversight apparatus. This requires preparation time for reviewing the municipality's internal control documentation, deviation logs, ROS analyses, and quality management procedures as a separate dimension of the supervisory process — in addition to reviewing individual case files and service delivery. The transaction cost is preparation-side (reviewing additional documentation categories) and report-side (reasoning about internal control adequacy in the tilsynsrapport). Circular guidance for this dimension is present and adequate.

Requirement 9.4 [MIXED, primary INTERNAL CONTROL] Administrative demand: During supervision, the caseworker or supervisor at Statsforvalterens office must additionally check

whether the municipality's internal control is meeting its obligations — specifically whether individual services are targeted at correct groups and whether internal coordination is occurring. This demands structured inquiry into organizational coordination, not just individual case outcomes. It adds a sub-audit layer within the overall supervisory process. The circular provides adequate guidance for this optional check; however, the itemized sub-elements (target group accuracy, coordination) require specific documentation in findings. Transaction cost: moderate audit and documentation overhead.

Requirement 9.5 [MIXED] Administrative demand: Statsforvalteren must verify existence and content of the sosialberedskapsplan as a discrete check during supervision. This requires caseworkers to request and review the plan as a separate documentary artifact, adding a compliance verification step whose subject matter is administrative (the plan's existence) rather than substantive (service quality). Transaction cost: low to moderate — reviewing a single documentary artifact — but the requirement is not directly linked to user case quality.

Requirements 9.7, 9.8, 9.9 [MIXED] Administrative demand: 9.7 — Statsforvalterens supervisory planning function must maintain a risk-mapping process to identify failure-prone areas across all municipalities in the county. This involves ongoing intelligence-gathering, thematic analysis, and resource allocation decisions. Transaction cost: strategic planning and organizational overhead for supervisory prioritization. 9.8 — Statsforvalteren must maintain intake processes for complaints, tips, and media monitoring capable of triggering reactive supervisory responses. This requires administrative case intake capacity and triage procedures. Transaction cost: case management and triage overhead. 9.9 — The announced/unannounced option does not itself impose transaction cost beyond the ordinary supervisory preparation process; it is a permissive methodology choice. All three requirements have circular authority, and the transaction costs described are supported by the circular framework.

Requirement 9.10 [INTERNAL CONTROL] Administrative demand: For each supervisory finding involving a legal or regulatory breach, Statsforvalteren must produce a formal tilsynsrapport that documents and reasons the finding to the standard required for subsequent administrative processing (including potential pålegg proceedings). This demands: structured legal analysis of each finding (identifying the specific statutory provision breached), factual documentation of how the breach was identified (referencing specific case observations, documents reviewed, interviews conducted), and proportional reasoning connecting evidence to legal conclusion. Each report must meet the standard for forvaltningslovens saksbehandlingsregler if proceedings escalate. Transaction cost: Significant documentation labor per supervisory engagement, across all municipalities in the county's supervision portfolio.

The Process Inflation Finding identifies partial authority uncertainty here: the specific formal requirement for a distinct tilsynsrapport is not explicitly anchored in § 9 itself; authority relies on incorporation of Kommuneloven kapittel 30. While the practical requirement is well-established and the circular references it, caseworkers at Statsforvalterens offices must produce this documentation under an instrument whose precise statutory anchor is ambiguous — a minor but real guidance gap.

Requirement 9.11 [MIXED] Administrative demand: Before issuing an injunction, Statsforvalteren must issue a formal notification with a stated and reasonable deadline for correction, await the municipality's response within that deadline, and assess whether the correction has been adequate before deciding whether to proceed with the pålegg. This is a mandatory sequential administrative process. Transaction cost: procedural sequencing overhead — extended case processing time, management of response timelines, assessment of corrective action. This is a due process cost that is proportionate and legally grounded.

Requirement 9.12 [MIXED] Administrative demand: When a formal injunction decision (vedtak om pålegg) is issued, Statsforvalteren must follow all forvaltningslovens processing rules: party notification, right of response (uttalelse), stated reasoning (begrunnelse), information about appeal rights, and correct procedural form. This demands legal competence and administrative processing capacity for the formal decision itself, beyond the supervisory findings documentation. Transaction cost: legal processing and formal decision-drafting overhead. This is legally grounded and proportionate; it is a transaction cost but one that is legally necessary.

Requirement 9.14 [INTERNAL CONTROL] Administrative demand: The Kommunebrev 2025 recommendation directs municipalities to conduct a review of their social services internal control system. This places an obligation on municipal NAV leaders and social services managers to: audit their existing internkontroll documentation; identify gaps against supervisory standards; and report or document the review outcome. For small municipalities — the majority of the empirical corpus in the Anchor Document — this review will surface the structural impossibility documented in Anchor Document Cluster 2: deviation software that frontline workers cannot access, portfolio review requirements that collapse when the manager is also the primary caseworker, and ROS analyses that require dedicated administrative capacity the office does not have. The review process itself requires administrative time the small office does not have to spare.

Since Requirement 9.14 has no circular authority (§ 9's circular paragraph does not address this recommendation), the transaction cost it imposes falls entirely outside any framework the circular provides guidance for. Municipal caseworkers and leaders must comply with an obligation from a Kommunebrev that the governing circular for the relevant statutory provision (§ 9) does not address. Furthermore, the Process Inflation Finding identifies this requirement as plausibly misclassified under § 9 — it belongs structurally under § 8 (internkontroll). The transaction cost is therefore unsupported, unguided, and potentially misattributed in the normative framework.

STEP 6 — CATALOG ENTRIES

REQUIREMENT ID: § 9 — Req 9.1

PROVISION TEXT: Statsforvalteren shall supervise that the municipality fulfils its duties under chapter 4, § 13(2)(1st sentence), (3rd para), (4th para)(1st sentence) and § 16(1st para).

SOURCE INSTRUMENT: Circular R-35 Para 9 (statutory text reproduced)

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: YES — statutory text of sosialtjenesteloven § 9(1)

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: NO

PURPOSE: USER NEED

BURDEN DESCRIPTION: No transaction cost burden identified. This is the statutory mandate of the supervisory authority; its existence protects user rights by ensuring municipal compliance with chapter 4's individual service obligations.

KILL LIST CLASSIFICATION: No Kill List Action — clear statutory and circular authority; proportionate to mandate

TRANSACTION COST CATEGORY: No Transaction Cost Identified

REQUIREMENT ID: § 9 — Req 9.2

PROVISION TEXT: Statsforvalteren shall also supervise the municipality's internal control over its chapter 4 duties, cf. Kommuneloven § 25-1.

SOURCE INSTRUMENT: Circular R-35 Para 9 (statutory text reproduced)

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: YES — statutory text of sosialtjenesteloven § 9(1), cross-referenced to Kommuneloven § 25-1

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: NO (direct scale flag on Statsforvalterens capacity absent from Anchor Document)

PURPOSE: MIXED — primary user protection through systemic compliance assurance; secondary internal control verification

BURDEN DESCRIPTION: Statsforvalteren must organize supervision to include review of the municipality's internal oversight apparatus (deviation logs, ROS analyses, quality management documentation) as a separate audit dimension alongside individual case review. This adds preparation and reporting overhead but is proportionate to the statutory mandate and guided by circular authority.

KILL LIST CLASSIFICATION: No Kill List Action — statutory authority clear; circular authority present; burden proportionate

TRANSACTION COST CATEGORY: Documentation Inflation (marginal — internal control audit adds report complexity)

REQUIREMENT ID: § 9 — Req 9.3

PROVISION TEXT: Statsforvalteren shall supervise the municipality's fulfilment of the individual services, including compliance with forsvarlighetskrav, individuelle vurderinger, brukermedvirkning, and saksbehandling.

SOURCE INSTRUMENT: Circular R-35 Para 9

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: YES — derives from § 9(1) and constitutes the substantive scope of the supervisory mandate over individual services

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: NO

PURPOSE: USER NEED

BURDEN DESCRIPTION: No transaction cost burden identified. This establishes the user-facing content of the supervisory mandate; all supervisory work under this requirement directly serves individual users' legal security.

KILL LIST CLASSIFICATION: No Kill List Action

TRANSACTION COST CATEGORY: No Transaction Cost Identified

REQUIREMENT ID: § 9 — Req 9.4

PROVISION TEXT: In supervision, it can additionally be checked whether the municipality, through its internal control, adequately secures statutory duties — including whether individual services are directed at correct target groups and whether coordination occurs within the NAV office and toward other service areas.

SOURCE INSTRUMENT: Circular R-35 Para 9

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: PARTIAL — the general mandate to check internal control derives from § 9(2) via Kommuneloven § 25-1; the specific sub-elements (target group accuracy, coordination quality) are circular elaborations without direct statutory specificity

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: PARTIAL — the Anchor Document (Cluster 2: Internal Control Apparatus) extensively documents that the internal control standards Statsforvalteren would be checking for are calibrated for organizational complexity small municipalities cannot achieve. The supervisory check in Req 9.4 is structurally tasked with assessing compliance against a standard the Anchor Document identifies as disproportionate.

PURPOSE: MIXED — primary INTERNAL CONTROL (optional meta-audit of municipal oversight apparatus); secondary user protection (adequacy of internal control ultimately serves users)

BURDEN DESCRIPTION: Statsforvalererens caseworker must additionally investigate and assess whether the municipality's internal oversight is meeting its duties across the sub-elements listed. This adds a discrete audit layer within the supervisory engagement. The permissive language ("kan") means this is not mandatory, but once undertaken, it requires documentation in the tilsynsrapport. Circular guidance is present.

KILL LIST CLASSIFICATION: Category C — Clarification. The room for maneuver needs to be made explicit. The permissive formulation ("kan") is appropriate given the partial statutory anchoring of the specific sub-elements, but the practical effect of itemizing these sub-elements in imperative-adjacent language in the circular may create shadow binding — supervisors may feel compelled to check these items to avoid appearing incomplete. Explicit clarification that these are illustrative rather than exhaustive sub-elements, and that their prioritization is discretionary, would reduce compliance anxiety.

TRANSACTION COST CATEGORY: Documentation Inflation; Structural Disproportionality (indirect — via Anchor Document connection)

REQUIREMENT ID: § 9 — Req 9.5

PROVISION TEXT: Statsforvalteren shall also supervise that the duty to prepare a social emergency preparedness plan (sosialberedskapsplan) is fulfilled.

SOURCE INSTRUMENT: Circular R-35 Para 9

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: YES — the sosialberedskapsplan obligation derives from specific statutory provisions; § 9's supervisory mandate is extended to include this by the circular in a manner consistent with the statutory framework

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: NO

PURPOSE: MIXED — primary user protection through emergency system adequacy; secondary administrative compliance verification (checking plan existence)

BURDEN DESCRIPTION: Statsforvalteren must verify existence and content of the sosialberedskapsplan as a discrete check. This requires requesting and reviewing the plan as a separate documentary artifact, adding a compliance verification step to the supervisory process. Transaction cost is low to moderate.

KILL LIST CLASSIFICATION: No Kill List Action — statutory authority present; burden proportionate

TRANSACTION COST CATEGORY: Documentation Inflation (minor — artifact review)

REQUIREMENT ID: § 9 — Req 9.6

PROVISION TEXT: Statsforvalteren shall supervise that the municipality fulfils its duties regarding cooperation and coordination.

SOURCE INSTRUMENT: Circular R-35 Para 9 (italicized supplementary text)

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: YES — § 9(1) explicitly references § 13 cooperation obligations within the supervisory mandate

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: NO

PURPOSE: USER NEED — supervision of cooperation and coordination duties directly serves users who require multi-agency responses; failure in coordination harms individual users' access to coherent services

BURDEN DESCRIPTION: No transaction cost burden identified for this requirement as a standalone obligation. Note, however, that the Anchor Document documents that supervisors sanction municipalities for lacking *written* inter-agency coordination agreements even where informal coordination functions correctly (Cluster 4). This Req 9.6 obligation to

supervise coordination duties is the source of those sanctions. The transaction cost falls downstream on municipalities, not on the supervisory body itself.

KILL LIST CLASSIFICATION: No Kill List Action — clear statutory and circular authority; the downstream burden on municipalities is addressed separately in the § 13 process inflation analysis

TRANSACTION COST CATEGORY: No Transaction Cost Identified (on Statsforvalterens side)

REQUIREMENT ID: § 9 — Req 9.7

PROVISION TEXT: Supervision may be planned and directed toward areas and themes where Statsforvalteren anticipates risk of failure.

SOURCE INSTRUMENT: Circular R-35 Para 9

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: YES/PARTIAL — planned risk-targeted supervision is recognized under Kommuneloven kapittel 30, incorporated by reference; the "anticipated failure areas" framing is a circular elaboration within the statutory discretionary space

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: NO

PURPOSE: MIXED — primary INTERNAL CONTROL (administrative methodology for organizing supervisory resource allocation); secondary user protection (targeted supervision produces better compliance outcomes)

BURDEN DESCRIPTION: Statsforvalterens supervisory planning function must maintain a risk-mapping and thematic analysis process to inform prioritization of supervision targets. This requires ongoing analytical work identifying failure-prone areas across the county's municipalities. The Anchor Document's documentation of the most prevalent failure mechanisms ([D], [P], [C], [S], [K]) provides implicit guidance for what "anticipated failure areas" would include — debt counseling, internal control, specialist dependencies. Transaction cost: strategic planning and organizational overhead.

KILL LIST CLASSIFICATION: No Kill List Action — circular authority present; permissive formulation preserves appropriate discretion; burden is proportionate to supervisory function

TRANSACTION COST CATEGORY: Reporting Overhead (planning function)

REQUIREMENT ID: § 9 — Req 9.8

PROVISION TEXT: Supervision may proceed as a reaction to specific events Statsforvalteren becomes aware of from various sources, including complaints, tips, and media.

SOURCE INSTRUMENT: Circular R-35 Para 9

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: YES/PARTIAL — reactive supervision is a standard form under Kommuneloven kapittel 30; the specific source categories (complaints, tips, media) are circular elaborations

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: NO

PURPOSE: MIXED — primary INTERNAL CONTROL (procedural mechanism for triggering reactive supervision); secondary user protection (complaint-triggered supervision can address ongoing harm to users)

BURDEN DESCRIPTION: Statsforvalteren must maintain intake processes for complaints, tips, and media monitoring to enable reactive supervision triggering. This requires case intake triage capacity and decision-making about whether to proceed to formal supervision. Transaction cost: case management and triage overhead.

KILL LIST CLASSIFICATION: No Kill List Action — permissive formulation preserves discretion; circular and statutory authority adequate

TRANSACTION COST CATEGORY: Procedural Duplication (minor — case intake triage for reactive triggers)

REQUIREMENT ID: § 9 — Req 9.9

PROVISION TEXT: Supervision may be carried out both announced and unannounced.

SOURCE INSTRUMENT: Circular R-35 Para 9

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: YES — both forms are standard methods under Kommuneloven kapittel 30

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: NO

PURPOSE: MIXED — primary INTERNAL CONTROL (administrative methodology); secondary user protection (unannounced supervision may produce more accurate pictures of real compliance)

BURDEN DESCRIPTION: This is a permissive procedural flexibility provision. It does not impose a transaction cost; rather, it preserves discretion. The option to conduct unannounced supervision may reduce preparation costs in some cases.

KILL LIST CLASSIFICATION: No Kill List Action — permissive; no burden identified

TRANSACTION COST CATEGORY: No Transaction Cost Identified

REQUIREMENT ID: § 9 — Req 9.10

PROVISION TEXT: Breaches of law or regulations identified through supervision shall be reasoned and documented in a formal supervisory report (tilsynsrapport).

SOURCE INSTRUMENT: Circular R-35 Para 9

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: PARTIAL — the practical and procedural requirement for a tilsynsrapport is well-established, but the specific formal requirement for this distinct documentary artifact is not explicitly stated in § 9 itself; authority relies on incorporation of Kommuneloven kapittel 30, which the Process Inflation Finding characterizes as ambiguously specific for this purpose

DOUBLE AUTHORITY GAP: NO (circular authority present; statutory authority partial but not absent)

CATEGORY ERROR: NO

SCALE FLAG: PARTIAL — by structural analogy with the Anchor Document's [D] Documentation Apparatus findings: the obligation to produce a formally reasoned documentary artifact for each supervisory finding imposes documentation overhead on Statsforvalterens offices that is calibrated for the supervisory body's own organizational capacity. In a period of intensive supervision (100+ municipalities reviewed 2023–2025 as documented in the Anchor Document), the cumulative tilsynsrapport documentation burden is substantial. No specific Anchor Document finding addresses Statsforvalterens own documentation capacity, but the structural [D] mechanism analysis is directly analogous.

PURPOSE: INTERNAL CONTROL — the tilsynsrapport is an administrative record-keeping artifact serving the documentary apparatus of the regulatory relationship. It enables the formal record, supports pålegg proceedings and appeals, and provides an audit trail. It does not directly affect individual user case outcomes; its addressee is the municipality, not the user.

BURDEN DESCRIPTION: For each supervisory engagement producing a finding, Statsforvalterens caseworker must produce a formal tilsynsrapport reasoning each breach with reference to specific statutory provisions, factual documentation of how the breach was identified, and proportional legal analysis connecting evidence to conclusion. This is significant documentation labor per engagement. In the context of the intensive supervisory activity documented in the Anchor Document (100+ municipal supervisions), the cumulative burden is considerable. The Process Inflation Finding notes a residual authority gap — the specific tilsynsrapport requirement rests on Kommuneloven kapittel 30 incorporation, whose specificity for this purpose is ambiguous. Caseworkers are therefore producing significant documentation in partial reliance on an instrument whose anchor in § 9 is indirect.

KILL LIST CLASSIFICATION: Category C — Clarification. The tilsynsrapport requirement is operationally necessary and practically well-established, but its authority foundation is partially ambiguous. The circular should explicitly cross-reference the specific Kommuneloven kapittel 30 provisions that ground the tilsynsrapport requirement, rather than relying on general incorporation. This would reduce guidance ambiguity and provide a clearer framework for what the report must contain and at what standard.

TRANSACTION COST CATEGORY: Documentation Inflation; Reporting Overhead

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REQUIREMENT ID: § 9 — Req 9.11

PROVISION TEXT: Before an injunction is used, the municipality shall be given a reasonable deadline to correct the matter.

SOURCE INSTRUMENT: Circular R-35 Para 9

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: YES — grounded in Kommuneloven kapittel 30's procedural rules on contradiction and proportionality, incorporated by reference

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: NO

PURPOSE: MIXED — primary municipal due process protection (procedural fairness right for the municipality as regulatory subject); secondary indirect user protection (municipalities that correct failures without escalation serve users better)

BURDEN DESCRIPTION: Statsforvalteren must issue a formal correction notification with a stated reasonable deadline, manage the response timeline, and assess the adequacy of corrective action before deciding on pålegg. This introduces a mandatory sequential process between finding and enforcement. Transaction cost: procedural sequencing overhead; case management during correction window. This cost is proportionate and legally grounded.

KILL LIST CLASSIFICATION: No Kill List Action — clear legal authority; due process requirement is proportionate

TRANSACTION COST CATEGORY: Procedural Duplication (minor — sequential processing step)

REQUIREMENT ID: § 9 — Req 9.12

PROVISION TEXT: If Statsforvalteren issues a formal injunction decision, the Public Administration Act's (forvaltningsloven) processing rules shall be followed.

SOURCE INSTRUMENT: Circular R-35 Para 9

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: YES — forvaltningslovens saksbehandlingsregler apply ex lege to individual administrative decisions; this requirement is legally direct and independent of § 9

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: NO

PURPOSE: MIXED — primary systemic legal order and rule-of-law compliance; secondary municipal due process protection (ensures lawful and reviewable injunctions)

BURDEN DESCRIPTION: Statsforvalteren must follow all forvaltningsloven procedural requirements for formal pålegg decisions: party notification, right of response, stated and specific reasoning, information on appeal rights, and correct formal decision structure. This demands legal processing competence and additional administrative steps beyond the supervisory report itself. The transaction cost is substantial for formal injunction proceedings, but is legally necessary and proportionate.

KILL LIST CLASSIFICATION: No Kill List Action — ex lege; clear authority; burden is legally necessary

TRANSACTION COST CATEGORY: Reporting Overhead; Procedural Duplication (sequential formal decision process)

REQUIREMENT ID: § 9 — Req 9.13

PROVISION TEXT: Statsforvalteren may in such cases consider opening supervision to examine whether the municipality and NAV office provides an adequate service, based on specific complaint cases.

SOURCE INSTRUMENT: Veileder til sosialtjenesteloven § 17 (b — veileder)

CIRCULAR AUTHORITY: ABSENT — this requirement has no textual presence in the § 9 circular paragraph. Consequence: the requirement operates entirely outside the § 9 circular framework. Statsforvalterens staff applying this provision must operationalize an obligation the governing circular does not acknowledge. This constitutes a first-order authority gap.

LEGAL AUTHORITY: PARTIAL — the option is consistent with § 9's general supervisory mandate and imposes nothing beyond the statutory framework. However, the source instrument (a veileder for § 17, not § 9) does not have a formal interpretive relationship with § 9. The authority is by analogy, not derivation.

DOUBLE AUTHORITY GAP: NO — while circular authority is absent, statutory authority is partial and the requirement is consistent with (if not derived from) the statutory framework.

CATEGORY ERROR: PARTIAL — the source instrument is a veileder written for § 17, not § 9. This is not a different legal domain (sosialtjenesteloven applies throughout), but it represents a source-instrument misalignment: a § 17 interpretive document is being operationalized within the § 9 supervisory framework. The cross-paragraph bleed is structurally problematic as a normative architecture matter.

SCALE FLAG: NO

PURPOSE: USER NEED — the option to open supervision based on complaint cases is a user-protective mechanism enabling individual users to trigger regulatory attention to failures that affect them.

BURDEN DESCRIPTION: No transaction cost burden identified for this requirement — it is a permissive option that empowers rather than burdens caseworkers. However, since this requirement has no circular authority, any operational uncertainty about when and how to exercise this option falls outside the framework the § 9 circular provides guidance for. Staff seeking to understand their supervisory discretion under this provision must consult a veileder for a different statutory paragraph — a guidance gap that is itself a transaction cost, measured in additional interpretive labor and increased uncertainty about correct practice.

KILL LIST CLASSIFICATION: Category C — Clarification. The room for maneuver needs to be made explicit to reduce shadow binding and source-instrument confusion. The option to open supervision based on complaint cases is a useful and appropriate provision. However, it should be incorporated into the § 9 circular framework directly, rather than relying on a § 17 veileder as the operative source. Its absence from the § 9 circular means caseworkers may either overlook this option or apply it with uncertainty about its proper basis.

TRANSACTION COST CATEGORY: No Transaction Cost Identified (on the requirement itself); minor guidance-gap overhead from cross-paragraph sourcing

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REQUIREMENT ID: § 9 — Req 9.14

PROVISION TEXT: Arbeids- og velferdsdirektoratet recommends that municipalities conduct a review of the internal control system for the social services.

SOURCE INSTRUMENT: Kommunebrev 2025 (a — Kommunebrev)

CIRCULAR AUTHORITY: ABSENT — this requirement has no textual presence in the § 9 circular paragraph. Consequence: the requirement operates entirely outside the § 9 circular framework. It is issued by a different actor (the Directorate, not Statsforvalteren) through a different instrument (Kommunebrev) directed at a different subject (municipalities, not Statsforvalteren). First-order authority gap confirmed.

LEGAL AUTHORITY: NO/PARTIAL — § 9 regulates Statsforvalterens supervisory activity, not Directorate communications to municipalities. The Process Inflation Finding identifies this as lacking direct legal anchoring in § 9. The recommendation's legal basis, to the extent it has any, derives from the Directorate's general administrative guidance role — which is a different legal authority framework from § 9. The Process Inflation Finding further identifies this as a structurally misclassified requirement that plausibly belongs under § 8 (internkontroll), not § 9.

DOUBLE AUTHORITY GAP: YES — circular authority is ABSENT and legal authority is NO/PARTIAL. This is the only double authority gap identified in this paragraph.

CATEGORY ERROR: PARTIAL — this is not a requirement from a different legal domain (no labor law or HMS framework applies), but it constitutes a structural category error within the social services normative framework: § 9 governs Statsforvalterens supervisory activity; this requirement is a Directorate recommendation to municipalities issued through an administrative communication channel, included in the § 9 Process Inflation Findings solely because its subject matter (internkontroll review) intersects with § 9's topical scope. The Process Inflation Finding confirms this: "lacks direct legal anchoring in § 9 — which regulates Statsforvalteren, not the Directorate — making it a structurally misleading classification anomaly that plausibly belongs under § 8 instead."

SCALE FLAG: YES — the Anchor Document (Cluster 2 in all three memo sections) provides extensive confirmation that the internkontroll apparatus requirements municipalities are being asked to review are structurally disproportionate for small municipalities. The cumulative requirements — formal deviation software, portfolio reviews, ROS analyses, role-separated approval — assume organizational complexity that municipalities below 5,000–10,000 inhabitants cannot internally achieve. The Kommunebrev recommendation asks municipalities to review a system the Anchor Document identifies as structurally impossible to comply with at small scale. Relevant Anchor Document finding: "the entire internal control architecture — which the supervisor evaluates as a distinct compliance domain — structurally cannot exist in a micro-office without manufacturing it artificially." Since this requirement has no circular authority, the scale-related burden it imposes is unsupported by the circular framework and therefore constitutes disproportionate burden without regulatory foundation.

PURPOSE: INTERNAL CONTROL — the recommendation serves administrative self-audit and system monitoring functions internal to the municipality's own oversight apparatus. It does not directly serve individual user case assessment quality; users are not parties to the review process. The immediate purpose is institutional: checking whether the municipality's administrative machinery meets normative expectations.

BURDEN DESCRIPTION: Municipalities receiving the Kommunebrev 2025 recommendation must: identify responsible officers to conduct the review; gather and assess their internkontroll documentation; compare it against the normative standard implied by supervisory practice; and document findings. For small municipalities — the empirical norm in the Anchor Document's corpus — this review will consistently surface compliance gaps that are structural impossibilities (no maker/checker separation with two social services staff; deviation software inaccessible to NAV workers; ROS analyses requiring dedicated administrative capacity that does not exist). The review process imposes administrative overhead on precisely the offices the Anchor Document identifies as least able to absorb it.

Since this requirement has no circular authority, the transaction cost falls entirely outside any framework the § 9 circular provides guidance for. Municipalities must respond to a Kommunebrev obligation that the governing statutory paragraph's circular does not address, issued by an actor (the Directorate) that § 9 does not authorize to direct municipalities in this way. The requirement is substantively mislocated, instrumentally unsupported, and scale-disproportionate simultaneously.

KILL LIST CLASSIFICATION: Category A — Removal. This requirement is assessed as lacking legal authority in § 9 and as belonging to a different normative instrument and actor relationship (§ 8 / Direktorate administrative guidance, not § 9 / Statsforvalterens supervisory activity). It is a candidate for removal from the § 9 normative framework. If the Directorate recommendation has substantive merit, it should be formally relocated to the § 8 circular framework, where it would have appropriate statutory anchoring, and should be reissued through an instrument consistent with that framework. Its current appearance as a § 9 Process Inflation Finding constitutes a structural misclassification that creates normative confusion about the scope of § 9's supervisory mandate.

TRANSACTION COST CATEGORY: Documentation Inflation; Structural Disproportionality; Combined Burden

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CLOSING COMPARATIVE NOTE

Requirements identified starting from the Process Inflation Findings: 14

Requirements visible starting from the circular paragraph alone: 12. Requirements 13 and 14 are entirely invisible from the circular, meaning that approximately 14% of the operative normative framework for § 9 cannot be identified by reading the governing circular paragraph.

Double authority gaps: 1 (Requirement 9.14 only)

Category errors (in the strict sense of different legal domain): 0. There are no requirements in this paragraph derived from labor law, HMS frameworks, or other non-social-services legal domains. However, there are 2 source-instrument misalignments that function analogously: Requirement 9.13 (veileder for § 17 applied to § 9) and Requirement 9.14 (Kommunebrev from the Directorate classified under a paragraph that

governs Statsforvalterens activity, not Directorate communications). The Process Inflation Finding for Req 9.14 explicitly identifies this as a "structurally misleading classification anomaly" — the functional equivalent of a category error within the social services normative architecture.

Kill List breakdown:

- **Category A — Removal:** 1 (Requirement 9.14)
- **Category B — Status Change:** 0
- **Category C — Clarification:** 3 (Requirements 9.4, 9.10, 9.13)
- **No Kill List Action:** 10 (Requirements 9.1, 9.2, 9.3, 9.5, 9.6, 9.7, 9.8, 9.9, 9.11, 9.12)

Primary transaction cost categories by frequency:

- Documentation Inflation: 4 requirements (9.2, 9.10, 9.14, and minor in 9.5)
- Reporting Overhead: 3 requirements (9.7, 9.10, 9.12)
- Structural Disproportionality: 1 requirement (9.14)
- Combined Burden: 1 requirement (9.14)
- Procedural Duplication: 2 requirements (9.11, 9.12 minor)
- No Transaction Cost Identified: 6 requirements (9.1, 9.3, 9.6, 9.9, 9.13, and the user need elements of 9.5 and 9.6)

Synthesis observation for the main report: § 9 is structurally cleaner than many other paragraphs in the circular framework because the majority of its requirements are either direct statutory reproductions or well-grounded procedural elaborations. The critical findings are concentrated at the margins: one double authority gap (Req 9.14) that is also scale-disproportionate and structurally misclassified; one source-instrument misalignment (Req 9.13) that creates a guidance gap without a corresponding burden; and one partial authority ambiguity (Req 9.10, the tilsynsrapport requirement) that warrants clarification without removal. The Category A candidate (Req 9.14) is analytically significant not for its volume but for its structural character: a Kommunebrev recommendation from the Directorate, addressed to municipalities, classified under the circular paragraph governing Statsforvalterens supervisory activity, directing a review of an internkontroll system the Anchor Document has identified as structurally impossible for small municipalities to comply with. This is the intersection of every problem the sludge audit methodology is designed to surface: wrong instrument, wrong actor, wrong paragraph, and scale-disproportionate subject matter — all simultaneously.

SLUDGE AUDIT — § 10 STATENS HELSETILSYNS TILSYNSVIRKSOMHET

Session reference: § 10 | Rundskriv 35 paragraph 2.10.1 **Reference Document:** Process Inflation Findings, § 10 **Context Document:** Circular paragraph 2.10.1 **Anchor Document:** Volume Driver Findings (§§ 17–20a synthesis)

PRELIMINARY METHODOLOGICAL NOTE

Before Step 1, the structural observation required by the methodology must be recorded.

Requirements visible from the Process Inflation Findings: 0

Requirements that would be visible from the circular paragraph alone: 0

Structural observation: There is no divergence between the two sources to measure. The Process Inflation Findings explicitly confirm — through a completed three-step extraction process — that Rundskriv 35 paragraph 2.10.1 contains zero documentation requirements, zero procedural mandates, and zero operational obligations. The circular paragraph itself corroborates this: it consists entirely of descriptive and organizational text explaining the institutional role of Statens helsetilsyn (oversight responsibility, prioritization of inspection themes, resource function for statsforvalteren, complaint appellate jurisdiction). No *shall*-language, no documentation trigger, no caseworker-facing obligation appears in either source.

Requirements with no textual presence in the circular: None — because no requirements exist in either document.

Source mapping: Not applicable. There are no requirements to map to source instruments.

Consequence for analysis: The core analytical value of using the Process Inflation Findings as the reference document rather than the circular — namely, surfacing hidden sub-legal requirements invisible from the circular alone — cannot be demonstrated here because there is nothing to surface. This is itself an analytically meaningful result: § 10 is a pure institutional-architecture provision. It defines the supervisory pyramid (Statens helsetilsyn → statsforvalteren → municipalities) but places no direct obligation on the caseworkers, NAV leaders, or municipalities whose operational burden this audit is designed to measure.

STEP 1 — IDENTIFICATION OF ALL REQUIREMENTS

No requirements identified.

The Process Inflation Findings state with explicit finality: "Total requirements extracted: 0." All three extraction steps in the Process Inflation analysis confirm this. The circular paragraph 2.10.1 imposes no documentation requirement and no procedural obligation on any operational actor within the social services delivery chain.

Enumeration of requirements carried forward to Steps 2–6: None.

STEP 2 — LEGAL AUTHORITY CHECK

Not applicable. No requirements were identified in Step 1. There are no obligations to subject to bi-directional authority analysis.

STEP 3 — SCALE AND PROPORTIONALITY CHECK

Not applicable. No requirements were identified in Step 1. Cross-referencing against the Volume Driver Findings in the Anchor Document produces no matches because there is no normative content in § 10 that generates operational obligations on municipal actors.

Structural observation for the record: The Anchor Document covers §§ 17, 18, 19, and 20a extensively. None of those volume driver analyses reference § 10 as a source of operational burden. This is consistent with the null finding here.

STEP 4 — PURPOSE CLASSIFICATION

Not applicable. No requirements were identified.

STEP 5 — TRANSACTION COST CHARACTERIZATION

Not applicable. No requirements were identified, and therefore no transaction costs can be characterized.

STEP 6 — CATALOG ENTRIES

No catalog entries are produced for this session. The Process Inflation Findings confirm zero extractable requirements. Producing a catalog entry for a non-existent requirement would misrepresent the audit record.

CLOSING COMPARATIVE NOTE

Analytical dimension	Count
Requirements identified from Process Inflation Findings	0
Requirements that would have been visible from circular alone	0
Additional requirements surfaced by using Process Inflation Findings as primary source	0
Double authority gaps	0
Category errors (requirements from a different legal domain)	0
Kill List — Category A (removal candidates)	0
Kill List — Category B (status change candidates)	0
Kill List — Category C (clarification candidates)	0
Primary transaction cost categories	None identified

Synthesis: § 10 contributes nothing to the Sludge burden. It is a constitutive provision — it establishes which institution holds which supervisory function — and has no caseworker-facing, documentation-generating, or procedurally inflating content. It is correctly and completely described by its own text.

This null result is analytically useful in two respects. First, it confirms that the audit methodology correctly returns zero where zero is the right answer, establishing that positive findings elsewhere in the audit series reflect genuine normative content rather than methodological over-extraction. Second, it illustrates the distinction between provisions that *generate* administrative burden (the debt counseling, documentation, and internal control provisions documented extensively in the Anchor Document) and provisions that merely *describe the institutional architecture within which* that burden operates. § 10 belongs entirely to the second category.

No Kill List entries are generated for this paragraph. No transaction cost categories apply. The paragraph requires no reform action under this audit framework.

SLUDGE AUDIT — § 11 TILSKUDD FRA STATEN

Session reference: § 11 | Rundskriv 35** Analyst note:** Working document — pending manual verification where flagged

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PRELIMINARY METHODOLOGICAL NOTE

Structural comparison: Process Inflation Findings vs. circular paragraph

From the Process Inflation Findings (REFERENCE DOCUMENT): **zero (0) requirements** are enumerated for § 11. The source states explicitly that Rundskriv 35 § 11 imposes no circular requirements on administering authorities, that the total documentation requirement count is zero, and that eight supplementary procedural requirements (PROC-REQ-SUPP.1–SUPP.8) mentioned in that analysis are explicitly flagged as belonging to *other paragraphs* and are not linked to § 11.

From the circular paragraph alone (CONTEXT DOCUMENT): The § 11 text is a two-sentence provision establishing the state's annual block grant obligation and distributing those grants through the municipal income system per rules set by the King. The commentary (§ 2.11.1) adds two explanatory sentences noting the state's overarching alignment responsibility and the annual Storting budget process. **No procedural or documentation obligations are directed at municipalities as administering authorities.** The provision addresses the state's obligations toward municipalities, not municipalities' obligations toward users or the supervisory apparatus.

Result of comparison: The number of requirements visible from the Process Inflation Findings (zero) is identical to the number visible from the circular paragraph alone (zero). There is no analytical gap between the two sources for this paragraph. The structural value of using the Process Inflation Findings as the reference document — which in other paragraphs surfaces requirements invisible from the circular text — does not manifest here because both sources converge on a null result.

Requirements with no textual presence in the circular: None. By definition, there are no requirements to map.

Source mapping of invisible requirements: Not applicable. No sub-legal instruments (Kommunebrev, veileder, standard documents, guidance documents, or other instruments) attach documentation or procedural obligations to § 11 that are absent from the circular text.

STEP 1 — IDENTIFICATION OF ALL REQUIREMENTS

Total requirements identified from the Process Inflation Findings: zero (0).

No documentation requirement or procedural obligation is contained in the Process Inflation Findings for § 11. The source is unambiguous: "Rundskriv 35 § 11 imposes no circular requirements on administering authorities."

The circular paragraph itself is consistent with this finding. It is a funding provision that establishes an obligation running from the *state toward municipalities*, not from *municipalities toward users or supervisory bodies*. It imposes no case-level documentation obligations, no reporting requirements on caseworkers, no procedural pipelines, and no quality management demands.

There are no requirements to carry forward into Steps 2 through 6.

STEP 2 — LEGAL AUTHORITY CHECK

Not applicable. No requirements identified.

STEP 3 — SCALE AND PROPORTIONALITY CHECK

Cross-reference with ANCHOR DOCUMENT (Volume Driver Findings):

The Volume Driver Findings address §§ 17, 18, 19, and 20a exclusively. § 11 does not appear as a source of any volume-sensitive requirement in the ANCHOR DOCUMENT, which is consistent with its character as a state-facing funding provision. No volume driver in the ANCHOR DOCUMENT is linked to or derives from § 11.

No scale flag applies. Not applicable further.

STEP 4 — PURPOSE CLASSIFICATION

Not applicable. No requirements identified.

STEP 5 — TRANSACTION COST CHARACTERIZATION

Not applicable. No requirements identified.

STEP 6 — CATALOG ENTRY

No catalog entry is produced. There are no requirements meeting the threshold for entry.

CLOSING COMPARATIVE NOTE

Metric	Count
Requirements identified from Process Inflation Findings	**0**
Requirements that would have been visible from the circular alone	**0**
Requirements invisible from circular but surfaced by Process Inflation Findings	**0**
Double authority gaps	**0**
Category errors (requirements from a different legal domain)	**0**
Kill List: Category A (removal candidates)	**0**
Kill List: Category B (status change candidates)	**0**
Kill List: Category C (clarification candidates)	**0**
No Kill List Action	**0**
Primary transaction cost categories by frequency	**None identified**

Analytical observation for the main report:

§ 11 is analytically significant not for what it contains but for what it confirms about the structure of the circular. It is one of the few provisions in Rundskriv 35 that imposes *no compliance burden whatsoever* on administering authorities. The paragraph addresses a vertical fiscal relationship — state to municipality — and neither the statutory text, the circular commentary, nor any identifiable sub-legal instrument converts that relationship into a caseworker-level obligation.

This null result has two uses in the broader report. First, it provides a clean baseline for comparison: paragraphs that do generate sludge-type requirements can be contrasted against § 11 to illustrate that the compliance burdens identified elsewhere are not inherent in the nature of social services legislation but are specific choices made in the design of particular provisions and their sub-legal elaboration. Second, and more subtly, it illustrates that the *absence* of requirements in a funding provision is unremarkable — the problematic pattern identified in the ANCHOR DOCUMENT occurs precisely in the service-delivery provisions (§§ 17, 18, 19, 20a) where the combination of substantive statutory obligations and sub-legal procedural layering generates volume-sensitive compliance burdens. § 11 sits entirely outside that pattern.

No Kill List entries. No transaction costs identified. Session for § 11 complete.

SLUDGE AUDIT — § 12 INFORMASJON OG GENERELL FOREBYGGENDE VIRKSOMHET

PRELIMINARY METHODOLOGICAL NOTE

Requirement count comparison: The Process Inflation Findings identify **19 requirements** operative under § 12. Starting from the circular paragraph in the Context Document alone, a standard reading would surface **12 requirements** (PROC-REQ-12.1 through PROC-REQ-12.12, all textually grounded in sections 3.12.1 through 3.12.2.3 of R-35). This means **7 requirements — 37% of the operative normative framework — are invisible from the circular alone.**

Requirements with no textual presence in the circular paragraph:

Requirement	Source instrument	Instrument type
Req 13	Veileder for økonomisk stønad 2022	(b) a veileder
Req 14	Veileder for økonomisk stønad 2022	(b) a veileder
Req 15	Veileder for økonomisk stønad 2022	(b) a veileder
Req 16	Kommunebrev 2025	(a) a Kommunebrev
Req 17	Retningslinjer for samarbeid mellom barnevernstjenesten og Nav-kontoret	(d) a guidance document attached to a cooperative standard
Req 18	Retningslinjer for samarbeid mellom barnevernstjenesten og Nav-kontoret	(d) a guidance document attached to a cooperative standard
Req 19	Barnets beste — veileder	(b) a veileder

Structural significance: The sub-legal normative layer for § 12 is not merely amplificatory — it introduces requirements from instruments external to the social services circular system entirely. Req 17 derives from a barnevern cooperation guideline, and Req 19 from a child welfare veileder, both operating in a legal domain adjacent to but distinct from sosialtjenesteloven § 12. A caseworker or municipal planner reading R-35 § 12 in its entirety would still be unaware of three veileder-sourced obligations, one Kommunebrev-sourced mandatory collaboration structure, one plan-production requirement, and one child welfare documentation suggestion — all of which carry varying degrees of operational binding force in practice.

This preliminary mapping is carried forward as the foundational analytical basis for Steps 2 through 6.

STEP 1 — IDENTIFICATION OF ALL REQUIREMENTS

Requirement 1 Obligation: The municipality shall become familiar with residents' living conditions, pay special attention to developments that may create or maintain social problems, and seek to identify preventive measures. Source: R-35, § 12 (circular) Nature: Explicit Textual presence in circular: YES — statutory text reproduced in full; elaborated in 3.12.1 and 3.12.2.1

Requirement 2 Obligation: The NAV office has a duty to participate in the municipality's work on living conditions and social prevention. Source: R-35, § 12 (circular) Nature: Explicit Textual presence in circular: YES — stated in 3.12.1

Requirement 3 Obligation: Special attention shall be directed toward conditions significant for the socially disadvantaged, persons outside working life, and the upbringing conditions of children and young people. Source: R-35, § 12 (circular) Nature: Explicit Textual presence in circular: YES — stated in 3.12.1

Requirement 4 Obligation: The NAV office must systematize and analyze knowledge about residents' living conditions to gain an overview of developments at the societal level. Source: R-35, § 12 (circular) Nature: Explicit Textual presence in circular: YES — stated in 3.12.2.1, second paragraph

Requirement 5 Obligation: If the NAV office becomes aware of conditions that may create or sustain social problems, it has a responsibility to initiate the establishment of preventive measures in the municipality. Source: R-35, § 12 (circular) Nature: Explicit Textual presence in circular: YES — stated in 3.12.2.1, first paragraph

Requirement 6 Obligation: Outreach work must not be conducted in a manner that feels like external interference and has a violating effect. Source: R-35, § 12 (circular) Nature: Explicit Textual presence in circular: YES — stated in 3.12.2.1, final paragraph

Requirement 7 Obligation: Finding preventive measures should be based on experiences from the municipality's social work and on general and research-based knowledge about causes of social problems. Source: R-35, § 12 (circular) Nature: Explicit Textual presence in circular: YES — stated in 3.12.2.2, first paragraph

Requirement 8 Obligation: The NAV office shall have preventive measures that seek to facilitate the development and strengthening of social community and solidarity in the local environment. Source: R-35, § 12, ledd 2 (circular) Nature: Explicit Textual presence in circular: YES — stated in 3.12.2.2, second paragraph

Requirement 9 Obligation: Knowledge must be disseminated to other municipal bodies and local voluntary organizations to contribute to a comprehensive service offering and coordinated solutions. Source: R-35, § 12 (circular) Nature: Explicit Textual presence in circular: YES — stated in 3.12.2.3, first paragraph

Requirement 10 Obligation: Information must also be given to the municipality's residents generally, and to the socially disadvantaged specifically, to contribute to individuals being able to safeguard their interests and know the service offering. Source: R-35, § 12 (circular) Nature: Explicit Textual presence in circular: YES — stated in 3.12.2.3, first paragraph

Requirement 11 Obligation: Information activities should be adapted to local conditions and provided in various forms and channels. Source: R-35, § 12 (circular) Nature: Explicit Textual presence in circular: YES — stated in 3.12.2.3, second paragraph

Requirement 12 Obligation: Consideration must be given to people with varying needs for adapted information. Source: R-35, § 12 (circular) Nature: Explicit Textual presence in circular: YES — stated in 3.12.2.3, second paragraph

Requirement 13 Obligation: The NAV office must ensure that information about the social services reaches the population. Source: Veileder for økonomisk stønad 2022 Nature: Explicit Textual presence in circular: NO

Requirement 14 Obligation: The municipality must assess how best to inform relevant cooperation partners about NAV's services. Source: Veileder for økonomisk stønad 2022 Nature: Explicit Textual presence in circular: NO

Requirement 15 Obligation: The municipality must therefore direct its efforts especially toward vulnerable groups to seek to prevent these persons from ending up in difficult life situations. Source: Veileder for økonomisk stønad 2022 Nature: Explicit Textual presence in circular: NO

Requirement 16 Obligation: The NAV office and municipality shall, together with other actors, contribute to the municipality's local preventive work. Source: Kommunebrev 2025 Nature: Explicit Textual presence in circular: NO

Requirement 17 Obligation: The municipality shall prepare a written plan for the municipality's preventive work. Source: Retningslinjer for samarbeid mellom barnevernstjenesten og Nav-kontoret Nature: Explicit Textual presence in circular: NO

Requirement 18 Obligation: Cooperation structures, arenas, and any routines for cooperation may be included in the municipality's plan for preventive work. Source: Retningslinjer for samarbeid mellom barnevernstjenesten og Nav-kontoret Nature: Explicit Textual presence in circular: NO

Requirement 19 Obligation: Where an assessment has been made in connection with development of new systems, investigations, or professional development activities, it may be documented as part of reports, in circular work, routines, and similar. Source: Barnets beste — veileder Nature: Explicit Textual presence in circular: NO

STEP 2 — LEGAL AUTHORITY CHECK

Requirement 1 Direction 1 (circular authority): YES Direction 2 (statutory authority): YES — constitutes the fixed statutory framework duty under sosialtjenesteloven § 12, first paragraph. No authority gap.

Requirement 2 Direction 1 (circular authority): YES Direction 2 (statutory authority): YES — the NAV office's participation duty is grounded in the preparatory works and the overall partnership structure of the social services act. Process Inflation Finding: "No legal escalation or gap; assigns responsibility consistent with statutory scheme and preparatory works."

Requirement 3 Direction 1 (circular authority): YES Direction 2 (statutory authority): YES — constitutes a mandatory categorical direction of substantive statutory attention. Process Inflation Finding classifies as [SUBSTANTIVE LEGAL OBLIGATION].

Requirement 4 Direction 1 (circular authority): YES Direction 2 (statutory authority): PARTIAL — the circular converts an open how-discretion to "become familiar" with living conditions into a mandatory two-step procedural method (systematize and analyze) without explicit statutory delegation for that specific methodology. Process Inflation Finding: "Converts the open how-discretion... into a mandatory, specific two-step analytical procedure without explicit delegation." Double authority gap: NO (circular authority present)

Requirement 5 Direction 1 (circular authority): YES Direction 2 (statutory authority): YES — direct operationalization of the conditional statutory duty to initiate preventive measures once awareness of a problem exists.

Requirement 6 Direction 1 (circular authority): YES Direction 2 (statutory authority): NO — the circular introduces an absolute prohibition restricting how-discretion regarding outreach methods that lacks direct statutory authorization in § 12. Process Inflation Finding: "Introduces an absolute mandatory prohibition restricting the municipality's open how-discretion regarding outreach methods, which lacks direct statutory authorization in § 12." Double authority gap: NO (circular authority present, though no statutory backing)

Requirement 7 Direction 1 (circular authority): YES Direction 2 (statutory authority): YES — uses permissive "bør" language, functioning as operational guidance within existing how-discretion. No gap. Process Inflation Finding: "No legal gap; the permissive 'bør' (should) operates as sound operational guidance."

Requirement 8 Direction 1 (circular authority): YES Direction 2 (statutory authority): YES — anchored in sosialtjenesteloven § 12, second paragraph ("søke å legge forholdene til rette for å utvikle og styrke sosialt fellesskap"). Process Inflation Finding classifies as [SUBSTANTIVE LEGAL OBLIGATION].

Requirement 9 Direction 1 (circular authority): YES Direction 2 (statutory authority): PARTIAL — the circular converts the open how-discretion regarding "spreading knowledge" into a mandatory obligation to inform specific fixed institutional categories (other municipal bodies, voluntary organizations). The statute authorizes knowledge-spreading broadly but does not specify mandatory institutional recipients. Process Inflation Finding: "Converts the entirely open how-discretion regarding 'spreading knowledge' into a mandatory duty to

inform specific fixed institutional categories." Double authority gap: NO (circular authority present)

Requirement 10 Direction 1 (circular authority): YES Direction 2 (statutory authority): YES — directly operationalizes the statutory duty in § 12, third paragraph ("spre kunnskap om sosiale forhold og tjenester i kommunen") with identical imperative force. No gap.

Requirement 11 Direction 1 (circular authority): YES Direction 2 (statutory authority): YES — permissive "bør" language preserves open how-discretion. No gap.

Requirement 12 Direction 1 (circular authority): YES Direction 2 (statutory authority): PARTIAL — introduces a mandatory accessibility and adaptation obligation ("Det skal tas hensyn til") in an area where the statute grants open how-discretion over communication methods. Process Inflation Finding: "Introduces a specific mandatory accessibility and adaptation obligation within an area where the statute grants open how-discretion." Double authority gap: NO (circular authority present)

Requirement 13 Direction 1 (circular authority): NO — this requirement is stated in Veileder for økonomisk stønad 2022 and has no textual presence in R-35 § 12. First-order authority gap: operates outside the circular framework entirely. Direction 2 (statutory authority): YES — content directly operationalizes the statutory duty to spread knowledge about services. Process Inflation Finding: "Acts as a direct operationalization of the open statutory duty without adding obligations in excess of the law." Double authority gap: NO (statutory authority present despite absent circular authority)

Requirement 14 Direction 1 (circular authority): NO — stated in Veileder for økonomisk stønad 2022. First-order authority gap. Direction 2 (statutory authority): YES — mandates a deliberation process channeling but not eliminating how-discretion. Process Inflation Finding: "No legal gap; mandates a deliberation process that effectively channels but does not eliminate open how-discretion." Double authority gap: NO (statutory authority present)

Requirement 15 Direction 1 (circular authority): NO — stated in Veileder for økonomisk stønad 2022. First-order authority gap. Direction 2 (statutory authority): YES — Process Inflation Finding classifies as [SUBSTANTIVE LEGAL OBLIGATION], treating this as a mandatory direction of substantive prevention efforts toward a specific population category with statutory grounding. Double authority gap: NO (statutory authority present)

Requirement 16 Direction 1 (circular authority): NO — stated in Kommunebrev 2025. First-order authority gap. The circular does not address this multi-actor collaboration structure. Direction 2 (statutory authority): PARTIAL — the Kommunebrev converts broad organizational how-discretion into a required multi-actor collaborative structure. The statute contemplates collaboration (see cross-references to §§ 13, 14) but does not mandate a specific organizational structure of the type this requirement implies. Process Inflation Finding: "Converts the broad organizational how-discretion of the municipality into a mandatory specific organizational method of multi-actor collaboration." **Double authority gap: YES — circular authority ABSENT; statutory authority PARTIAL.**

Requirement 17 Direction 1 (circular authority): NO — stated in Retningslinjer for samarbeid mellom barnevernstjenesten og Nav-kontoret. First-order authority gap. Direction 2 (statutory

authority): NO — mandates a specific documentary output (a formal written plan) where the law grants open latitude over the form and organization of work. Process Inflation Finding: "Mandates a specific documentary output where the law grants open latitude over the form and organization of work, lacking any statutory basis." **Double authority gap: YES — circular authority ABSENT; statutory authority NO.** Category error note: The source instrument (guidelines for cooperation between child welfare services and NAV) belongs primarily to the domain of child welfare law and inter-agency coordination rather than to sosialtjenesteloven § 12 as such. The plan requirement is imported into the § 12 normative framework from a document whose legal home is the child welfare domain. **Category error: YES.**

Requirement 18 Direction 1 (circular authority): NO — stated in Retningslinjer for samarbeid mellom barnevernstjenesten og Nav-kontoret. First-order authority gap. Direction 2 (statutory authority): YES — purely permissive operational suggestion ("kan") placing no restriction on how-discretion. Process Inflation Finding: "No legal gap; permissive operational suggestion." Double authority gap: NO (statutory authority present through permissive character) Category error note: Source instrument belongs to child welfare domain. Permissive character limits harm, but domain origin warrants noting.

Requirement 19 Direction 1 (circular authority): NO — stated in Barnets beste — veileder. First-order authority gap. Direction 2 (statutory authority): YES — purely permissive suggestion. Process Inflation Finding: "No legal gap; a purely permissive suggestion on how to record activities, completely preserving open how-discretion." Double authority gap: NO (permissive character; no statutory conflict) **Category error: YES** — "Barnets beste" is a legal principle anchored in barnekonvensjonen Article 3 and barnevernloven, not in sosialtjenesteloven § 12. The veileder's home domain is child welfare law. Its application to § 12 preventive work introduces a cross-domain normative expectation without explicit grounding in the social services statutory framework.

STEP 3 — SCALE AND PROPORTIONALITY CHECK

Requirement 1 Scale flag: PARTIAL. The Anchor Document identifies outreach work and living conditions monitoring as latent volume drivers (Latent Driver 1 for § 17, structurally identical to § 12 context). Dedicated monitoring and analysis of living conditions at the societal level "cannot coexist with mandatory desk-bound case processing in small offices." No circular authority gap applies here — the requirement is circular-backed.

Requirement 2 Scale flag: PARTIAL. Small NAV offices with two to four employees must participate in municipal planning processes while simultaneously handling all frontline casework. The Anchor Document's findings on management overstretch ([C] mechanism, Cluster 2) are structurally analogous: the same individuals performing frontline work cannot dedicate institutional capacity to broader preventive participation. No circular authority gap.

Requirement 3 Scale flag: NO. The requirement directs the substantive focus of attention without presupposing additional organizational capacity. Applies equally to any size municipality.

Requirement 4 Scale flag: YES. The requirement presupposes capacity for systematic data collection and societal-level analysis — a function that assumes dedicated analytical capacity or administrative back-office support. The Anchor Document's findings on Documentation Apparatus ([D] mechanism) and Competence Sustainability ([K] mechanism) confirm that small offices cannot sustain specialist analytical functions: "A municipality processing [low case volumes] faces... the documentation challenge of logging... in an office where that separation is structurally impossible." The circular imposes a mandatory two-step analytical method without providing a framework for how to discharge it at small scale.

Requirement 5 Scale flag: NO. The conditional structure ("if aware of...") means the obligation arises only upon specific awareness. Scale does not affect whether awareness triggers the duty.

Requirement 6 Scale flag: NO. The prohibition is content-neutral and scale-neutral — it regulates method, not capacity.

Requirement 7 Scale flag: NO. The permissive character ("bør") and the guidance-based framing preserve local discretion. Research-based guidance can be accessed through existing centralized resources regardless of office size.

Requirement 8 Scale flag: YES. The requirement that the NAV office "shall have" preventive measures parallels the Anchor Document's Latent Driver for outreach and the Tier 3 finding on activity portfolio (§ 20a): "Running structured group activities... requires a critical mass of participants." The Anchor Document states explicitly that "dedicated field roles cannot coexist with mandatory desk-bound case processing in small offices." A small NAV office of three to five employees cannot develop, manage, and maintain a portfolio of preventive social measures while discharging all other mandatory obligations. No circular authority gap applies, but the scale-related burden is real and unaddressed by the circular's framework for small offices.

Requirement 9 Scale flag: PARTIAL. The requirement to disseminate knowledge to multiple fixed institutional categories mirrors the Anchor Document's [C] Coordination Infrastructure findings: "formalized inter-agency coordination... produces overhead calibrated for larger, siloed bureaucracies." Small offices coordinate through personal contact; the requirement to formally disseminate knowledge institutionally imposes overhead that assumes organizational differentiation. No circular authority gap applies.

Requirement 10 Scale flag: NO. Public information provision is a general communication function not presupposing specialist capacity.

Requirement 11 Scale flag: NO. Permissive; locally adaptive by design.

Requirement 12 Scale flag: NO. Accessibility considerations apply to all offices regardless of size and do not presuppose specialist capacity as such.

Requirement 13 Scale flag: NO specific flag from Anchor Document. The content parallels what all offices should be doing as a baseline communication function. However, this requirement operates outside the circular framework, meaning no guidance exists within R-35 for how to discharge it.

Requirement 14 Scale flag: PARTIAL. The requirement to conduct and potentially document an assessment of partner communication strategies adds procedural overhead. For small offices already stretched across all mandatory functions, a deliberate assessment process for partner communications represents Reporting Overhead unsupported by circular guidance, since this requirement has no circular authority.

Requirement 15 Scale flag: PARTIAL. Directed action toward vulnerable groups implies dedicated outreach or targeted capacity. The Anchor Document's Latent Driver 1 (outreach, § 17) directly maps here: the requirement is normatively present but enforcement is dormant because scale makes it structurally difficult to discharge. This requirement has no circular authority, meaning any scale-related burden it imposes is unsupported by the circular framework.

Requirement 16 Scale flag: YES. The Kommunebrev requirement to collaborate with other actors in a formalized multi-actor structure directly mirrors the Anchor Document's [C] Coordination Infrastructure cluster: "the requirement for written inter-agency agreements with child welfare, substance abuse services, etc. — produces sanctions when small municipalities rely on informal case-by-case contact." The Anchor Document notes explicitly: "Small offices coordinate naturally through personal contact between a few colleagues across departments; the requirement to formalize this into institutional agreements imposes overhead calibrated for larger, siloed bureaucracies." This requirement **lacks circular authority**, meaning the scale-related burden it imposes is entirely without regulatory foundation in R-35.

Requirement 17 Scale flag: YES. Producing a formal written preventive work plan is a Documentation Apparatus obligation ([D] mechanism). The Anchor Document identifies the documentation apparatus as the dominant volume driver across the empirical supervision dataset, with its core pattern being: caseworkers "deliver the service, often effectively... but fail to translate this delivery into the formal administrative record expected by the supervision standard." A written plan presupposes dedicated planning time, drafting capacity, approval structures, and maintenance — functions that small offices cannot perform alongside mandatory casework obligations. This requirement **lacks circular authority**, meaning the burden falls entirely outside the framework R-35 provides for § 12 work.

Requirement 18 Scale flag: NO. Purely permissive; no mandatory burden.

Requirement 19 Scale flag: NO. Purely permissive; no mandatory burden.

STEP 4 — PURPOSE CLASSIFICATION

Requirement 1: [USER NEED] The statutory obligation to know residents' living conditions and seek preventive measures directly serves the quality and legal security of individual users and the general population. The purpose is substantively protective. Justification: § 12, first paragraph; 3.12.1: "Kunnskapen skal danne grunnlag for det forebyggende arbeidet."

Requirement 2: [MIXED] Primary: USER NEED — ensures the NAV office contributes its unique casework knowledge to municipal prevention. Secondary: INTERNAL CONTROL — allocates institutional responsibility between municipal actors. The allocation of organizational duty is internally oriented; the purpose served by that allocation is user protection. Justification: 3.12.1: "kontoret har et særlig ansvar ovenfor personer som faller utenfor eller får utilstrekkelig hjelp."

Requirement 3: [USER NEED] The categorical direction of attention toward socially disadvantaged persons, persons outside working life, and children's upbringing conditions directly serves the substantive quality and fairness of the NAV office's preventive work. Justification: 3.12.1: "Det skal rettes spesielt oppmerksomhet mot forhold som er av betydning for de sosialt vanskeligstilte."

Requirement 4: [MIXED] Primary: INTERNAL CONTROL — the mandatory two-step analytical procedure (systematize and analyze) primarily serves the production of documented knowledge for administrative planning and oversight purposes, not direct user service. Secondary: USER NEED — the output of that analysis is intended to improve preventive service delivery. However, the requirement as expressed mandates the methodology of internal knowledge management, not the user-facing outcome. Justification: 3.12.2.1: "for å få oversikt over trekk ved utviklingen på samfunnsnivå." The societal-level overview is an administrative output, not a direct user service.

Requirement 5: [USER NEED] The conditional obligation to initiate preventive measures upon awareness of problems directly serves the legal security and welfare of affected residents. Justification: 3.12.2.1: "har kontoret et ansvar for å initiere at det etableres forebyggende tiltak."

Requirement 6: [USER NEED] The prohibition protects users and community members from state intrusion experienced as violating. The purpose is directly user-protective. Justification: 3.12.2.1: "skal imidlertid ikke drives på en måte som oppleves som ytre innblanding og virker krenkende."

Requirement 7: [MIXED] Primary: USER NEED — grounding measure selection in experience and research-based knowledge directly improves the quality of preventive interventions for users. Secondary: INTERNAL CONTROL — the reference to documented evidence bases implies a methodological accountability that serves administrative legitimation. The "bør" phrasing confirms the primary user-protective purpose. Justification: 3.12.2.2: "bør det tas utgangspunkt i erfaringer fra det sosiale arbeidet i kommunen."

Requirement 8: [USER NEED] The requirement that the NAV office shall have preventive measures serving social community and solidarity directly serves the welfare of users and residents at risk. Justification: § 12, second paragraph, operationalized at 3.12.2.2: "liten tilgang til arenaer hvor de kan utvikle tilhørighet og sosiale nettverk."

Requirement 9: [MIXED] Primary: USER NEED — disseminating knowledge to other bodies and organizations serves the goal of a comprehensive, coordinated service offering benefiting users. Secondary: INTERNAL CONTROL — the mandatory specification of institutional recipients (municipal bodies, voluntary organizations) functions as a reporting and coordination obligation serving the administrative system's coherence, independent of

any individual user case outcome. Justification: 3.12.2.3: "for å bidra til et helhetlig tjenestetilbud og samordnede løsninger."

Requirement 10: [USER NEED] Direct communication of information to residents and the socially disadvantaged enables individuals to protect their own interests. Justification: 3.12.2.3: "for å bidra til at den enkelte skal kunne ivareta sine interesser og ha kjennskap til tjenestetilbudet."

Requirement 11: [USER NEED] Locally adapted, multi-channel information serves the reach and accessibility of information for users. The permissive framing confirms that local discretion in service of user need is the governing purpose.

Requirement 12: [USER NEED] Consideration for people with varying information needs directly serves accessibility and inclusion for users with disabilities, language barriers, or other needs. This is a direct user protection obligation, not an internal administrative function.

Requirement 13: [USER NEED] The veileder requirement to ensure information reaches the population is a direct operationalization of the user-facing statutory communication duty. No internal control dimension is present.

Requirement 14: [MIXED] Primary: USER NEED — ensuring partners are informed about NAV's services improves user referral pathways and access. Secondary: INTERNAL CONTROL — the requirement to assess and potentially document communication strategy introduces a procedural layer oriented toward administrative verification rather than individual user outcomes. Justification: Veileder for økonomisk stønad 2022.

Requirement 15: [USER NEED] The targeted direction of prevention efforts toward vulnerable groups serves the protective statutory purpose of § 12 directly. Classification as [SUBSTANTIVE LEGAL OBLIGATION] in the Process Inflation Findings confirms this.

Requirement 16: [MIXED] Primary: USER NEED — collaboration with multiple actors serves the quality of local preventive work and, through it, residents' wellbeing. Secondary: INTERNAL CONTROL — the Kommunebrev converts organizational discretion into a mandatory multi-actor collaborative structure, which serves systemic administrative coordination interests independent of individual user outcomes. The mandatory organizational structure is the internal control dimension; the outcomes of collaboration serve users. Justification: Kommunebrev 2025.

Requirement 17: [INTERNAL CONTROL] The requirement to produce a written preventive work plan is a documentary output obligation with no direct bearing on individual user case outcomes. Its function is administrative — it serves planning oversight, accountability to supervising bodies, and coordination documentation rather than the quality or fairness of service to any individual. The source instrument (inter-agency guidelines) frames this as a structural coordination output. In relation to sosialtjenesteloven § 12 users, this requirement serves system documentation, not user need. Justification: Retningslinjer for samarbeid mellom barnevernstjenesten og Nav-kontoret: "Kommunen skal utarbeide en plan for kommunens forebyggende arbeid." The plan is an administrative artifact.

Requirement 18: [MIXED] Primary: INTERNAL CONTROL (secondary) — the permissive suggestion to include cooperation structures in the preventive plan serves administrative documentation of organizational arrangements. Secondary: USER NEED (indirect) — if the plan is actually executed, documented cooperation structures may benefit users. The permissive character ("kan") and the administrative framing make the internal documentation purpose primary. Given purely permissive character, actual burden is minimal.

Requirement 19: [INTERNAL CONTROL] The suggestion to document system-level assessments in reports, circulars, or routines is a purely administrative documentation practice. It serves record-keeping and institutional memory functions. In relation to § 12 social services users, this requirement has no direct bearing on service quality or individual fairness. The source is a child welfare veileder; its purpose in that domain (documenting barnets beste assessments) is imported into a social services preventive work context where it serves only internal documentation purposes.

STEP 5 — TRANSACTION COST CHARACTERIZATION

Requirement 1: [USER NEED] — No transaction cost burden identified. The obligation to know living conditions is substantive and foundational; its discharge through casework contact is the baseline of social services work.

Requirement 2 (MIXED): The NAV office must institutionally participate in the municipality's broader preventive work. In practice: attending inter-agency planning meetings, contributing written input to municipal plans and strategies, reporting knowledge from casework to municipal planning processes, and coordinating participation across the office's existing workload. This burden falls primarily on the NAV leader, who in a small office must simultaneously handle casework, management, and institutional representation. This constitutes Reporting Overhead and Procedural Duplication (duplicating coordination that already occurs informally). The circular provides the framework but no guidance on how small offices are to manage this alongside mandatory service obligations.

Requirement 3: [USER NEED] — No transaction cost burden identified. Directing substantive attention is the core of professional social work judgment.

Requirement 4 (MIXED): The NAV office must systematically collect data on living conditions, organize it, and run it through an analytical procedure to produce a societal-level overview. In concrete terms: designated data collection on housing, employment, health, income, and social network conditions in the municipality; regular analytical reviews; production of documented outputs or reports summarizing developments; and the maintenance of a knowledge base informing planning. For a small office without dedicated analytical staff, this entire process falls on caseworkers and the NAV leader on top of case obligations. The mandatory two-step method was introduced without explicit statutory delegation. This constitutes Documentation Inflation. Since the circular provides the requirement but no operational framework for small-office discharge of this analytical obligation, caseworkers must comply with a methodology whose parameters are undefined in the primary normative instrument.

Requirement 5: [USER NEED] — No transaction cost burden identified. The conditional initiation duty is event-triggered and does not impose standing documentation or reporting obligations.

Requirement 6: [USER NEED] — No transaction cost burden identified. A prohibition on harmful conduct does not impose documentation or procedural overhead on caseworkers.

Requirement 7 (MIXED): Minor transaction cost. The permissive "bør" framing means no mandatory documentation of evidence base is required. However, the framing implies caseworkers should be able to articulate why specific preventive measures were chosen. In practice this may generate informal documentation habits. Given the permissive character, no significant burden identified.

Requirement 8: [USER NEED] — No transaction cost burden identified from the obligation itself. The burden of actually running preventive measures is a service delivery burden, not an internal control or documentation burden in the Sludge Audit sense.

Requirement 9 (MIXED): The mandatory dissemination of knowledge to specific institutional recipients requires: identifying relevant municipal bodies and voluntary organizations; preparing and transmitting information reports or briefings; maintaining documentation of what was communicated, to whom, and when (implied by the mandatory character); and following up on coordination outcomes. For a small NAV office, this is Reporting Overhead that operates alongside all other obligations. The circular provides the requirement but no framework for how to structure or document the dissemination process. Since the mandatory institutional targeting exceeds what the statute expressly requires, caseworkers operate under an obligation whose parameters are not fully grounded in the governing normative instrument.

Requirement 10: [USER NEED] — No transaction cost burden identified.

Requirement 11: [USER NEED] — No transaction cost burden identified.

Requirement 12 (USER NEED, but procedurally demanding): The mandatory accessibility obligation ("Det skal tas hensyn til") requires active consideration of diverse information needs in all communication activities. In practice: reviewing all communication materials for accessibility; ensuring translation or adapted formats where needed; and documenting or demonstrating that diverse needs were considered. This creates a procedural compliance layer on all information work. Classified as USER NEED, but with procedural overhead. No transaction cost burden assigned in the Sludge Audit sense — the obligation serves direct user accessibility — but the "must" character adds procedural weight to information tasks.

Requirement 13: [USER NEED] — No transaction cost burden identified. The obligation to ensure information reaches the public is substantively user-serving and does not generate internal reporting overhead as such.

Requirement 14 (MIXED): The municipality must conduct and potentially document an assessment of how best to communicate with cooperation partners. In concrete terms: a deliberate evaluation process; identification of relevant partners; assessment of

communication channels; and possible written documentation of the strategy or its rationale. This is Documentation Inflation occurring outside any circular framework — caseworkers must discharge an obligation that the primary normative instrument (R-35 § 12) does not address, meaning no guidance exists for what a sufficient assessment looks like or how extensively it must be documented.

Requirement 15: [USER NEED] — No transaction cost burden identified.

Requirement 16 (MIXED): The Kommunebrev requires the NAV office and municipality to collaborate with other actors in structured local preventive work. In concrete terms: establishing formal multi-actor collaborative structures (meetings, agreements, defined participation roles); maintaining those structures through ongoing coordination; documenting the existence and operation of the collaboration; and ensuring continuity across staff changes. For small offices, this formalizes coordination that already occurs informally, adding institutional overhead without service quality gains. This is Combined Burden: Structural Disproportionality (the requirement presupposes organizational capacity for formal multi-actor structures that small offices do not have) and Procedural Duplication (formalizing what informal proximity already accomplishes). This burden falls entirely outside the circular framework — caseworkers must comply with an obligation that R-35 § 12 does not address and for which no circular guidance exists.

Requirement 17 (INTERNAL CONTROL): The obligation to produce a formal written plan for preventive work requires: dedicated planning time (distinct from casework); a drafting and consultation process; formal approval and adoption within the municipality; ongoing maintenance and updating of the plan; and the plan's existence as a documentary artifact that can be presented to supervising bodies. In a small NAV office, all of this falls on the NAV leader, who must produce a strategic planning document while simultaneously discharging all frontline, management, and reporting obligations. This is Documentation Inflation combined with Structural Disproportionality. Critically, this burden falls entirely outside the circular framework — R-35 § 12 makes no mention of a written preventive work plan, meaning caseworkers and leaders must comply with a documentary obligation for which the primary normative instrument provides no guidance, no scope definition, and no format requirements.

Requirement 18 (MIXED): No significant transaction cost identified given purely permissive character.

Requirement 19 (INTERNAL CONTROL): No significant transaction cost identified given purely permissive character ("kan").

STEP 6 — CATALOG ENTRIES

REQUIREMENT ID: § 12 / REQ-01 **PROVISION TEXT:** Municipality shall become familiar with residents' living conditions, pay special attention to developments that may create or maintain social problems, and seek to identify preventive measures. **SOURCE**

INSTRUMENT: R-35, § 12 (statutory text reproduced and elaborated) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — statutory foundation in sosialtjenesteloven § 12, first paragraph **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — outreach and living conditions monitoring functions parallel Latent Driver 1 in the Anchor Document (dedicated monitoring roles cannot be sustained alongside mandatory desk service in small offices) **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. Foundational substantive obligation. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 12 / REQ-02 **PROVISION TEXT:** The NAV office has a duty to participate in the municipality's work on living conditions and social prevention. **SOURCE INSTRUMENT:** R-35, § 12 (3.12.1) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — grounded in statutory scheme and preparatory works **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — small offices' leaders must participate in municipal institutional processes alongside full casework loads; mirrors management overstretch findings in Anchor Document Cluster 2 **PURPOSE:** MIXED — primary USER NEED (protective purpose of NAV participation), secondary INTERNAL CONTROL (administrative allocation of institutional responsibility) **BURDEN DESCRIPTION:** NAV leader must attend municipal planning processes, contribute institutional knowledge, and report upward and across administrative structures — all on top of frontline obligations. Reporting Overhead and Procedural Duplication. **KILL LIST CLASSIFICATION:** Category C — Clarification: the room for maneuver on HOW this participation duty is discharged in small offices should be made explicit to reduce shadow binding as an obligation requiring full strategic planning engagement. **TRANSACTION COST CATEGORY:** Combined Burden (Reporting Overhead + Procedural Duplication)

REQUIREMENT ID: § 12 / REQ-03 **PROVISION TEXT:** Special attention shall be directed toward conditions significant for the socially disadvantaged, persons outside working life, and the upbringing conditions of children and young people. **SOURCE INSTRUMENT:** R-35, § 12 (3.12.1) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — classified as substantive legal obligation; dictates direction of statutory attention **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO — substantive direction of attention; scale-neutral **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 12 / REQ-04 **PROVISION TEXT:** The NAV office must systematize and analyze knowledge about residents' living conditions to gain an overview of developments at the societal level. **SOURCE INSTRUMENT:** R-35, § 12 (3.12.2.1) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — converts open how-discretion ("become familiar") into a mandatory two-step analytical method without explicit statutory delegation for that specific methodology **DOUBLE AUTHORITY GAP:** NO

CATEGORY ERROR: NO **SCALE FLAG:** YES — systematic data collection and societal-level analysis presuppose analytical capacity or back-office support that small offices cannot sustain alongside frontline obligations; mirrors [D] and [K] mechanism findings in Anchor Document. The circular imposes a mandatory method without providing a framework for small-office discharge. **PURPOSE:** MIXED — primary INTERNAL CONTROL (produces administrative knowledge overview), secondary USER NEED (enables better prevention) **BURDEN DESCRIPTION:** Caseworkers and NAV leader must systematically collect, organize, and run knowledge about living conditions through a two-step analytical procedure — producing a societal-level overview — on top of regular casework obligations, without dedicated analytical staff and without circular guidance for how to operationalize this at small scale. Documentation Inflation. **KILL LIST CLASSIFICATION:** Category B — Status Change: the imperative "must" ("må") imposes a specific analytical methodology without clear statutory delegation. Reformulation to permissive language would restore local discretion to determine how knowledge about living conditions is organized and processed. **TRANSACTION COST CATEGORY:** Documentation Inflation

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REQUIREMENT ID: § 12 / REQ-05 **PROVISION TEXT:** If the NAV office becomes aware of conditions that may create or sustain social problems, it has a responsibility to initiate the establishment of preventive measures in the municipality. **SOURCE INSTRUMENT:** R-35, § 12 (3.12.2.1) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — direct operationalization of the conditional statutory duty; classified as substantive legal obligation **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO — event-triggered conditional; scale does not affect when awareness activates the duty **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 12 / REQ-06 **PROVISION TEXT:** Outreach work must not be conducted in a manner that feels like external interference and has a violating effect. **SOURCE INSTRUMENT:** R-35, § 12 (3.12.2.1) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** NO — the circular introduces an absolute prohibition ("skal imidlertid ikke drives") on how-discretion regarding outreach methods without direct statutory authorization in § 12. The statute grants municipalities open discretion over methods of outreach. **DOUBLE AUTHORITY GAP:** NO (circular authority present) **CATEGORY ERROR:** NO **SCALE FLAG:** NO — the prohibition is content-neutral and scale-neutral **PURPOSE:** USER NEED — protects the dignity and legal security of community members subject to state outreach **BURDEN DESCRIPTION:** No transaction cost burden identified. This is a prohibition on harmful conduct, not a documentation or reporting obligation. The absence of statutory authority means the absolute character of the prohibition is a legal authority concern, not a transaction cost concern. **KILL LIST CLASSIFICATION:** Category B — Status Change: the prohibition uses absolute mandatory language ("shall not") without statutory authorization in § 12. Reformulation to guidance language (e.g., "outreach should be conducted with sensitivity to how it may be perceived") would restore local professional

discretion while preserving the protective purpose. **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 12 / REQ-07 **PROVISION TEXT:** Finding preventive measures should be based on local experience from social work and on general and research-based knowledge about causes of social problems. **SOURCE INSTRUMENT:** R-35, § 12 (3.12.2.2) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — permissive "bør" language; no legal gap **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO — research-based guidance is accessible regardless of office size; permissive character **PURPOSE:** MIXED — primary USER NEED (better quality measures), secondary INTERNAL CONTROL (implicit accountability for evidence-based decision-making) **BURDEN DESCRIPTION:** No significant transaction cost burden. The permissive framing means no mandatory documentation of evidence base is required. Minor informal documentation habits may arise in practice but do not constitute a Sludge burden. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 12 / REQ-08 **PROVISION TEXT:** The NAV office shall have preventive measures that seek to facilitate the development and strengthening of social community and solidarity in the local environment. **SOURCE INSTRUMENT:** R-35, § 12, ledd 2 (3.12.2.2) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — anchored in sosialtjenesteloven § 12, second paragraph; classified as substantive legal obligation **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** YES — maintaining an active portfolio of preventive social measures parallels the Anchor Document's Latent Driver E (outreach) and activity portfolio findings for § 20a: dedicated preventive roles cannot be sustained alongside mandatory desk-bound case processing in small offices. The Anchor Document notes: "field-based outreach roles cannot coexist with mandatory desk-bound case processing in small offices" — structurally identical to the § 12 preventive measures obligation. **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified from the obligation itself. The service delivery burden of running preventive measures is not a Sludge burden in the internal control/documentation sense. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 12 / REQ-09 **PROVISION TEXT:** Knowledge must be disseminated to other municipal bodies and local voluntary organizations to contribute to a comprehensive service offering and coordinated solutions. **SOURCE INSTRUMENT:** R-35, § 12 (3.12.2.3) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — converts the open how-discretion regarding "spreading knowledge" into a mandatory duty to inform specific fixed institutional categories. The statute does not specify mandatory institutional recipients; the circular adds this specificity with imperative force. **DOUBLE AUTHORITY GAP:** NO (circular authority present) **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — mandatory institutionalized knowledge dissemination to multiple fixed recipients mirrors [C]

Coordination Infrastructure findings in the Anchor Document: "formalized inter-agency coordination produces overhead calibrated for larger, siloed bureaucracies." For small offices coordinating through personal contact, this formalizes what occurs naturally. **PURPOSE:** MIXED — primary USER NEED (coordinated services benefit users), secondary INTERNAL CONTROL (mandatory reporting to specific institutional recipients serves system coherence independent of individual user outcomes) **BURDEN DESCRIPTION:** Must identify relevant municipal bodies and voluntary organizations; prepare and transmit knowledge reports or briefings; and maintain some record of dissemination activity. This Reporting Overhead duplicates informal coordination already occurring through personal contact in small offices. The mandatory specification of recipients was added beyond what the statute requires. **KILL LIST CLASSIFICATION:** Category B — Status Change: the mandatory specification of institutional recipients ("skal formidles til") exceeds what the statute expressly requires. Reformulation to permissive language would preserve the goal while restoring local discretion over which bodies receive which knowledge in what form. **TRANSACTION COST CATEGORY:** Reporting Overhead

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REQUIREMENT ID: § 12 / REQ-10 **PROVISION TEXT:** Information must also be given to the municipality's residents generally, and to the socially disadvantaged specifically, to contribute to individuals being able to safeguard their interests and know the service offering. **SOURCE INSTRUMENT:** R-35, § 12 (3.12.2.3) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — direct operationalization of § 12, third paragraph ("spre kunnskap om sosiale forhold og tjenester i kommunen") with identical imperative force **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO — public communication is a general function not presupposing specialist capacity **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 12 / REQ-11 **PROVISION TEXT:** Information activities should be adapted to local conditions and provided in various forms and channels. **SOURCE INSTRUMENT:** R-35, § 12 (3.12.2.3) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — permissive "bør"; preserves how-discretion **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO — locally adaptive by design; scale does not restrict access to multiple communication forms **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 12 / REQ-12 **PROVISION TEXT:** Consideration must be given to people with varying needs for adapted information. **SOURCE INSTRUMENT:** R-35, § 12 (3.12.2.3) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — introduces a mandatory accessibility obligation ("Det skal tas hensyn til") in an area where the statute grants open how-discretion over communication methods; lacks direct statutory

authorization for this specific obligation **DOUBLE AUTHORITY GAP:** NO (circular authority present) **CATEGORY ERROR:** NO **SCALE FLAG:** NO — accessibility considerations apply to all offices regardless of size **PURPOSE:** USER NEED — direct accessibility and inclusion obligation for users with disabilities, language needs, or other requirements **BURDEN DESCRIPTION:** No transaction cost burden identified in the Sludge Audit sense. The obligation serves direct user accessibility and imposes no internal reporting or documentation overhead as such. The PARTIAL statutory authority is noted but does not generate transaction cost in itself. **KILL LIST CLASSIFICATION:** Category C — Clarification: the mandatory ("skal") character exceeds what the statute directly authorizes; the room for maneuver regarding which adaptations are required, in what circumstances, and to what standard should be made explicit. **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 12 / REQ-13 **PROVISION TEXT:** The NAV office must ensure that information about the social services reaches the population. **SOURCE INSTRUMENT:** Veileder for økonomisk stønad 2022 **CIRCULAR AUTHORITY:** ABSENT — no textual presence in R-35 § 12. This requirement operates entirely outside the circular framework. Consequence: caseworkers must comply with an obligation that the primary normative instrument governing their § 12 work does not address. No circular guidance exists for how to discharge, measure, or document this obligation. **LEGAL AUTHORITY:** YES — direct operationalization of the statutory duty; no excess beyond the statute **DOUBLE AUTHORITY GAP:** NO (statutory authority present) **CATEGORY ERROR:** NO **SCALE FLAG:** NO specific scale flag from Anchor Document. Content mirrors baseline communication duty. **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified in itself. However, the absence of circular authority means the operational frame for this obligation is entirely undefined in R-35, creating interpretive uncertainty for caseworkers who must determine compliance without guidance from the primary normative instrument. **KILL LIST CLASSIFICATION:** Category C — Clarification: this requirement operates outside the circular framework; the room for maneuver and the relationship between this veileder obligation and the circular's own provisions should be made explicit. **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 12 / REQ-14 **PROVISION TEXT:** The municipality must assess how best to inform relevant cooperation partners about NAV's services. **SOURCE INSTRUMENT:** Veileder for økonomisk stønad 2022 **CIRCULAR AUTHORITY:** ABSENT — no textual presence in R-35 § 12. Consequence: caseworkers must comply with a procedural assessment obligation that the primary normative instrument does not address. **LEGAL AUTHORITY:** YES — channels rather than eliminates how-discretion; no excess beyond statutory purpose **DOUBLE AUTHORITY GAP:** NO (statutory authority present) **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — conducting and documenting an assessment of partner communication strategy adds procedural overhead to small offices already stretched across mandatory obligations. This burden is unsupported by the circular framework. **PURPOSE:** MIXED — primary USER NEED (better partner communication serves users), secondary INTERNAL CONTROL (deliberate assessment process serves

administrative verification) **BURDEN DESCRIPTION:** Must conduct a deliberate evaluation of partner communication strategies, identify relevant partners, and potentially document the assessment rationale. This is Documentation Inflation occurring entirely outside the circular framework — caseworkers must comply without any guidance from the primary normative instrument on what a sufficient assessment looks like. **KILL LIST CLASSIFICATION:** Category C — Clarification: the room for maneuver and the relationship between this veileder requirement and circular-based obligations should be made explicit; the absence of circular authority creates an undefined compliance burden. **TRANSACTION COST CATEGORY:** Documentation Inflation

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REQUIREMENT ID: § 12 / REQ-15 **PROVISION TEXT:** The municipality must direct its efforts especially toward vulnerable groups to seek to prevent these persons from ending up in difficult life situations. **SOURCE INSTRUMENT:** Veileder for økonomisk stønad 2022 **CIRCULAR AUTHORITY:** ABSENT — no textual presence in R-35 § 12. Consequence: the substantive targeting obligation operates outside the circular framework. **LEGAL AUTHORITY:** YES — classified as substantive legal obligation; directly continuous with § 12 statutory purpose **DOUBLE AUTHORITY GAP:** NO (statutory authority present) **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — directed outreach toward vulnerable groups implies dedicated outreach capacity; parallels Latent Driver 1 in the Anchor Document (outreach work). The requirement has no circular authority, meaning any scale-related burden it imposes is unsupported by the circular framework. **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified in the Sludge Audit sense. The substantive targeting obligation is user-serving. However, the absence of circular authority means no framework exists within R-35 for discharging this obligation. **KILL LIST CLASSIFICATION:** Category C — Clarification: this veileder-sourced obligation duplicates and slightly exceeds what the circular explicitly states; the relationship between this instrument and the circular should be made explicit, particularly given the absence of circular authority. **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 12 / REQ-16 **PROVISION TEXT:** The NAV office and municipality shall, together with other actors, contribute to the municipality's local preventive work. **SOURCE INSTRUMENT:** Kommunebrev 2025 **CIRCULAR AUTHORITY:** ABSENT — no textual presence in R-35 § 12. Consequence: the mandatory multi-actor collaboration structure imposed by this Kommunebrev operates entirely outside the circular framework. Caseworkers must comply with an organizational obligation that the primary normative instrument does not address. **LEGAL AUTHORITY:** PARTIAL — converts broad how-discretion into a mandatory specific organizational method of multi-actor collaboration. The statute contemplates inter-agency cooperation (cross-references to §§ 13, 14) but does not mandate a specific collaborative structure of this kind. **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT; statutory authority PARTIAL. **CATEGORY ERROR:** NO **SCALE FLAG:** YES — mandatory formalized multi-actor collaborative structures directly mirror [C] Coordination Infrastructure findings in the Anchor Document: "the requirement for written inter-agency agreements produces overhead calibrated for larger, siloed bureaucracies." Small offices coordinate naturally through informal personal contact;

formalizing this into mandatory multi-actor structures imposes overhead without service quality gains. Since circular authority is absent, this scale-related burden falls entirely without regulatory foundation. **PURPOSE:** MIXED — primary USER NEED (collaboration serves preventive work quality for residents), secondary INTERNAL CONTROL (mandatory organizational structure serves administrative system coordination independently of individual user outcomes) **BURDEN DESCRIPTION:** Must establish and maintain formal multi-actor collaborative structures — meetings, agreements, defined participation roles — and document their operation. In small offices, this formalizes what informal proximity already accomplishes, adding Structural Disproportionality and Procedural Duplication. The double authority gap means caseworkers operate under an obligation that neither the statute nor the circular clearly authorizes at this level of organizational specificity, with no circular guidance for what compliance looks like. **KILL LIST CLASSIFICATION:** Category B — Status Change: this Kommunebrev uses mandatory language ("skal... bidra inn i kommunens forebyggende arbeid") to convert broad organizational discretion into a required multi-actor collaborative structure without circular or clear statutory backing. Reformulation to permissive language would restore local discretion while preserving the collaborative purpose. **TRANSACTION COST CATEGORY:** Combined Burden (Structural Disproportionality + Procedural Duplication)

REQUIREMENT ID: § 12 / REQ-17 **PROVISION TEXT:** The municipality shall prepare a written plan for the municipality's preventive work. **SOURCE INSTRUMENT:** Retningslinjer for samarbeid mellom barnevernstjenesten og Nav-kontoret **CIRCULAR AUTHORITY:** ABSENT — no textual presence in R-35 § 12. Consequence: the plan-production obligation operates entirely outside the circular framework; no circular guidance exists for its scope, format, content, or updating requirements. **LEGAL AUTHORITY:** NO — mandates a specific documentary output where the law grants open latitude over the form and organization of preventive work. No statutory basis for requiring a formal written plan as such. **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT; statutory authority NO. **CATEGORY ERROR:** YES — the source instrument (guidelines for cooperation between child welfare services and NAV) belongs primarily to the domain of child welfare law and inter-agency coordination, not to sosialtjenesteloven § 12. The plan requirement is imported into the § 12 normative framework from a document whose legal home and purpose is child welfare coordination. In relation to § 12 social services users, this represents a category error: an obligation from a different legal domain is being applied without grounding in the governing social services statutory framework. **SCALE FLAG:** YES — producing a formal written preventive work plan presupposes dedicated planning time, drafting capacity, approval structures, and ongoing maintenance. This directly mirrors the Anchor Document's Documentation Apparatus ([D] mechanism) findings: the dominant source of municipal non-compliance is not failure to deliver services but failure to translate delivery into formal administrative records. For a small office, the plan requirement imposes a documentary burden with no circular framework to guide it and no statutory basis to justify it. **PURPOSE:** INTERNAL CONTROL — the written plan serves administrative documentation and oversight purposes; it enables supervising bodies and coordinating agencies to verify the existence of preventive planning. It has no direct bearing on individual user case outcomes. **BURDEN DESCRIPTION:** NAV leader and municipal officials must dedicate time to drafting a strategic planning document, coordinate its development with relevant actors, have it

formally adopted, maintain and update it, and ensure its availability to supervising bodies. This falls on small NAV leaders who also carry full frontline and management obligations. The double authority gap means the entire burden falls outside any framework the circular or statute provides — compliance parameters are undefined. Documentation Inflation combined with Structural Disproportionality. **KILL LIST CLASSIFICATION:** Category A — Removal: this requirement lacks statutory authority in sosialtjenesteloven § 12, derives from a different legal domain (child welfare cooperation guidelines), and operates entirely outside the circular framework. It is a candidate for repeal from the § 12 social services normative framework. Its substantive purpose — that municipalities plan preventive work — is already served by the statutory duty itself and by other planning instruments (Plan- og bygningsloven, kommuneplan). The specific requirement to produce a written plan as a documentary output is a sub-legal construction without legal foundation. **TRANSACTION COST CATEGORY:** Combined Burden (Documentation Inflation + Structural Disproportionality)

REQUIREMENT ID: § 12 / REQ-18 **PROVISION TEXT:** Cooperation structures, arenas, and any routines for cooperation may be included in the municipality's plan for preventive work. **SOURCE INSTRUMENT:** Retningslinjer for samarbeid mellom barnevernstjenesten og Nav-kontoret **CIRCULAR AUTHORITY:** ABSENT — no textual presence in R-35 § 12 **LEGAL AUTHORITY:** YES — purely permissive suggestion ("kan") placing no restriction on how-discretion **DOUBLE AUTHORITY GAP:** NO (statutory authority present through permissive character) **CATEGORY ERROR:** PARTIAL — source instrument belongs to child welfare cooperation domain. The permissive character limits harm, but the cross-domain origin of the suggestion is noted. **SCALE FLAG:** NO — permissive; no mandatory burden **PURPOSE:** MIXED — indirect USER NEED (if plan is executed, documented cooperation may benefit users), secondary INTERNAL CONTROL (administrative documentation of organizational arrangements). Permissive character makes actual burden minimal. **BURDEN DESCRIPTION:** No significant transaction cost burden identified given purely permissive character ("kan"). The requirement is an operational suggestion that completely preserves how-discretion. **KILL LIST CLASSIFICATION:** No Kill List Action — purely permissive; however, the absence of circular authority and the cross-domain source warrant noting as a transparency concern. **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 12 / REQ-19 **PROVISION TEXT:** Where an assessment has been made in connection with development of new systems, investigations, or professional development activities, it may be documented as part of reports, in circular work, routines, and similar. **SOURCE INSTRUMENT:** Barnets beste — veileder **CIRCULAR AUTHORITY:** ABSENT — no textual presence in R-35 § 12 **LEGAL AUTHORITY:** YES — purely permissive suggestion ("kan") preserving all how-discretion **DOUBLE AUTHORITY GAP:** NO (permissive character; no statutory conflict) **CATEGORY ERROR:** YES — "Barnets beste" is a legal principle anchored in barnekonvensjonen Article 3 and developed through child welfare law (barnevernloven). This veileder's home domain is child welfare law, not sosialtjenesteloven § 12. Its application to § 12 preventive work documentation introduces a cross-domain normative suggestion without explicit grounding in the social services statutory

framework. In relation to § 12 social services users, this represents a category error. **SCALE FLAG:** NO — purely permissive; no mandatory burden **PURPOSE:** INTERNAL CONTROL — purely administrative documentation suggestion; serves record-keeping and institutional memory functions. No direct bearing on service quality or individual fairness for § 12 users. **BURDEN DESCRIPTION:** No significant transaction cost burden identified given purely permissive character. However, the category error means the normative expectation embedded in this suggestion — that barnets beste assessments should be documented in social services preventive work — introduces a cross-domain obligation whose legal basis and scope are undefined within the § 12 framework. **KILL LIST CLASSIFICATION:** Category C — Clarification: the category error should be made explicit. The room for maneuver should be clarified — specifically, that this is a permissive suggestion from a child welfare instrument and does not impose binding obligations under sosialtjenesteloven § 12. The shadow-binding risk of an apparently authoritative veileder's "may" language should be addressed. **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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CLOSING COMPARATIVE NOTE

Total requirements identified starting from Process Inflation Findings: 19

Requirements visible starting from the circular alone: 12 (PROC-REQ-12.1 through PROC-REQ-12.12)

Requirements invisible from the circular alone: 7 (37% of the operative normative framework for § 12)

Double authority gaps identified: 2 — Req 16 (Kommunebrev 2025: circular authority absent, statutory authority partial) — Req 17 (Retningslinjer for samarbeid: circular authority absent, statutory authority none)

Category errors identified: 2 — Req 17 (source instrument belongs to child welfare cooperation domain; plan requirement imported without social services statutory basis) — Req 19 (source instrument is child welfare veileder; barnets beste principle applied to § 12 without grounding in sosialtjenesteloven)

(Req 18 is flagged as PARTIAL category error given permissive character and same source instrument as Req 17.)

Kill List breakdown: — **Category A — Removal:** 1 (Req 17: lacks statutory authority, category error, operates entirely outside circular framework) — **Category B — Status Change:** 4 (Req 4: mandatory analytical method; Req 6: absolute prohibition without statutory authority; Req 9: mandatory specification of institutional recipients; Req 16: mandatory multi-actor collaboration structure from Kommunebrev) — **Category C — Clarification:** 6 (Req 2: room for maneuver on participation; Req 12: mandatory character of accessibility obligation; Req 13: veileder obligation outside circular; Req 14: veileder procedural assessment outside circular; Req 15: veileder substantive obligation outside

circular; Req 19: category error and permissive character) — **No Kill List Action:** 8 (Req 1, 3, 5, 7, 8, 10, 11, 18)

Primary transaction cost categories by frequency:

1. No Transaction Cost Identified: 12 requirements (dominant)
2. Documentation Inflation: 2 (Req 4, Req 14)
3. Combined Burden: 2 (Req 2: Reporting Overhead + Procedural Duplication; Req 16 and 17: Documentation Inflation + Structural Disproportionality)
4. Reporting Overhead: 1 (Req 9)

Analytical synthesis for main report:

The § 12 audit produces a different transaction cost profile than the §§ 17–19 audit findings in the Anchor Document. The dominant finding here is not documentation apparatus in the narrow casework sense but rather the layering of planning, analytical, and coordination obligations from sub-legal instruments operating entirely outside the circular. The two double authority gaps — both carrying their full burden outside any circular framework — are the structurally most significant findings. Req 17 in particular represents a clean Category A removal candidate: a documentary plan requirement imported from child welfare cooperation guidelines, lacking statutory basis, carrying Structural Disproportionality and Documentation Inflation costs in small offices, and providing no direct user benefit that is not already served by the substantive statutory duty itself.

The 37% invisibility rate of the normative framework from the circular alone confirms the methodological necessity of using the Process Inflation Findings as the primary reference document for this audit. Seven operative obligations — including the single most legally problematic one — would have been entirely undetected by any analysis anchored in R-35 alone.

SLUDGE AUDIT — § 13 SAMARBEID MED ANDRE DELER AV FORVALTNINGEN

PRELIMINARY METHODOLOGICAL NOTE

Visibility comparison:

Starting from the **Process Inflation Findings** (Reference Document), **20 requirements** are enumerable across § 13 — 10 procedural/process requirements (PROC-REQ-13.1 through 13.13) and 7 documentation requirements (DOC-REQ-13.1 through 13.7), with requirements 10 and 14 representing a near-identical formulation appearing twice.

Starting from the **circular paragraph alone** (Context Document), only **12 requirements** would be visible: requirements 1–10 and DOC-REQ-13.1 (14) and DOC-REQ-13.2 (15), all sourced from R-35 Para 13.

Eight requirements have no textual presence in the circular at all:

Requirement	Source Instrument	Instrument Category
PROC-REQ-13.11 (Req 11)	Retningslinjer for samarbeid mellom barnevernstjenesten og Nav-kontoret	(e) Another sub-legal instrument (retningslinjer)
PROC-REQ-13.12 (Req 12)	Kommunebrev 2025	(a) Kommunebrev
PROC-REQ-13.13 (Req 13)	Nasjonal veileder for samarbeidet mellom kriminalomsorgen og Nav	(b) Veileder
DOC-REQ-13.3 (Req 16)	Nasjonal veileder for samarbeidet mellom kriminalomsorgen og Nav	(b) Veileder
DOC-REQ-13.4 (Req 17)	Retningslinjer for samarbeid mellom barnevernstjenesten og Nav-kontoret	(e) Another sub-legal instrument
DOC-REQ-13.5 (Req 18)	Nasjonal veileder for samarbeidet mellom kriminalomsorgen og Nav	(b) Veileder
DOC-REQ-13.6 (Req 19)	Nasjonal veileder for samarbeidet mellom kriminalomsorgen og Nav	(b) Veileder
DOC-REQ-13.7 (Req 20)	Veileder-til-partnerskapsavtalen	(b) Veileder

Structural significance: This 8:12 invisibility ratio — 40% of operative requirements lying entirely outside the primary normative instrument — establishes that the circular alone is an incomplete representation of the normative load imposed on caseworkers and NAV leaders under § 13. Any analysis beginning from the circular paragraph would structurally undercount the requirement set, misrepresent the authority structure, and fail to identify category errors where requirements from external legal domains have migrated into the § 13 framework without statutory authorization. The Process Inflation Findings are therefore the necessary starting point.

STEP 1 — IDENTIFICATION OF ALL REQUIREMENTS

Requirement 1 (PROC-REQ-13.1)

- **Obligation:** Kommunen i arbeids- og velferdsforvaltningen shall participate in ensuring that social considerations are addressed by other public bodies relevant to achieving the purposes of the Act.
- **Source instrument:** R-35 Para 13 (circular)
- **Explicit/implicit:** Explicit
- **Circular presence:** PRESENT — §13 statutory text, reproduced verbatim in circular section 3.13.1 and 3.13.2.1

Requirement 2 (PROC-REQ-13.2)

- **Obligation:** Kommunen shall cooperate with other sectors, administrative levels, and service providers when cooperation is necessary to give a person holistic and coordinated services, and when this can contribute to resolving statutory tasks.
- **Source instrument:** R-35 Para 13 (circular)
- **Explicit/implicit:** Explicit
- **Circular presence:** PRESENT — statutory text and 3.13.2.2

Requirement 3 (PROC-REQ-13.3)

- **Obligation:** When deficiencies in services owed by other bodies to persons with special needs are identified, Kommunen shall if necessary raise the matter with the responsible party.
- **Source instrument:** R-35 Para 13 (circular)
- **Explicit/implicit:** Explicit
- **Circular presence:** PRESENT — statutory text second paragraph, elaborated at 3.13.2.3

Requirement 4 (PROC-REQ-13.4)

- **Obligation:** Where there is unclarity or disagreement about where responsibility lies, Kommunen shall seek to clarify the relationship.
- **Source instrument:** R-35 Para 13 (circular)
- **Explicit/implicit:** Explicit

- **Circular presence:** PRESENT — statutory text and 3.13.2.3

Requirement 5 (PROC-REQ-13.5)

- **Obligation:** When needed, the municipality shall determine which municipal service provider shall manage coordination.
- **Source instrument:** R-35 Para 13 (circular)
- **Explicit/implicit:** Explicit
- **Circular presence:** PRESENT — statutory text third paragraph and 3.13.2.4

Requirement 6 (PROC-REQ-13.6)

- **Obligation:** When the service recipient has children, Nav must assess whether cooperation with service providers assisting the child is necessary for the child to receive a holistic and coordinated service offering.
- **Source instrument:** R-35 Para 13 (circular elaboration in 3.13.2.2)
- **Explicit/implicit:** Explicit in circular; IMPLICIT in statute (statute addresses "en person," not the person's children)
- **Circular presence:** PRESENT in circular; ABSENT from statutory text

Requirement 7 (PROC-REQ-13.7)

- **Obligation:** Nav must make a specific professional assessment covering: which service providers to cooperate with, what to cooperate about, how extensive and long the cooperation will be, and how cooperation shall be organized in practice.
- **Source instrument:** R-35 Para 13 (circular elaboration in 3.13.2.2)
- **Explicit/implicit:** Explicit in circular as a four-element mandatory checklist; implicit in statute (statute grants open judgment on cooperation)
- **Circular presence:** PRESENT — circular substitutes open statutory judgment with fixed four-element framework

Requirement 8 (PROC-REQ-13.8)

- **Obligation:** If direct contact with the agency does not yield satisfactory results, Nav shall bring the matter before superior authorities in the municipality.
- **Source instrument:** R-35 Para 13 (circular elaboration in 3.13.2.3)
- **Explicit/implicit:** Explicit in circular as unconditional mandatory step; implicit in statute (statute uses "om nødvendig" — if necessary)
- **Circular presence:** PRESENT — but circular shadow-binds the statutory discretionary qualifier

Requirement 9 (PROC-REQ-13.9)

- **Obligation:** All involved services cooperating on a person's follow-up must clarify which specific service shall coordinate the service offering.
- **Source instrument:** R-35 Para 13 (circular elaboration in 3.13.2.4)
- **Explicit/implicit:** Explicit in circular as unqualified joint obligation; implicit in statute (statute grants conditional power only to the municipality, not a joint obligation on all services)

- **Circular presence:** PRESENT — but circular shifts statutory structure fundamentally

Requirement 10 (PROC-REQ-13.10 / DOC-REQ-13.1)

- **Obligation:** To share confidential information with others, a statutory basis or consent permitting this must exist.
- **Source instrument:** R-35 Para 13 (circular, repeated at multiple points)
- **Explicit/implicit:** Explicit
- **Circular presence:** PRESENT — repeated as a baseline condition throughout sections 3.13.2.2, 3.13.2.4

Requirement 11 (PROC-REQ-13.11)

- **Obligation:** Both the child welfare service and Nav must investigate whether an individual plan already exists and potentially act as a contributor to it.
- **Source instrument:** Retningslinjer for samarbeid mellom barnevernstjenesten og Nav-kontoret
- **Explicit/implicit:** Explicit in retningslinjer
- **Circular presence:** ABSENT — no textual presence in R-35 Para 13

Requirement 12 (PROC-REQ-13.12)

- **Obligation:** Nav has a duty to participate in the municipality's housing social work (boligsosiale arbeid).
- **Source instrument:** Kommunebrev 2025
- **Explicit/implicit:** Explicit in Kommunebrev; not present in § 13 text or circular
- **Circular presence:** ABSENT — no textual presence in R-35 Para 13

Requirement 13 (PROC-REQ-13.13)

- **Obligation:** Nav shall assess how information in an institutional message (institusjonsmelding) from the correctional service affects any potential benefits from Nav.
- **Source instrument:** Nasjonal veileder for samarbeidet mellom kriminalomsorgen og Nav
- **Explicit/implicit:** Explicit in veileder
- **Circular presence:** ABSENT — no textual presence in R-35 Para 13

Requirement 14 (DOC-REQ-13.1)

- **Obligation:** To share confidential information with others, a statutory basis or consent must exist. (Substantively identical to Requirement 10; listed separately in Process Inflation Findings as a documentation-category requirement.)
- **Source instrument:** R-35 Para 13 (circular)
- **Explicit/implicit:** Explicit
- **Circular presence:** PRESENT

Requirement 15 (DOC-REQ-13.2)

- **Obligation:** Cooperation can be anchored in cooperation agreements or through regular cross-sectoral meetings, working forms, and routines.
- **Source instrument:** R-35 Para 13 (circular, section 3.13.2.5)
- **Explicit/implicit:** Explicit; formulated permissively ("kan forankres")
- **Circular presence:** PRESENT — permissive formulation

Requirement 16 (DOC-REQ-13.3)

- **Obligation:** Consent need not be in writing but must be documentable. Both the correctional service and welfare services are responsible for obtaining, archiving, and journaling consent in their own systems.
- **Source instrument:** Nasjonal veileder for samarbeidet mellom kriminalomsorgen og Nav
- **Explicit/implicit:** Explicit in veileder
- **Circular presence:** ABSENT — no textual presence in R-35 Para 13

Requirement 17 (DOC-REQ-13.4)

- **Obligation:** Express consent requires that the person has taken an active step; consent should be given in writing.
- **Source instrument:** Retningslinjer for samarbeid mellom barnevernstjenesten og Nav-kontoret
- **Explicit/implicit:** Explicit in retningslinjer
- **Circular presence:** ABSENT — no textual presence in R-35 Para 13

Requirement 18 (DOC-REQ-13.5)

- **Obligation:** To facilitate inter-agency cooperation, informed and written consent must be obtained from inmates/convicts before exchanging confidential information, pursuant to forvaltningsloven § 13a nr. 1.
- **Source instrument:** Nasjonal veileder for samarbeidet mellom kriminalomsorgen og Nav
- **Explicit/implicit:** Explicit in veileder; the instrument itself cites forvaltningsloven, not sosialtjenesteloven §13
- **Circular presence:** ABSENT

Requirement 19 (DOC-REQ-13.6)

- **Obligation:** An individual plan (IP) must contain a designation of who is responsible for preparing the plan and who is responsible for securing coordination and progress, pursuant to Forskrift om individuell plan.
- **Source instrument:** Nasjonal veileder for samarbeidet mellom kriminalomsorgen og Nav
- **Explicit/implicit:** Explicit in veileder; legally rooted in IP Regulation, not in §13
- **Circular presence:** ABSENT

Requirement 20 (DOC-REQ-13.7)

- **Obligation:** When entering a partnership agreement containing delegation provisions, the delegation decision must be attached as an annex. The decision must describe which authority is delegated to the joint leader and whether the leader shall hold executive data-processing responsibility under personopplysningsloven. It must specify which tasks may be performed by employees of the other party.
- **Source instrument:** Veileder-til-partnerskapsavtalen
- **Explicit/implicit:** Explicit in veileder
- **Circular presence:** ABSENT

STEP 2 — LEGAL AUTHORITY CHECK

Requirement 1

- Direction 1 (Circular): YES
- Direction 2 (Statutory): YES — directly reproduced from § 13 first paragraph, sosialtjenesteloven
- Double authority gap: NO
- Category error: NO

Requirement 2

- Direction 1 (Circular): YES
- Direction 2 (Statutory): YES — directly reproduced from § 13 second paragraph first sentence
- Double authority gap: NO
- Category error: NO

Requirement 3

- Direction 1 (Circular): YES
- Direction 2 (Statutory): YES — § 13 second paragraph second sentence; circular at 3.13.2.3 accurately elaborates
- Double authority gap: NO
- Category error: NO

Requirement 4

- Direction 1 (Circular): YES
- Direction 2 (Statutory): YES — § 13 second paragraph third sentence ("søke å klargjøre forholdet"); circular reproduces statutory effort-based qualifier without escalation
- Note: The Process Inflation Findings confirm no legal gap for this requirement. No shadow-binding found.
- Double authority gap: NO
- Category error: NO

Requirement 5

- Direction 1 (Circular): YES
- Direction 2 (Statutory): YES — § 13 third paragraph; circular at 3.13.2.4 accurately reproduces conditionality ("ved behov")
- Double authority gap: NO
- Category error: NO

Requirement 6

- Direction 1 (Circular): YES — present at 3.13.2.2
- Direction 2 (Statutory): PARTIAL — § 13 second paragraph authorizes cooperation for individual recipients ("en person"). The circular extends this to a mandatory assessment trigger covering that person's children. As the Process Inflation Findings note: "The law targets services for the individual recipient ('en person'), while the circular extends this to a mandatory assessment trigger encompassing the person's children, which lacks clear express textual basis in § 13." The child welfare veileder cross-referenced in 3.13.2.2 provides context but does not supply a § 13 anchor.
- Applicable finding: PROC-REQ-13.6 — "Legal Gap: The law targets services for the individual recipient."
- Double authority gap: NO (circular authority present)
- Category error: NO — remains within social services domain, but represents circular expansion beyond statutory text

Requirement 7

- Direction 1 (Circular): YES — present at 3.13.2.2
- Direction 2 (Statutory): PARTIAL — § 13 second paragraph grants open professional judgment on how to assess and organize cooperation. The circular substitutes this with a fixed, mandatory four-element checklist ("må gjøre en konkret faglig vurdering av hvilke... hva... hvor... hvordan..."). As the Process Inflation Findings state: "the circular substitutes this with a fixed, mandatory four-element checklist that shadow-binds the granted how-discretion and evidence-discretion."
- Applicable finding: PROC-REQ-13.7 — shadow-binding of statutory discretion through circular checklist
- Double authority gap: NO (circular authority present, albeit creating the problem)
- Category error: NO

Requirement 8

- Direction 1 (Circular): YES — present at 3.13.2.3
- Direction 2 (Statutory): PARTIAL — § 13 second paragraph second sentence uses "om nødvendig" (if necessary), preserving discretion. The circular at 3.13.2.3 replaces this with an unconditional mandatory two-step escalation ("skal Nav-kontoret bringe saken frem for overordnede myndigheter"). As the Process Inflation Findings state: "The law's discretionary 'om nødvendig' duty to escalate is shadow-bound and replaced by the circular with an unconditional, mandatory two-step escalation sequence not found in the statute."
- Applicable finding: PROC-REQ-13.8 — mandatory escalation sequence exceeds statutory text
- Double authority gap: NO (circular authority present)

- Category error: NO

Requirement 9

- Direction 1 (Circular): YES — present at 3.13.2.4
- Direction 2 (Statutory): PARTIAL — § 13 third paragraph grants conditional power ("ved behov") solely to the municipality to designate the coordinating service. The circular converts this into an unqualified joint obligation on all involved services ("må avklare"). As the Process Inflation Findings state: "The law grants the designation power conditionally ('ved behov') solely to the municipality, whereas the circular shifts this into an unqualified mandatory joint obligation on all services."
- Applicable finding: PROC-REQ-13.9 — joint obligation without statutory basis
- Double authority gap: NO (circular authority present)
- Category error: NO

Requirement 10 / 14

- Direction 1 (Circular): YES
- Direction 2 (Statutory): YES — rooted in § 44 (taushetsplikt), forvaltningsloven §§ 13–13e, and the constitutional protection of personal data. Circular at 3.13.2.2, 3.13.2.4 correctly cross-references this threshold.
- Double authority gap: NO
- Category error: NO — correctly situated legal condition

Requirement 11

- Direction 1 (Circular): **NO** — first-order authority gap. The obligation to investigate whether an individual plan exists derives exclusively from Retningslinjer for samarbeid mellom barnevernstjenesten og Nav-kontoret, an instrument with no presence in R-35 Para 13.
- Direction 2 (Statutory): PARTIAL — individual plans are governed by separate legislation (velferdslovgivning and Forskrift om individuell plan). As the Process Inflation Findings note: "The law's open method for initiating cooperation is shadow-bound by mandating a specific investigative action step (IP investigation) that is legally rooted in a different provision." § 13 provides no anchor for this specific procedural step.
- Applicable finding: PROC-REQ-13.11 — "legally rooted in a different provision"
- **Double authority gap: YES** — no circular authority + partial statutory authority
- Category error: NO — within social services domain, but wrong provision

Requirement 12

- Direction 1 (Circular): **NO** — first-order authority gap. The duty to participate in housing social work (boligsosiale arbeid) derives from Kommunebrev 2025, which has no textual presence in R-35 Para 13.
- Direction 2 (Statutory): PARTIAL — § 15 addresses housing for disadvantaged persons; Nav-loven § 15 addresses general cooperation duties. However, neither § 13 sosialtjenesteloven nor the circular paragraph establish this specific housing

social work participation duty. The Kommunebrev creates an additional substantive obligation that operates entirely outside the § 13 framework.
- **Double authority gap: YES** — no circular authority + partial statutory authority under § 13 specifically
- Category error: NO — within social services domain

Requirement 13

- Direction 1 (Circular): **NO** — first-order authority gap. The obligation to assess how institutional messages affect Nav benefits derives from Nasjonal veileder for samarbeidet mellom kriminalomsorgen og Nav only.
- Direction 2 (Statutory): NO under § 13 — as the Process Inflation Findings state: "The open discretion regarding how to cooperate with external agencies is converted into a mandatory, specific operational procedure for reviewing institutional messages that lacks a direct textual basis in § 13." The veileder converts open cooperation discretion into a specific benefit-review procedure without statutory mandate in § 13.
- Applicable finding: PROC-REQ-13.13 — "mandatory, specific operational procedure... lacks a direct textual basis in § 13"
- **Double authority gap: YES** — no circular authority + no/partial statutory authority in § 13
- Category error: PARTIAL — benefit assessment falls under different provisions (sosialtjenesteloven §§ 17–18, NAV-loven benefit rules), not § 13

Requirement 15

- Direction 1 (Circular): YES — present at 3.13.2.5 with permissive language ("kan forankres")
- Direction 2 (Statutory): YES — § 13 fourth paragraph authorizes participation in cooperation bodies; the permissive formulation in the circular aligns with statutory discretion. As the Process Inflation Findings note: "No gap exists; the circular relies on permissive language ('kan forankres') that aligns with the statutory duty."
- Double authority gap: NO
- Category error: NO
- Note: Shadow-binding risk exists if supervisory practice treats the absence of formal agreements as non-compliance despite the circular's permissive language (see Step 3).

Requirement 16

- Direction 1 (Circular): **NO** — first-order authority gap. Archiving and journaling obligations derive from the kriminalomsorgen veileder only.
- Direction 2 (Statutory): **NO** under § 13 — as the Process Inflation Findings state: "Archiving and journaling rules stem exclusively from arkivloven and general administrative law, lacking any statutory authorization within § 13 itself."
- Applicable finding: DOC-REQ-13.3 — "exclusively from arkivloven"
- **Double authority gap: YES** — no circular authority + no statutory authority in § 13
- **Category error: YES** — archiving and journaling obligations belong to the arkivloven and forvaltningsloven legal domain, not sosialtjenesteloven § 13

Requirement 17

- Direction 1 (Circular): **NO** — first-order authority gap.
- Direction 2 (Statutory): PARTIAL under § 13 — as the Process Inflation Findings state: "The recommendation for capturing written consent derives from forvaltningsloven and general administrative doctrine, possessing no textual foundation in § 13."
- Applicable finding: DOC-REQ-13.4 — "derives from forvaltningsloven and general administrative doctrine"
- **Double authority gap: YES** — no circular authority + partial/no statutory authority in § 13
- **Category error: YES** — consent documentation format belongs to forvaltningsloven domain

Requirement 18

- Direction 1 (Circular): **NO** — first-order authority gap.
- Direction 2 (Statutory): **NO** under § 13 — as the Process Inflation Findings explicitly state: "The requirement is governed exclusively by forvaltningsloven § 13 a nr. 1, not by § 13 stl., which is confirmed by the circular's own legal citation." The veileder itself attributes the requirement to forvaltningsloven § 13a nr. 1.
- Applicable finding: DOC-REQ-13.5 — "governed exclusively by forvaltningsloven § 13 a nr. 1"
- **Double authority gap: YES** — no circular authority + no statutory authority in § 13
- **Category error: YES** — requirement belongs to forvaltningsloven domain; its appearance in the § 13 normative framework is a misattribution

Requirement 19

- Direction 1 (Circular): **NO** — first-order authority gap.
- Direction 2 (Statutory): **NO** under § 13 — as the Process Inflation Findings state: "The content requirements for an IP are mandatory-closed rules originating strictly from the IP Regulation, not from the open coordination discretion granted by § 13."
- Applicable finding: DOC-REQ-13.6 — "originating strictly from the IP Regulation"
- **Double authority gap: YES** — no circular authority + no statutory authority in § 13
- **Category error: YES** — IP content requirements belong to the Forskrift om individuell plan ved ytelse av velferdstjenester, a separate legal instrument in a different regulatory domain

Requirement 20

- Direction 1 (Circular): **NO** — first-order authority gap.
- Direction 2 (Statutory): **NO** under § 13 — as the Process Inflation Findings state: "The law's open discretion regarding the organization of cooperation organs is shadow-bound by three mandatory prescriptions dictating the exact content of formal legal instruments, none of which have any basis in § 13 stl."
- Applicable finding: DOC-REQ-13.7 — "none of which have any basis in § 13 stl."
- **Double authority gap: YES** — no circular authority + no statutory authority in § 13

- **Category error: YES** — delegation decisions are governed by kommuneloven/forvaltningsloven; data processing responsibilities under personopplysningsloven; neither domain is anchored in § 13

STEP 3 — SCALE AND PROPORTIONALITY CHECK

The Anchor Document's most directly applicable finding for § 13 is **Driver 6 / Cluster 4 (Inter-Agency Coordination Formalization)**, which states: *"Formalized inter-agency coordination: Sør-Varanger, Hammerfest, Senja, and others were sanctioned for informal, case-by-case agency coordination rather than written, systematic cooperation agreements. Small offices coordinate naturally through personal contact between a few colleagues across departments; the requirement to formalize this into institutional agreements imposes overhead calibrated for larger, siloed bureaucracies."* The Anchor Document further classifies this as **[C] Coordination Infrastructure** with **no explicit statutory requirement** for written agreements — deriving instead from supervisory interpretive practice. Confirmed in Sør-Varanger, Hammerfest, Giske, Averøy, Randaberg, and Senja.

The **[C] mechanism frequency** in Set B is approximately 25–26 findings, making it the third most prevalent mechanism and the dominant mechanism for § 13-adjacent requirements.

Requirement 1: Scale flag: NO — the medvirkningsplikt is substantive and scale-neutral; NAV offices of all sizes fulfill it through ordinary case activity.

Requirement 2: Scale flag: NO — cooperation duty is threshold-conditioned ("dersom nødvendig"); this preserves proportionality.

Requirement 3: Scale flag: NO — obligation to raise service deficiencies is a reactive, case-triggered duty; does not presuppose organizational infrastructure.

Requirement 4: Scale flag: NO — "søke å klargjøre" is an effort-based standard without structural preconditions.

Requirement 5: Scale flag: NO — conditional power ("ved behov") is exercised by the municipality, not as a standing operational procedure.

Requirement 6: Scale flag: PARTIAL — the mandatory child-assessment trigger, if operationalized as a documented procedural step on every case involving a service recipient with children, creates recurring documentation overhead in small offices handling high proportions of family cases. The Anchor Document's Cluster 3 (child-perspective documentation) is structurally analogous: "caseworkers verbally conducting the assessments while failing to document them." However, the trigger itself (assessing cooperation need) is not scale-impossible; the documentation overhead is the scale-sensitive element. Applicable Anchor finding: Cluster 3 child-perspective documentation — "presupposes a specialization that the scale does not support."

Requirement 7: Scale flag: PARTIAL — the fixed four-element professional assessment framework assumes a structured case-processing environment where each cooperation

case is formally assessed across four dimensions. Small offices processing cooperation cases ad hoc and informally cannot sustain a four-element documented checklist as habitual practice. Applicable Anchor finding: [C] Coordination Infrastructure + [P] Procedural Continuity — "a pipeline cannot become habitual when triggered fewer than 10–15 times per year."

Requirement 8: Scale flag: NO — the escalation procedure is incident-triggered rather than ongoing; scale does not structurally prevent compliance, though the mandatory (rather than discretionary) framing creates disproportionate burden.

Requirement 9: Scale flag: **YES** — the requirement that all involved services must jointly convene to clarify coordination responsibility presupposes multi-institutional coordination infrastructure. In small municipalities where a few staff across departments know each other personally, this is naturally handled through direct contact. The requirement to formalize it as a deliberate joint process imposes [C] overhead. Applicable Anchor finding: Driver 6 — "small offices coordinate naturally through personal contact between a few colleagues across departments; the requirement to formalize this into institutional agreements imposes overhead calibrated for larger, siloed bureaucracies." Note: because Requirement 9 also lacks full statutory authority (Step 2), any scale-related burden it imposes is unsupported by the circular framework and constitutes disproportionate burden without regulatory foundation.

Requirement 10/14: Scale flag: NO — this is a legal threshold condition, not an operational process; it does not generate ongoing documentation overhead.

Requirement 11: Scale flag: PARTIAL — the mandatory investigation of whether an individual plan exists requires database access and case-file review as a procedural step. In small offices, this investigation may encounter capacity limitations. Applicable Anchor finding: [C] Coordination Infrastructure — "formalized inter-agency coordination" and IP-related coordination infrastructure. Since Requirement 11 also lacks circular authority, any scale-related burden is unsupported.

Requirement 12: Scale flag: PARTIAL — participation in housing social work can involve sustained engagement with municipal housing bodies, planning processes, and cross-agency forums. In small municipalities, the staff capacity to participate in these structures alongside mandatory case processing is limited. Applicable Anchor finding: [C] Coordination Infrastructure — small offices cannot sustain formalized cross-institutional participation roles.

Requirement 13: Scale flag: NO — the specific institutional message assessment is a one-off procedural step per case; it does not presuppose sustained organizational infrastructure. The burden is compliance overhead rather than structural incapacity.

Requirement 15: Scale flag: **YES** — although formulated permissively, if supervisory practice treats the absence of formal written cooperation agreements as non-compliance, this generates the [C] burden confirmed across Sør-Varanger, Hammerfest, Giske, Averøy, Randaberg, and Senja. The Anchor Document's Driver 6 directly applies: *"No explicit statutory requirement for written agreements identified; derives from supervisory interpretive*

practice (sub-legal)." Small offices are penalized for what is functionally adequate coordination simply because it lacks formal documentation.

Requirement 16: Scale flag: NO — archiving and journaling consent are individual case-level tasks rather than systemic structural demands. However, access to the correct archiving system (municipal vs. state NAV systems) can be a scale-related obstacle (see Anchor Document: "IT system fragmentation" / Compilo-ASYS access failure pattern). Since this requirement also has no circular authority, any burden imposed is entirely without regulatory foundation.

Requirement 17: Scale flag: NO — obtaining and documenting written consent is a per-case administrative step without structural scale preconditions.

Requirement 18: Scale flag: NO — same rationale as Requirement 17.

Requirement 19: Scale flag: PARTIAL — IP plan preparation and content compliance is a coordination-intensive process. Applicable Anchor finding: [C] Coordination Infrastructure — IP-related coordination burdens documented in the barnevern cooperation context. Since this requirement also has no circular authority, any burden imposed is unsupported.

Requirement 20: Scale flag: **YES** — producing legally compliant delegation decisions with prescribed content (three mandatory elements: delegated authority, data processing responsibility, permissible tasks for external employees) requires legal-administrative capacity that small municipalities may not have internally. This is a [C] + legal-drafting overhead that presupposes dedicated administrative or legal staff capacity. Applicable Anchor finding: Cluster 2 (Internal Control Apparatus) — "these requirements collectively assume an organization with at least three structurally distinct layers." Since Requirement 20 also has no circular authority, this burden is entirely without regulatory foundation.

STEP 4 — PURPOSE CLASSIFICATION

Requirement 1: [USER NEED] — The medvirkningsplikt directly serves social inclusion by ensuring other public bodies take social considerations into account. Language: "for å ivareta sosiale hensyn" — explicitly oriented toward the user's social situation, not administrative record-keeping.

Requirement 2: [USER NEED] — The cooperation duty is explicitly conditioned on the user's need for "oppfølging og et helhetlig og samordnet tjenestetilbud." The threshold condition ("dersom... nødvendig") keeps this oriented toward individual user need rather than systematic administrative compliance.

Requirement 3: [USER NEED] — The obligation to raise deficiencies protects "personer med et særlig hjelpebehov" from service gaps caused by external agency failures. The "om nødvendig" qualifier preserves proportionate user-centered judgment.

Requirement 4: [MIXED] — Primary: user need (clarifying responsibility ensures the user does not fall into accountability gaps); secondary: internal administrative ordering

(determining which agency holds responsibility). The effort-based formulation ("søke å klargjøre") keeps it primarily user-serving without creating process overhead.

Requirement 5: [USER NEED] — Designation of a coordinating service directly ensures the user receives coherent rather than fragmented services. The conditional language ("ved behov") ties it to actual user circumstance.

Requirement 6: [MIXED] — Primary: user need (children's welfare is a direct substantive concern). Secondary: internal documentation (the mandatory assessment trigger, as a procedural step to be executed and recorded, functions as an internal control mechanism to demonstrate child-perspective compliance). The circular's language — "må Nav-kontoret vurdere" — operationalizes child protection as a mandatory compliance trigger as much as a substantive judgment.

Requirement 7: [INTERNAL CONTROL] — The fixed four-element checklist serves documentation and audit functions primarily. The underlying professional judgment about cooperation is user-serving, but that judgment was already authorized by the statute without a prescribed format. The imposition of a four-element mandatory structure ("hvilke andre tjenesteytere... hva de skal samarbeide om... hvor omfattende... hvordan") serves as an evidence-generation framework for supervisory review. The Process Inflation Findings confirm: "substitutes... open judgment... with a fixed, mandatory four-element checklist that shadow-binds the granted how-discretion." The added value to the user beyond open professional judgment is nil; the added value to internal compliance systems is the production of checkable documentation.

Requirement 8: [MIXED] — Primary: internal procedural compliance (the two-step mandatory escalation sequence — direct contact, then superior authorities — operates as a prescribed procedure to be followed and documented, regardless of whether the caseworker's judgment would call for escalation). Secondary: user need (escalation can ultimately protect users when other agencies fail). The primary burden here is the procedural sequence, not the user outcome, because the statutory discretionary qualifier ("om nødvendig") already served user need proportionately.

Requirement 9: [INTERNAL CONTROL] — The requirement that all involved services jointly clarify which service coordinates is primarily an internal governance arrangement. User service coordination is the ultimate goal, but the mandatory joint process ("må avklare") operates as an internal administrative procedure generating formal coordination records. The statute already addressed this by giving the municipality a conditional designation power; the circular's conversion to a mandatory joint obligation adds process overhead without direct service quality improvement.

Requirement 10/14: [USER NEED] — The confidentiality threshold directly protects the user's legal rights under taushetsplikt rules. No transaction cost burden is identified for this requirement; it is a correct legal condition, not an administrative overhead.

Requirement 11: [MIXED] — Primary: user need (ensuring that existing coordination plans are not duplicated and that the user benefits from existing coordinated structures); secondary: internal procedure (the mandatory investigation step generates a traceable procedural action). However, given that this requirement has no circular authority, its

user-serving dimension does not justify its presence in the § 13 normative framework — it properly belongs in a different provision.

Requirement 12: [USER NEED] — Participation in housing social work directly serves users in need of housing assistance. However, the Kommunebrev instrument cannot supply legal authority for a mandatory duty under § 13; the user-serving purpose is appropriate but the normative vehicle is not.

Requirement 13: [INTERNAL CONTROL] — Assessing how institutional messages affect benefit entitlements is an internal administrative review procedure. From the perspective of social services users under § 13, this is a caseworker-facing operational task with no direct bearing on the user's coordination-of-services experience. It belongs to benefit administration under different provisions. The Process Inflation Findings confirm: "The open discretion regarding how to cooperate with external agencies is converted into a mandatory, specific operational procedure for reviewing institutional messages."

Requirement 15: [MIXED] — Primary: internal documentation/compliance (formalizing cooperation in written agreements or meeting structures serves as a demonstration mechanism for supervisory purposes). Secondary: user service coordination (structured cooperation agreements can in principle improve consistency of services to users). The permissive language ("kan forankres") is correctly calibrated; the problem arises only if supervisory practice shadow-binds this into a mandatory requirement.

Requirement 16: [INTERNAL CONTROL] — Archiving and journaling consent serves exclusively internal documentation and legal compliance functions (arkivloven). It has no direct bearing on the user's case outcome or service quality. From the perspective of social services users under § 13, it is invisible.

Requirement 17: [INTERNAL CONTROL] — Written consent documentation serves as an evidentiary record for the administrative system, not a direct service quality element for the user. The user's interest is served by obtaining genuine consent, not by the format in which it is documented.

Requirement 18: [INTERNAL CONTROL] — The requirement to obtain and document written, informed consent from inmates serves the correctional cooperation framework and legal compliance (forvaltningsloven § 13a), not the social services coordination function for the individual user. As classified in the Process Inflation Findings: explicitly rooted in a different legal provision.

Requirement 19: [INTERNAL CONTROL] — IP content standards are formal plan-architecture requirements deriving from the IP Regulation. They serve systemic documentation consistency and legal completeness of the IP instrument, not the immediate coordination interests of the individual user under § 13's cooperation framework.

Requirement 20: [INTERNAL CONTROL] — The prescription of delegation decision content (three mandatory elements) serves legal-administrative formalism in the management of partnership agreements. It has no bearing on the quality of services delivered to individual users. It serves the legal and compliance interests of the organizations entering the partnership.

STEP 5 — TRANSACTION COST CHARACTERIZATION

Requirements classified [USER NEED] (1, 2, 3, 5, 10/14, 12): No transaction cost burden identified. These requirements reflect substantive legal obligations that are user-oriented and do not generate administrative overhead independent of their service-delivery purpose.

Requirement 4 [MIXED]: Caseworker must initiate and document the effort to clarify responsibility when accountability is contested. The effort-based formulation limits this to genuine uncertainty situations; no systematic overhead is generated. Transaction cost is low and user-justified. **No significant burden identified.**

Requirement 6 [MIXED]: Each time a service recipient has children, the caseworker must execute and document a specific assessment of whether cooperation with children's service providers is necessary. In offices handling significant numbers of family cases, this adds a recurring mandatory assessment step — with documentation implications — to every such case. The caseworker must produce evidence that the assessment was made, not merely exercise professional judgment. The circular operates as an evidence-generation instruction. Because the statute did not impose this specific trigger, the transaction cost operates outside the statutory authorization; caseworkers must comply with an obligation the statute does not explicitly create. **Transaction cost category: Documentation Inflation (recurring mandatory assessment trigger).**

Requirement 7 [INTERNAL CONTROL]: Caseworker must structure each cooperation assessment around four prescribed elements and document each element: (1) which service providers to cooperate with, (2) what the cooperation concerns, (3) scope and duration, (4) practical organization. This transforms a professional judgment call into a documented compliance exercise. The caseworker is required not merely to exercise good judgment but to produce a four-part record demonstrating that the judgment followed the prescribed structure. In offices with many complex multi-service cases, this adds structured documentation overhead to every cooperation decision. Because the statute's open judgment standard has been replaced by a circular checklist, the transaction cost falls outside any framework the statute provides — caseworkers must comply with a mandatory structure the primary normative instrument imposed without statutory mandate. **Transaction cost category: Documentation Inflation + Structural Disproportionality (replaces statutory discretion with audit-generating checklist).**

Requirement 8 [MIXED]: When direct contact with an external agency fails, the caseworker/NAV leader must: (1) document that direct contact was attempted, (2) document that results were unsatisfactory, and (3) escalate formally to superior municipal authorities regardless of whether escalation is professionally warranted. The mandatory two-step sequence generates procedural paper trail obligations tied to each escalation event. Where the statute's "om nødvendig" qualifier would permit the caseworker to use judgment on whether escalation is warranted, the circular removes this discretion and creates a mandatory procedural obligation. Caseworkers must comply with an escalation sequence the circular has created without the statutory authority to remove the discretionary qualifier.

Transaction cost category: Procedural Duplication (mandatory procedure where discretion would be proportionate).

Requirement 9 [INTERNAL CONTROL]: All services involved in a person's case must collectively convene a coordination-clarification process. In practice, this means the NAV leader must: initiate or participate in a multi-agency meeting or communication, ensure all services agree or record disagreement on coordination responsibility, and document the outcome. This creates institutional coordination overhead for every complex multi-service case, requiring multi-party administrative action where the statute gave the municipality a simple conditional designation power. Because the circular has no statutory authority to convert the municipal designation power into a mandatory joint process, the transaction cost it imposes falls entirely outside the normative framework the statute provides. **Transaction cost category: Structural Disproportionality + Documentation Inflation (mandatory joint process without statutory foundation).**

Requirement 11 [MIXED]: Caseworker must proactively search existing case systems and inter-agency records to determine whether an individual plan already exists, document this investigation, and if a plan exists, assess and document NAV's potential contribution to it. This adds a mandatory investigative step at the outset of every complex case involving potential multi-service coordination. Because this requirement has no circular authority, caseworkers must comply with an obligation the primary normative instrument governing their work does not address. The investigative step is rooted in a different normative instrument (barnevern retningslinjer) and sits in an authority vacuum from the § 13 perspective. **Transaction cost category: Procedural Duplication (investigative step without § 13 mandate).**

Requirement 13 [INTERNAL CONTROL]: Caseworker must systematically review institutional messages from the correctional service and assess each message's implications for current or potential NAV benefit entitlements. This creates a standing benefit-review obligation triggered by the correctional cooperation context. Because this requirement derives from the kriminalomsorgen veileder with no circular authority under § 13, caseworkers must execute a benefit-assessment procedure the § 13 normative framework does not sanction. The procedure belongs to benefit administration under different provisions. **Transaction cost category: Documentation Inflation + Procedural Duplication (benefit review without § 13 authority).**

Requirement 15 [MIXED]: If supervisory practice treats the permissive language ("kan forankres") as effectively mandatory, NAV leaders must produce and maintain formal written cooperation agreements, ensure regular cross-sectoral meetings are scheduled and documented, and maintain records of agreed working forms and routines. The Anchor Document confirms this is precisely the shadow-binding pattern documented in Sør-Varanger, Hammerfest, Giske, Averøy, Randaberg, and Senja. The transaction cost emerges not from the circular's own language but from supervisory interpretation that converts "kan" to "skal." **Transaction cost category: Documentation Inflation + Reporting Overhead (coordination formalization pressured by supervisory shadow-binding).**

Requirement 16 [INTERNAL CONTROL]: Caseworkers must ensure all consent documentation is archived in the agency's own journaling system, maintain traceability of the archiving act, and operate separate archiving procedures across the state NAV and municipal systems (which may be mismatched — as confirmed in the Anchor Document's Compilo/ASYS access problem pattern). Because this requirement has no circular authority, caseworkers must comply with archiving obligations the § 13 framework does not address, rooted instead in arkivloven. **Transaction cost category: Documentation Inflation + Reporting Overhead (archiving obligation in wrong legal domain).**

Requirement 17 [INTERNAL CONTROL]: Caseworkers must ensure consent is obtained through active user action and recorded in written form. This adds a consent-formatting step to every cooperation case requiring information exchange. Because this requirement has no circular authority and derives from forvaltningsloven, caseworkers must comply with a consent-documentation format the § 13 normative instrument does not address. **Transaction cost category: Documentation Inflation (consent format beyond § 13 mandate).**

Requirement 18 [INTERNAL CONTROL]: Caseworkers must obtain, verify, and archive written, informed consent from correctional service users before any information exchange. This creates a consent-production requirement specific to the correctional cooperation context. Because the obligation is rooted in forvaltningsloven § 13a and has no § 13 circular authority, caseworkers must comply with a specialized consent procedure the § 13 framework does not sanction. **Transaction cost category: Documentation Inflation (specialized consent procedure beyond § 13 mandate).**

Requirement 19 [INTERNAL CONTROL]: Caseworkers/plan coordinators must ensure the IP document contains all prescribed content elements: designated plan author, designated coordination responsibility holder, and progress oversight responsibility. This creates a plan-content compliance obligation requiring the caseworker to audit IP structure against regulatory requirements. Because this requirement has no circular authority and derives from the IP Regulation, caseworkers must comply with plan-architecture standards the § 13 framework does not address. **Transaction cost category: Documentation Inflation (plan content standards in wrong regulatory domain).**

Requirement 20 [INTERNAL CONTROL]: NAV leaders and municipal administrators must produce legally compliant delegation decisions as annexes to partnership agreements. Each decision must contain three prescribed elements, requiring legal-administrative drafting capacity. This is a legal document production obligation requiring either in-house legal expertise or external legal assistance. In small municipalities without dedicated legal officers, this may require procurement of legal services for each partnership agreement. Because this requirement has no circular authority and derives from kommuneloven/personopplysningsloven, NAV leaders must comply with a legal document production standard the § 13 framework does not address. **Transaction cost category: Documentation Inflation + Structural Disproportionality + Combined Burden (legal drafting obligation without § 13 authority, presupposing organizational legal capacity).**

STEP 6 — CATALOG ENTRIES

REQUIREMENT ID: § 13 — Req-1 (PROC-REQ-13.1) **PROVISION TEXT:** Kommunen skal medvirke til at sosiale hensyn blir ivaretatt av andre offentlige organer som har betydning for at formålet med loven blir oppnådd. **SOURCE INSTRUMENT:** Circular — R-35 Para 13 (statutory text; reproduced in circular section 3.13.1 and 3.13.2.1) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — directly grounded in § 13 first paragraph, sosialtjenesteloven **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. This is a substantive legal obligation directly serving the user's social inclusion; it attaches to normal case activity and does not generate documentation overhead independent of that activity. **KILL LIST CLASSIFICATION:** No Kill List Action — sufficient authority, proportionate, user-serving **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 13 — Req-2 (PROC-REQ-13.2) **PROVISION TEXT:** Kommunen skal samarbeide med andre sektorer, forvaltningsnivåer og tjenesteytere dersom samarbeid er nødvendig for å gi en person oppfølging og et helhetlig og samordnet tjenestetilbud. **SOURCE INSTRUMENT:** Circular — R-35 Para 13 (statutory text; elaborated in 3.13.2.2) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — § 13 second paragraph first sentence **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO — threshold condition ("dersom nødvendig") preserves proportionality **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. The necessity threshold preserves professional judgment and prevents the obligation from becoming a systematic process overhead. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 13 — Req-3 (PROC-REQ-13.3) **PROVISION TEXT:** Blir det påvist mangler ved de tjenester som andre deler av forvaltningen skal yte til personer med et særlig hjelpebehov, skal kommunen om nødvendig ta opp saken med rette vedkommende. **SOURCE INSTRUMENT:** Circular — R-35 Para 13 (statutory text; elaborated in 3.13.2.3) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — § 13 second paragraph second sentence; "om nødvendig" qualifier preserved **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO — reactive, case-triggered duty without structural preconditions **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. The "om nødvendig" qualifier preserves proportionality; the obligation attaches only when actual service deficiencies are identified. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 13 — Req-4 (PROC-REQ-13.4) **PROVISION TEXT:** Er det uklarhet eller uenighet om hvor ansvaret ligger, skal kommunen søke å klargjøre forholdet. If direct

contact with the agency does not yield satisfactory results, Nav shall bring the matter before superior authorities. [Note: escalation element assessed separately under Req-8.] **SOURCE INSTRUMENT:** Circular — R-35 Para 13 (statutory text at 3.13.2.3; effort-based qualifier reproduced accurately) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — § 13 second paragraph third sentence; effort-based "søke å" qualifier preserved in circular **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** MIXED — primary: user need (ensuring users do not fall through accountability gaps); secondary: administrative ordering (determining agency responsibility) **BURDEN DESCRIPTION:** Minimal burden. The effort-based standard does not require production of a formal documented outcome, only a bona fide attempt to clarify. No structured procedural overhead generated. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 13 — Req-5 (PROC-REQ-13.5) **PROVISION TEXT:** Ved behov skal kommunen bestemme hvilken kommunal tjenesteyter som skal ivareta samordningen. **SOURCE INSTRUMENT:** Circular — R-35 Para 13 (statutory text; conditionality "ved behov" preserved at 3.13.2.4) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — § 13 third paragraph; conditional power preserved **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO — conditional activation preserves proportionality **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. The conditional power is exercised only when needed and does not create standing process obligations. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 13 — Req-6 (PROC-REQ-13.6) **PROVISION TEXT:** Hvis tjenestemottakeren har barn, må Nav-kontoret vurdere om samarbeid med tjenesteytere som gir tjenester til barnet er nødvendig for at barnet skal få et helhetlig og samordnet tjenestetilbud. **SOURCE INSTRUMENT:** Circular — R-35 Para 13 (circular elaboration at 3.13.2.2; not present in statutory text of § 13) **CIRCULAR AUTHORITY:** PRESENT (in circular elaboration) **LEGAL AUTHORITY:** PARTIAL — § 13 authorizes cooperation for individual recipients ("en person"). The circular extension to a mandatory trigger for children of recipients lacks direct textual basis in § 13. Reference: PROC-REQ-13.6 finding — "The law targets services for the individual recipient ('en person'), while the circular extends this to a mandatory assessment trigger encompassing the person's children." **DOUBLE AUTHORITY GAP:** NO (circular authority present) **CATEGORY ERROR:** NO — within social services domain **SCALE FLAG:** PARTIAL — recurring mandatory trigger on all family cases creates documentation overhead. Applicable Anchor finding: Cluster 3 child-perspective documentation — "caseworkers verbally conducting the assessments while failing to document them" — consistent pattern confirmed across 15+ supervision reports. **PURPOSE:** MIXED — primary: user need (child welfare); secondary: internal documentation compliance (mandatory trigger as audit evidence of child-perspective assessment) **BURDEN DESCRIPTION:** Each case involving a service recipient with children requires a documented assessment of cooperation necessity. This transforms a professional judgment element into a mandatory compliance step with documentation consequences. In small offices with

substantial family caseloads, this generates recurring overhead. **KILL LIST CLASSIFICATION:** Category B — Status Change. The circular's "må vurdere" formulation imposes a mandatory trigger where the statute authorizes judgment-based cooperation assessment for individual recipients. Reformulation to permissive or guidance language ("bør vurdere" or "det kan være aktuelt å vurdere") would restore caseworker discretion without undermining child welfare protection. **TRANSACTION COST CATEGORY:** Documentation Inflation

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REQUIREMENT ID: § 13 — Req-7 (PROC-REQ-13.7) **PROVISION TEXT:** Nav-kontoret må gjøre en konkret faglig vurdering av hvilke andre tjenesteytere de skal samarbeide med, hva de skal samarbeide om i det enkelte tilfelle, hvor omfattende og langvarig samarbeidet vil bli og hvordan samarbeidet i praksis skal organiseres. **SOURCE INSTRUMENT:** Circular — R-35 Para 13 (circular elaboration at 3.13.2.2; the four-element structure is a circular construction not present in the statute) **CIRCULAR AUTHORITY:** PRESENT (circular elaboration) **LEGAL AUTHORITY:** PARTIAL — § 13 authorizes open professional judgment on assessing cooperation needs. The circular substitutes this with a fixed four-element mandatory checklist. Reference: PROC-REQ-13.7 finding — "the circular substitutes this with a fixed, mandatory four-element checklist that shadow-binds the granted how-discretion and evidence-discretion." **DOUBLE AUTHORITY GAP:** NO (circular authority present) **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — the four-element assessment framework presupposes structured case-processing capacity. Applicable Anchor finding: [P] Procedural Continuity — "a pipeline cannot become habitual when triggered fewer than 10–15 times per year"; [C] Coordination Infrastructure — overhead calibrated for larger organizations. **PURPOSE:** INTERNAL CONTROL — the four-element checklist primarily serves documentation and audit functions. The underlying professional cooperation judgment is user-serving, but that judgment was already authorized by the statute without prescribed format; the added element is compliance evidence, not service quality. **BURDEN DESCRIPTION:** Caseworker must structure and document each cooperation assessment across four prescribed dimensions (who, what, scope/duration, practical organization), producing a four-part compliance record rather than exercising open professional judgment. This generates documentation overhead tied to audit requirements rather than user service outcomes. Because the circular's four-element structure exceeds the statutory delegation, caseworkers must comply with an evidence-generation obligation the statute did not authorize. **KILL LIST CLASSIFICATION:** Category B — Status Change. Imperative language ("må gjøre en konkret faglig vurdering av...") imposes a mandatory format on a discretionary professional judgment. Reformulation to permissive or guiding language ("i sin vurdering kan Nav-kontoret se hen til...") would restore statutory discretion without reducing service quality. **TRANSACTION COST CATEGORY:** Documentation Inflation; Structural Disproportionality

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REQUIREMENT ID: § 13 — Req-8 (PROC-REQ-13.8) **PROVISION TEXT:** Hvis direkte kontakt med instansen ikke gir tilfredsstillende resultater, skal Nav-kontoret bringe saken frem for overordnede myndigheter i kommunen. **SOURCE INSTRUMENT:** Circular — R-35 Para 13 (circular elaboration at 3.13.2.3) **CIRCULAR AUTHORITY:** PRESENT (circular

elaboration) **LEGAL AUTHORITY:** PARTIAL — § 13 second paragraph uses "om nødvendig," preserving discretion. The circular's "skal...bringe saken frem" removes this discretionary qualifier and creates an unconditional mandatory two-step escalation. Reference: PROC-REQ-13.8 finding — "The law's discretionary 'om nødvendig' duty to escalate is shadow-bound and replaced by the circular with an unconditional, mandatory two-step escalation sequence not found in the statute." **DOUBLE AUTHORITY GAP:** NO (circular authority present) **CATEGORY ERROR:** NO **SCALE FLAG:** NO — incident-triggered, not a standing process obligation **PURPOSE:** MIXED — primary: procedural compliance (the two-step sequence operates as a mandatory procedure to be followed and documented regardless of professional judgment about necessity); secondary: user need (escalation can protect users when agency contact fails) **BURDEN DESCRIPTION:** When direct contact with an external agency is unsatisfactory, the NAV leader must formally escalate to superior municipal authorities, document the escalation, and produce a record of the two-step sequence. The mandatory character removes professional judgment about whether escalation is warranted in the specific case. Because the circular removes the statutory discretionary qualifier, the escalation obligation operates outside the authority the statute provides. **KILL LIST CLASSIFICATION:** Category B — Status Change. "Skal Nav-kontoret bringe saken frem" imposes unconditional obligation where statute uses "om nødvendig." Reformulation should reinstate the discretionary qualifier to restore alignment with statutory text. **TRANSACTION COST CATEGORY:** Procedural Duplication

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REQUIREMENT ID: § 13 — Req-9 (PROC-REQ-13.9) **PROVISION TEXT:** De ulike tjenestene som skal samarbeide om oppfølgingen av en person, må avklare hvilken tjeneste som skal samordne tjenestetilbudet. **SOURCE INSTRUMENT:** Circular — R-35 Para 13 (circular elaboration at 3.13.2.4) **CIRCULAR AUTHORITY:** PRESENT (circular elaboration) **LEGAL AUTHORITY:** PARTIAL — § 13 third paragraph grants conditional designation power solely to the municipality ("ved behov skal kommunen bestemme"). The circular converts this to an unqualified joint obligation on all involved services ("må avklare"). Reference: PROC-REQ-13.9 finding — "The law grants the designation power conditionally ('ved behov') solely to the municipality, whereas the circular shifts this into an unqualified mandatory joint obligation on all services." **DOUBLE AUTHORITY GAP:** NO (circular authority present) **CATEGORY ERROR:** NO **SCALE FLAG:** YES — mandatory joint coordination clarification process presupposes multi-institutional infrastructure. Applicable Anchor finding: Driver 6 (Cluster 4) — "small offices coordinate naturally through personal contact... the requirement to formalize this into institutional arrangements imposes overhead calibrated for larger, siloed bureaucracies." Confirmed in Sør-Varanger, Hammerfest, Giske, Averøy, Randaberg, Senja. The statutory authority gap compounds this: any scale-related burden imposed by Req-9 is unsupported by the circular's own statutory foundation, constituting disproportionate burden without adequate regulatory basis. **PURPOSE:** INTERNAL CONTROL — the mandatory joint clarification process primarily serves internal governance documentation (producing a formal record of who is responsible for coordination) rather than directly improving service quality for the user. The user's interest is served by having coordination; the formal multi-party process is an internal compliance mechanism. **BURDEN DESCRIPTION:** All services involved must collectively convene, agree on coordination responsibility, and document the outcome. NAV must initiate or participate in a multi-agency coordination-clarification process for every complex

multi-service case. This generates institutional coordination overhead that small offices, where informal mutual knowledge of coordination roles already exists, find redundant but are compelled to formalize. The obligation operates beyond the statutory framework, which gave the municipality alone a conditional designation power. **KILL LIST CLASSIFICATION:** Category B — Status Change. The circular's "må avklare" formulation creates an unqualified joint obligation extending beyond the statutory conditional municipal designation power. Reformulation to align with the statute's conditional structure — restoring "ved behov" and the municipality's singular designation role — would resolve the shadow-binding. **TRANSACTION COST CATEGORY:** Structural Disproportionality; Documentation Inflation

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REQUIREMENT ID: § 13 — Req-10/14 (PROC-REQ-13.10 / DOC-REQ-13.1) **PROVISION TEXT:** For å kunne dele taushetsbelagte opplysninger med andre, må det foreligge en lovhjemmel eller et samtykke som tillater det. **SOURCE INSTRUMENT:** Circular — R-35 Para 13 (statutory cross-reference; repeated at sections 3.13.2.2, 3.13.2.4, and 3.13.2.5) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — grounded in § 44 sosialtjenesteloven, forvaltningsloven §§ 13–13e, and constitutional data protection. The circular correctly restates this as a threshold condition. **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED — directly protects the user's confidentiality rights; the threshold condition serves the user's legal security **BURDEN DESCRIPTION:** No transaction cost burden identified. This is a correctly situated legal condition; its repeated appearance in the circular serves as a reminder rather than generating process overhead. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 13 — Req-11 (PROC-REQ-13.11) **PROVISION TEXT:** Både barnevernstjenesten og Nav-kontoret må undersøke om det allerede foreligger en individuell plan og eventuelt være en bidragsyter i denne. **SOURCE INSTRUMENT:** Retningslinjer for samarbeid mellom barnevernstjenesten og Nav-kontoret — (e) another sub-legal instrument (retningslinjer, not a veileder or circular) **CIRCULAR AUTHORITY:** ABSENT — this requirement has no presence in R-35 Para 13. Consequence: the requirement operates entirely outside the circular framework, meaning caseworkers must comply with an obligation the primary normative instrument for their work under § 13 does not address. **LEGAL AUTHORITY:** PARTIAL — IP obligations are grounded in separate legislation (velferdslovgivning, Forskrift om individuell plan). § 13 provides no anchor for this specific mandatory investigative step. Reference: PROC-REQ-13.11 finding — "legally rooted in a different provision." **DOUBLE AUTHORITY GAP:** YES — no circular authority + partial statutory authority under § 13 **CATEGORY ERROR:** NO — within social services domain, but wrong provision and instrument **SCALE FLAG:** PARTIAL — IP investigation requires system access and case-file review as a procedural step; coordination overhead in small offices. Since circular authority is absent, any scale-related burden is without regulatory foundation. **PURPOSE:** MIXED — primary: user need (ensuring IP structures benefit the user); secondary: internal procedure (mandatory investigation step as compliance evidence). However, the absent circular authority removes the normative justification for this burden within the § 13 framework. **BURDEN DESCRIPTION:** Caseworker must proactively

investigate whether an individual plan exists, document the investigation, and if so, assess and document NAV's contribution potential. This adds a mandatory investigative step before cooperation begins. Because this requirement has no circular authority, caseworkers must execute an obligation the § 13 normative framework does not sanction — it derives from a different instrument with no § 13 foundation. **KILL LIST CLASSIFICATION:** Category A — Removal. The requirement lacks circular authority and has only partial statutory authority under § 13. It properly belongs to the IP regulatory framework, not the § 13 cooperation framework. Removal from the § 13 normative load is warranted; the substantive IP obligation is already correctly situated elsewhere. **TRANSACTION COST CATEGORY:** Procedural Duplication

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REQUIREMENT ID: § 13 — Req-12 (PROC-REQ-13.12) **PROVISION TEXT:** Nav-kontoret har en plikt til å medvirke i kommunens boligsosiale arbeid. **SOURCE INSTRUMENT:** Kommunebrev 2025 — (a) Kommunebrev **CIRCULAR AUTHORITY:** ABSENT — no presence in R-35 Para 13. Consequence: the housing social work participation duty operates entirely outside the circular framework. **LEGAL AUTHORITY:** PARTIAL — § 15 sosialtjenesteloven addresses housing for disadvantaged persons; NAV-loven § 15 addresses cooperation duties generally. Neither § 13 sosialtjenesteloven nor R-35 Para 13 establishes this specific participation duty as a mandatory obligation in the § 13 context. The Kommunebrev creates a substantive duty without a clear § 13 statutory anchor. **DOUBLE AUTHORITY GAP:** YES — no circular authority + partial statutory authority under § 13 **CATEGORY ERROR:** NO — within social services domain, but the instrument is a Kommunebrev rather than a circular or statutory provision **SCALE FLAG:** PARTIAL — sustained participation in municipal housing bodies and planning processes presupposes staff capacity beyond immediate case processing. Applicable Anchor finding: [C] Coordination Infrastructure — small offices cannot sustain formalized cross-institutional participation roles alongside mandatory case processing. **PURPOSE:** USER NEED — housing social work directly serves users in need of housing assistance; the purpose is appropriate **BURDEN DESCRIPTION:** NAV office must participate in municipal housing social work activities, potentially including inter-agency housing forums, planning processes, and coordination bodies. The burden is the sustained organizational participation commitment. The user-serving purpose does not cure the normative vehicle: a Kommunebrev cannot supply the legal authority that § 13 itself does not provide. Caseworkers must comply with an obligation the primary normative instrument does not address. **KILL LIST CLASSIFICATION:** Category C — Clarification. The housing social work participation duty is substantively appropriate but derives from a Kommunebrev operating outside the § 13 framework. The room for maneuver — whether this is a mandatory duty under § 13, or an optional participation enabled by § 13 but mandated by § 15 — must be made explicit to prevent shadow-binding. **TRANSACTION COST CATEGORY:** Documentation Inflation (indirect — through cross-institutional participation expectations)

REQUIREMENT ID: § 13 — Req-13 (PROC-REQ-13.13) **PROVISION TEXT:** Nav skal vurdere hvordan opplysninger i institusjonsmeldingen påvirker eventuelle ytelser fra Nav.

SOURCE INSTRUMENT: Nasjonal veileder for samarbeidet mellom kriminalomsorgen og Nav — (b) Veileder **CIRCULAR AUTHORITY:** ABSENT — no presence in R-35 Para 13. Consequence: this benefit-review procedure operates entirely outside the circular framework. **LEGAL AUTHORITY:** NO under § 13 — the veileder converts the open cooperation discretion of § 13 into a specific benefit-assessment procedure. Reference: PROC-REQ-13.13 finding — "The open discretion regarding how to cooperate with external agencies is converted into a mandatory, specific operational procedure for reviewing institutional messages that lacks a direct textual basis in § 13." Benefit assessment for institutional releases falls under NAV-loven and sosialtjenesteloven §§ 17–18, not § 13. **DOUBLE AUTHORITY GAP:** YES — no circular authority + no statutory authority under § 13 **CATEGORY ERROR:** PARTIAL — benefit entitlement assessment belongs to the benefit administration domain (sosialtjenesteloven §§ 17–18, NAV-loven); its placement in the § 13 cooperation framework is a misattribution **SCALE FLAG:** NO — one-off per-case assessment; not a systemic structural demand **PURPOSE:** INTERNAL CONTROL — the institutional message review procedure is a caseworker-facing administrative task with no direct bearing on the user's cooperation-of-services experience under § 13. It belongs to benefit administration. **BURDEN DESCRIPTION:** Caseworker must review institutional messages from the correctional service and conduct a benefit-impact assessment for each incoming inmate/convict case. This is an operational procedure the veileder has imposed without any § 13 statutory or circular authorization. Caseworkers must comply with a benefit-review obligation the § 13 normative framework does not sanction and that properly belongs to a different regulatory domain. **KILL LIST CLASSIFICATION:** Category A — Removal. The requirement lacks both circular and statutory authority under § 13, and constitutes a partial category error (benefit administration misattributed to cooperation framework). It should be removed from the § 13 normative load; the substantive benefit-assessment obligation is correctly situated under §§ 17–18. **TRANSACTION COST CATEGORY:** Documentation Inflation; Procedural Duplication

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REQUIREMENT ID: § 13 — Req-15 (DOC-REQ-13.2) **PROVISION TEXT:** Samarbeidet kan forankres i samarbeidsavtaler eller gjennom faste tverrsektorielle møter, arbeidsformer og rutiner. **SOURCE INSTRUMENT:** Circular — R-35 Para 13, section 3.13.2.5 **CIRCULAR AUTHORITY:** PRESENT — permissive formulation ("kan forankres") **LEGAL AUTHORITY:** YES — § 13 fourth paragraph authorizes participation in cooperation bodies; permissive circular formulation is aligned. Reference: DOC-REQ-13.2 finding — "No gap exists; the circular relies on permissive language ('kan forankres') that aligns with the statutory duty and does not escalate to a mandatory obligation." **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** YES — if supervisory practice shadow-binds the permissive language into a de facto mandatory requirement, this generates the [C] coordination infrastructure overhead confirmed in the Anchor Document: Driver 6 — confirmed in Sør-Varanger, Hammerfest, Giske, Averøy, Randaberg, Senja. "Functionally, collaboration exists. The failure is purely formal: no written agreements." Source identified as supervisory interpretive practice, not statutory. The circular's own "kan" language is correctly calibrated; the scale-sensitivity arises from supervisory shadow-binding. **PURPOSE:** MIXED — primary: internal documentation/compliance (formal cooperation agreements serve as evidence of systematic coordination for supervisory purposes); secondary: user service coordination (structured cooperation can improve consistency) **BURDEN DESCRIPTION:** When

shadow-bound through supervisory practice, NAV leaders must produce written cooperation agreements, document cross-sectoral meeting schedules, and maintain records of cooperation structures. In small offices where informal coordination already functions well, this generates purely formal overhead without service quality improvement. The burden is supervisory-expectation-driven rather than circular-driven; the circular's own "kan" language generates no burden in isolation. **KILL LIST CLASSIFICATION:** Category C — Clarification. The permissive language in the circular is correctly calibrated. However, the shadow-binding risk confirmed in supervisory practice across multiple municipalities requires that the circular explicitly state that the absence of formal written agreements does not constitute non-compliance where functional cooperation is otherwise demonstrated. The room for maneuver must be stated affirmatively. **TRANSACTION COST CATEGORY:** Documentation Inflation; Reporting Overhead (when shadow-bound)

REQUIREMENT ID: § 13 — Req-16 (DOC-REQ-13.3) **PROVISION TEXT:** Det er ikke krav om at samtykke må utformes skriftlig, men et samtykke er kun gyldig dersom det kan dokumenteres. Både kriminalomsorgen og velferdstjenestene har ansvar for å innhente slikt samtykke, og for arkivering og journalføring av samtykket i eget journalsystem. **SOURCE INSTRUMENT:** Nasjonal veileder for samarbeidet mellom kriminalomsorgen og Nav — (b) Veileder **CIRCULAR AUTHORITY:** ABSENT — no presence in R-35 Para 13. Consequence: archiving and journaling obligations under this requirement operate entirely outside the circular framework; caseworkers must comply with obligations the primary normative instrument does not address. **LEGAL AUTHORITY:** NO under § 13 — the obligation derives from arkivloven and general administrative law, not § 13 sosialtjenesteloven. Reference: DOC-REQ-13.3 finding — "Archiving and journaling rules stem exclusively from arkivloven and general administrative law, lacking any statutory authorization within § 13 itself." **DOUBLE AUTHORITY GAP:** YES — no circular authority + no statutory authority under § 13 **CATEGORY ERROR:** YES — archiving and journaling obligations belong to the arkivloven / forvaltningsloven legal domain; their appearance in the § 13 normative framework is a domain error **SCALE FLAG:** NO — per-case administrative step; though IT system access issues (arkivloven system vs. NAV systems) may create scale-relevant complications **PURPOSE:** INTERNAL CONTROL — archiving and journaling consent is an internal documentation obligation serving legal compliance (arkivloven), not the user's service quality under § 13 **BURDEN DESCRIPTION:** Caseworker must ensure consent is documented and archiveable, physically archive the consent record in the agency's journal system, and maintain system access for this purpose. The crossover between state NAV and municipal IT systems may create access complications consistent with the Anchor Document's IT fragmentation pattern. The obligation has no § 13 circular authority; caseworkers must comply with an archiving obligation in a legal domain the § 13 framework does not address. **KILL LIST CLASSIFICATION:** Category A — Removal. The requirement lacks both circular and statutory authority under § 13 and constitutes a category error (arkivloven domain misattributed to cooperation framework). Removal from the § 13 normative load is warranted; the archiving obligation is already correctly situated in arkivloven. **TRANSACTION COST CATEGORY:** Documentation Inflation; Reporting Overhead

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REQUIREMENT ID: § 13 — Req-17 (DOC-REQ-13.4) **PROVISION TEXT:** Et uttrykkelig samtykke innebærer at personen må ha gjort noe aktivt for å gi sitt samtykke, og samtykke bør gis skriftlig. **SOURCE INSTRUMENT:** Retningslinjer for samarbeid mellom barnevernstjenesten og Nav-kontoret — (e) another sub-legal instrument **CIRCULAR AUTHORITY:** ABSENT — no presence in R-35 Para 13. Consequence: consent format requirements operate entirely outside the circular framework. **LEGAL AUTHORITY:** PARTIAL under § 13 — the recommendation derives from forvaltningsloven and general administrative doctrine. Reference: DOC-REQ-13.4 finding — "derives from forvaltningsloven and general administrative doctrine, possessing no textual foundation in § 13." **DOUBLE AUTHORITY GAP:** YES — no circular authority + partial/no statutory authority under § 13 **CATEGORY ERROR:** YES — consent format requirements belong to the forvaltningsloven legal domain; their placement in the § 13 normative framework through retningslinjer is a domain error **SCALE FLAG:** NO **PURPOSE:** INTERNAL CONTROL — written consent documentation serves as an evidentiary record for the administrative system, not a direct service quality element for the user **BURDEN DESCRIPTION:** Caseworker must verify that consent was obtained through active user action and document it in writing. The format requirement adds a consent-documentation step beyond what the consent obligation itself requires. The circular provides no guidance on this, and the retningslinjer derives this from forvaltningsloven — a domain outside § 13's scope. **KILL LIST CLASSIFICATION:** Category A — Removal. The requirement lacks circular and § 13 statutory authority and constitutes a category error (forvaltningsloven domain). The substantive consent requirement is already correctly situated; the format prescription adds domain-misplaced overhead. **TRANSACTION COST CATEGORY:** Documentation Inflation

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REQUIREMENT ID: § 13 — Req-18 (DOC-REQ-13.5) **PROVISION TEXT:** For å lette samarbeidet mellom etatene, er det viktig å innhente informert og skriftlig samtykke til utveksling av taushetsbelagte opplysninger fra innsatte/domfelte, jf. forvaltningsloven § 13 a nr. 1. **SOURCE INSTRUMENT:** Nasjonal veileder for samarbeidet mellom kriminalomsorgen og Nav — (b) Veileder **CIRCULAR AUTHORITY:** ABSENT — no presence in R-35 Para 13. Consequence: this requirement operates entirely outside the circular framework. **LEGAL AUTHORITY:** NO under § 13 — the veileder explicitly attributes this requirement to forvaltningsloven § 13a nr. 1, not § 13 stl. Reference: DOC-REQ-13.5 finding — "The requirement is governed exclusively by forvaltningsloven § 13 a nr. 1, not by § 13 stl., which is confirmed by the circular's own legal citation." **DOUBLE AUTHORITY GAP:** YES — no circular authority + no statutory authority under § 13 **CATEGORY ERROR:** YES — the requirement is explicitly grounded in forvaltningsloven § 13a nr. 1 by the instrument's own citation; its presence in the § 13 cooperation normative framework is a misattribution confirmed by the veileder itself **SCALE FLAG:** NO **PURPOSE:** INTERNAL CONTROL — written, informed consent from correctional service users serves compliance with forvaltningsloven's information-sharing threshold, not the user's coordination-of-services experience under § 13 **BURDEN DESCRIPTION:** Caseworker must obtain, verify, and archive written informed consent from inmates/convicts before any information exchange. The specialized consent procedure applies to a specific population subset. The requirement derives from forvaltningsloven § 13a, a domain entirely external to § 13 stl.; caseworkers must comply with an obligation the § 13 circular framework does not authorize. **KILL LIST CLASSIFICATION:** Category A — Removal. The requirement lacks both circular and § 13

statutory authority and constitutes a category error (forvaltningsloven domain explicitly confirmed by the instrument's own citation). Removal from the § 13 normative load is warranted; the substantive consent threshold is already correctly situated in forvaltningsloven. **TRANSACTION COST CATEGORY:** Documentation Inflation

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REQUIREMENT ID: § 13 — Req-19 (DOC-REQ-13.6) **PROVISION TEXT:** En IP skal blant annet inneholde en angivelse av hvem som har ansvar for å utarbeide planen og hvem som har ansvar for å sikre koordinering og fremdrift i arbeidet med planen, jf. Forskrift om individuell plan ved ytelse av velferdstjenester. **SOURCE INSTRUMENT:** Nasjonal veileder for samarbeidet mellom kriminalomsorgen og Nav — (b) Veileder **CIRCULAR AUTHORITY:** ABSENT — no presence in R-35 Para 13. **LEGAL AUTHORITY:** NO under § 13 — IP content requirements derive from Forskrift om individuell plan, a separate regulatory instrument. Reference: DOC-REQ-13.6 finding — "content requirements for an IP are mandatory-closed rules originating strictly from the IP Regulation, not from the open coordination discretion granted by § 13." **DOUBLE AUTHORITY GAP:** YES — no circular authority + no statutory authority under § 13 **CATEGORY ERROR:** YES — IP content standards belong to the Forskrift om individuell plan ved ytelse av velferdstjenester; their appearance in the § 13 normative framework through a kriminalomsorgen veileder is a domain misattribution **SCALE FLAG:** PARTIAL — IP plan preparation and content compliance is coordination-intensive; in small offices with limited administrative capacity, producing regulation-compliant IPs adds overhead. Applicable Anchor finding: [C] Coordination Infrastructure — IP coordination burdens documented in cross-sectoral contexts. Since circular authority is absent, any scale-related burden is without regulatory foundation under § 13. **PURPOSE:** INTERNAL CONTROL — IP content standards are formal plan-architecture requirements serving systemic documentation consistency and regulatory compliance with the IP Regulation, not direct service coordination improvement for the user under § 13 **BURDEN DESCRIPTION:** Caseworkers/plan coordinators must audit IP documents against regulatory content requirements (two designated responsibility holders), ensure formal content compliance with the IP Regulation, and document this compliance. The requirement is rooted in a separate regulation cited by the veileder itself; caseworkers must comply with plan-content standards the § 13 circular framework does not address. **KILL LIST CLASSIFICATION:** Category A — Removal. The requirement lacks both circular and § 13 statutory authority and constitutes a category error (IP Regulation domain). The IP content obligation is already correctly situated in Forskrift om individuell plan; its reappearance through the kriminalomsorgen veileder in the § 13 normative framework serves no regulatory purpose and adds confusion about the authority source. **TRANSACTION COST CATEGORY:** Documentation Inflation; Procedural Duplication

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REQUIREMENT ID: § 13 — Req-20 (DOC-REQ-13.7) **PROVISION TEXT:** Ved inngåelse av partnerskapsavtale som inneholder slike bestemmelser, skal selve delegasjonsvedtaket legges ved avtalen som vedlegg. Delegasjonsvedtaket må beskrive hvilken myndighet som er delegert til den felles lederen, og må angi om leder skal ha det utøvende behandlingsansvaret etter personopplysningsloven. Det må videre angi hvilke oppgaver som kan utføres av ansatte hos den andre eier. **SOURCE INSTRUMENT:**

Veileder-til-partnerskapsavtalen — (b) Veileder **CIRCULAR AUTHORITY:** ABSENT — no presence in R-35 Para 13. Consequence: this three-part legal document production obligation operates entirely outside the circular framework; NAV leaders must comply with obligations the primary normative instrument governing their work does not address. **LEGAL AUTHORITY:** NO under § 13 — delegation decisions are governed by kommuneloven and forvaltningsloven; data processing responsibilities under personopplysningsloven; permitted task assignments for external employees derive from employment and administrative law. Reference: DOC-REQ-13.7 finding — "The law's open discretion regarding the organization of cooperation organs is shadow-bound by three mandatory prescriptions dictating the exact content of formal legal instruments, none of which have any basis in § 13 stl." **DOUBLE AUTHORITY GAP:** YES — no circular authority + no statutory authority under § 13 **CATEGORY ERROR:** YES — delegation decisions belong to kommuneloven/forvaltningsloven; data processing responsibility to personopplysningsloven; permitted tasks for external employees to employment/administrative law. All three elements belong to legal domains entirely external to § 13 sosialtjenesteloven. **SCALE FLAG:** YES — producing legally compliant delegation decisions with three prescribed elements requires legal-administrative drafting capacity. Small municipalities without dedicated legal officers face a structural capacity gap. Applicable Anchor finding: Cluster 2 (Internal Control Apparatus) — "presupposes an organization with at least three structurally distinct layers"; structural impossibility in small offices. Since circular authority is absent, any scale-related burden is entirely without regulatory foundation under § 13. **PURPOSE:** INTERNAL CONTROL — delegation decision content prescription serves legal-administrative formalism in partnership management. It has no bearing on service quality for individual users under § 13. **BURDEN DESCRIPTION:** NAV leaders and municipal administrators must produce legal delegation decisions as annexes to every partnership agreement, with three prescribed elements: (1) description of delegated authority, (2) designation of executive data processing responsibility under personopplysningsloven, (3) specification of permissible tasks for external employees. This requires legal drafting capacity and potentially external legal assistance in small municipalities. The three-part prescription converts the open cooperation discretion of § 13 into a mandatory legal document production standard rooted in three separate legal domains, none of which are addressed in the § 13 circular framework. This is the highest-burden requirement in the catalog. **KILL LIST CLASSIFICATION:** Category A — Removal. The requirement lacks both circular and § 13 statutory authority and constitutes a multi-domain category error (kommuneloven + personopplysningsloven + employment/administrative law). The substantive obligations (delegation, data processing responsibility, task assignment) are each correctly situated in their own legal instruments; their reappearance through a partnerskapsavtale veileder in the § 13 normative framework creates legal confusion and imposes disproportionate burden without regulatory foundation. **TRANSACTION COST CATEGORY:** Documentation Inflation; Structural Disproportionality; Combined Burden

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CLOSING COMPARATIVE NOTE

Summary Statistics

Metric	Count
Total requirements identified from Process Inflation Findings	20
Requirements visible from the circular paragraph alone	12
Requirements invisible from the circular alone	8
Double authority gaps	9 (Req 11, 12, 13, 16, 17, 18, 19, 20 — and Req 6 has partial statutory authority but circular authority is present, so 8 pure double gaps)
Category errors (wrong legal domain)	5 (Req 16, 17, 18, 19, 20)

Refined double authority gap count: Requirements 11, 12, 13, 16, 17, 18, 19, 20 all have no circular authority. Of these, Req 16, 18, 19, 20 have NO statutory authority under § 13; Req 11, 12, 13, 17 have PARTIAL statutory authority under § 13. Total double authority gaps: **8**.

Additionally, requirements 6, 7, 8, and 9 have circular authority PRESENT but statutory authority only PARTIAL — these represent shadow-binding within the circular framework rather than double authority gaps.

Kill List Breakdown

Category	Requirements	Count
Category A — Removal	Req 11, 13, 16, 17, 18, 19, 20	**7**
Category B — Status Change	Req 6, 7, 8, 9	**4**
Category C — Clarification	Req 4 (minor), 12, 15	**3** (Req 4 is borderline — see entry; 12 and 15 are the primary C candidates)
No Kill List Action	Req 1, 2, 3, 4, 5, 10/14	**6**

Primary Transaction Cost Categories by Frequency

Category	Requirements	Count
Documentation Inflation	Req 6, 7, 9, 12, 13, 15, 16, 17, 18, 19, 20	**11**

Structural Disproportionality	Req 7, 9, 20	**3**
Procedural Duplication	Req 8, 11, 13, 19	**4**
Reporting Overhead	Req 15, 16	**2**
Combined Burden	Req 20	**1**
No Transaction Cost Identified	Req 1, 2, 3, 4, 5, 10/14	**6**

Analytical Summary for Main Report

The § 13 Sludge Audit reveals a structurally significant normative inflation pattern. Of the 20 requirements operative in the § 13 framework as identified by the Process Inflation Findings, only 12 would have been identifiable from the circular paragraph alone. The remaining 8 originate from external sub-legal instruments — five veileders, one retningslinjer, and one Kommunebrev — that have migrated operational requirements into the § 13 context without circular or statutory authorization.

The most analytically significant finding is the concentration of **category errors** among the invisible requirements. Five of the eight requirements invisible from the circular (Req 16, 17, 18, 19, 20) derive from legal domains entirely external to § 13 sosialtjenesteloven — arkivloven, forvaltningsloven, Forskrift om individuell plan, kommuneloven, and personopplysningsloven. These requirements have been imported into the § 13 normative framework through veileders for specific cooperation contexts (correctional services, child welfare, partnership agreements) without any § 13 statutory anchor. Their presence in the § 13 normative load constitutes domain misattribution: caseworkers and NAV leaders are required to comply with obligations rooted in entirely different legal regimes, within an instrument that has no authority to impose them.

The four Category B requirements (Req 6, 7, 8, 9) represent a distinct and equally important pattern: shadow-binding within the circular itself. These requirements are present in the circular, but the circular has converted statutory discretionary language ("om nødvendig," "ved behov," open professional judgment) into mandatory checklist obligations and unconditional escalation sequences. This converts user-centered professional judgment into compliance-documentation exercises without adding service quality value. The primary victim of this shadow-binding is caseworker discretion; the primary beneficiary is supervisory auditability.

Documentation Inflation is the dominant transaction cost pattern, appearing across 11 of the 20 requirements. This is consistent with the Anchor Document's finding that [D] Documentation Apparatus is the empirically dominant volume driver across all social services domains — approximately 42–65% of all supervision findings. The § 13 analysis confirms that this documentation pressure is not driven by statutory necessity but by sub-legal instruments, circular elaborations, and supervisory practice imposing evidence-generation requirements on cooperation activities that the statute authorizes through professional judgment, not prescribed formats.

The **Kill List total of 14 requirements flagged for regulatory action** (7 Category A, 4 Category B, 3 Category C) against only 6 with no action identified confirms that the § 13 normative framework as operationalized through the full instrument stack substantially exceeds its statutory mandate and imposes a process burden calibrated for large, siloed bureaucracies rather than the diverse-scale municipalities that deliver NAV's social services.

SLUDGE AUDIT — §14 SAMARBEID MED FRIVILLIGE ORGANISASJONER

PRELIMINARY METHODOLOGICAL NOTE

Visibility comparison: From the **Process Inflation Findings** (Reference Document), **5 requirements** are enumerated for §14. From the **circular paragraph alone** (Context Document, R35-00 pkt. 3.14.1), a reader would identify at most **4 substantive obligations** — and only if they read the prohibition on referral (PROC-REQ-14.2 / 14.5) as generating two distinct obligations rather than one. A reader working from the circular alone would have no visibility of PROC-REQ-14.4 whatsoever.

Requirements invisible from the circular:

Requirement	Textual presence in circular	Source instrument	Instrument type
PROC-REQ-14.4 (inform voluntary organizations about services and contact details)	**None**	Veileder om økonomisk stønad	(b) a veileder

PROC-REQ-14.5 occupies a borderline position: its substantive content (prohibition on referral) is captured in the circular's language about matutdeling and nattilbud, but the veileder formulates the obligation more broadly and in categorical terms ("har ikke anledning til"). This broadened formulation is not textually present in the circular and must be tracked as a partially distinct normative layer in Steps 2–6.

Structural observation: The analytical value of using the Process Inflation Findings as the primary enumeration instrument rather than the circular is confirmed: without the Reference Document, the veileder-sourced requirements (14.4, and the broadened formulation of 14.5) would have been invisible to this audit. The circular gives the impression of a simple, largely permissive paragraph. The Process Inflation Findings reveal that a sub-legal normative layer has attached obligations to this paragraph that the circular text does not carry.

STEP 1 — IDENTIFICATION OF ALL REQUIREMENTS

PROC-REQ-14.1

- **Exact obligation:** Nav-kontoret bør samarbeide med brukergruppenes organisasjoner og med frivillige organisasjoner, herunder ideelle organisasjoner og sosiale entreprenører.
- **Source instrument:** R35-00 pkt. 3.14.1 (circular)

- **Explicit or implicit:** Explicit
- **Textual presence in circular:** YES — the circular paragraph contains this formulation verbatim, including the extension to ideelle organisasjoner and sosiale entreprenører beyond the law's own text.

PROC-REQ-14.2

- **Exact obligation:** Frivillige organisasjoners arbeid innebærer et supplement til velferdstjenestene etter loven, og skal ikke overta Nav-kontorets ansvar for lovpålagte tjenester. Dette innebærer at Nav-kontoret ikke kan henvise tjenestemottaker til matutdeling i stedet for å yte økonomisk stønad, eller til nattilbud framfor å innvilge midlertidig botilbud.
- **Source instrument:** R35-00 pkt. 3.14.1 (circular)
- **Explicit or implicit:** Explicit
- **Textual presence in circular:** YES — reproduced essentially verbatim in the circular paragraph.
- **Note from Process Inflation Findings:** Classified as a SUBSTANTIVE LEGAL OBLIGATION; will not proceed to Step 3 in the original classification scheme. This audit carries it through all steps for completeness but notes the substantive nature.

PROC-REQ-14.3

- **Exact obligation:** Hvis samarbeidet gjelder anskaffelser av tjenester, må lov om offentlige anskaffelser følges.
- **Source instrument:** R35-00 pkt. 3.14.1 (circular)
- **Explicit or implicit:** Explicit
- **Textual presence in circular:** YES — the circular paragraph contains this sentence.

PROC-REQ-14.4

- **Exact obligation:** Kommunen bør vurdere om slike organisasjoner bør få informasjon om de sosiale tjenestene og hvordan brukere kan kontakte NAV-kontoret.
- **Source instrument:** Veileder om økonomisk stønad (veileder)
- **Explicit or implicit:** Explicit within the veileder; entirely implicit from the standpoint of the circular paragraph.
- **Textual presence in circular:** NO — this requirement has no presence in the §14 circular paragraph. It is generated entirely by the veileder layer.

PROC-REQ-14.5

- **Exact obligation:** NAV-kontoret har ikke anledning til å henvise personer til frivillige organisasjoner som et alternativ til økonomisk sosialhjelp.
- **Source instrument:** Veileder om økonomisk stønad (veileder)
- **Explicit or implicit:** Explicit in the veileder
- **Textual presence in circular:** PARTIAL — the circular's examples (not referring to matutdeling or nattilbud) capture specific instances. The veileder's categorical formulation ("ikke anledning til") as a general proposition covering all referral

scenarios goes beyond the circular's specific examples. The broader categorical statement is not present in the circular text.

STEP 2 — LEGAL AUTHORITY CHECK

PROC-REQ-14.1

- **Direction 1 — Circular authority:** YES. The requirement is textually present in the circular using the same permissive register (bør) as the underlying statute.
- **Direction 2 — Statutory authority:** YES. Sosialtjenesteloven §14 itself uses "bør samarbeide." The circular's extension of the collaboration recommendation to ideelle organisasjoner and sosiale entreprenører does not convert the recommendation into a stricter obligation; it remains within the permissive register. The Process Inflation Findings confirm: "No shadow binding or legal gap arises; the circular uses the exact same permissive register ('bør') as the law."
- **Double authority gap:** NO
- **Category error:** NO

PROC-REQ-14.2

- **Direction 1 — Circular authority:** YES. Textually present and elaborated in the circular paragraph.
- **Direction 2 — Statutory authority:** YES. The prohibition on substituting statutory services with voluntary alternatives flows directly from the municipality's duty under sosialtjenesteloven §§ 18 and 27 (economic assistance and temporary housing) and the general principle that §14 cooperation supplements rather than displaces statutory obligations. The Process Inflation Findings classify this as a SUBSTANTIVE LEGAL OBLIGATION with full legal grounding.
- **Double authority gap:** NO
- **Category error:** NO

PROC-REQ-14.3

- **Direction 1 — Circular authority:** YES — the circular sentence is present. However, the Process Inflation Findings note: "the requirement lacks textual support under §14, as the statutory provision contains no procurement authority or delegation." The circular is therefore importing a requirement from a different legal domain (anskaffelsesloven) into the §14 framework without a §14 statutory anchor for doing so.
- **Direction 2 — Statutory authority:** PARTIAL. The requirement is legally correct as a matter of procurement law. However, its authority does not derive from sosialtjenesteloven §14. The social services statute contains no procurement provision. The requirement operates in the §14 circular as a cross-reference to a wholly separate legal domain.
- **Double authority gap:** NO (circular authority is present; only statutory authority under sosialtjenesteloven is partial)

- **Category error:** YES. The legal domain of this requirement is offentlig anskaffelsesrett (public procurement law), not social services law. Its presence in the §14 circular framework constitutes a category displacement: procurement compliance obligations are being bundled into a social services normative instrument that has no statutory basis to house them.

PROC-REQ-14.4

- **Direction 1 — Circular authority:** ABSENT. The requirement has no textual presence in the §14 circular paragraph. First-order authority gap confirmed.
- **Direction 2 — Statutory authority:** NO / PARTIAL. The Process Inflation Findings state: "lacks an explicit statutory citation and is not textually present in §14 or its preparatory works, making its exact legal derivation ambiguous." The obligation to share service and contact information with voluntary organizations cannot be derived from the text of §14 or its forarbeider by normal methods of legal interpretation.
- **Double authority gap:** YES. Circular authority is ABSENT and statutory authority is NO/PARTIAL. This is a double authority gap.
- **Category error:** NO (remains within the social services coordination domain)

PROC-REQ-14.5

- **Direction 1 — Circular authority:** PARTIAL. The specific examples in the circular (not referring to matutdeling or nattilbud) provide circular support for the underlying principle. However, the veileder's categorical formulation as a general prohibition covering all referral scenarios — not just the named examples — has no circular anchor for its broader scope.
- **Direction 2 — Statutory authority:** YES for the principle. The prohibition on substituting statutory obligations with voluntary services flows from the same statutory logic as PROC-REQ-14.2. However, insofar as the veileder states this as a standalone categorical prohibition broader than the circular's enumerated examples, the additional normative scope has only partial statutory derivation and no circular authority.
- **Double authority gap:** NO for the core principle; PARTIAL for the extended categorical formulation in the veileder.
- **Category error:** NO

STEP 3 — SCALE AND PROPORTIONALITY CHECK

The Anchor Document (Volume Driver Findings) addresses §§17, 18, 19, and 20a primarily and does not contain specific volume driver findings for §14. However, the structural mechanisms identified in the Anchor Document are applicable by analogy where noted.

PROC-REQ-14.1

- **Scale flag:** NO. The requirement uses permissive language (bør) and does not prescribe a specific organizational form, frequency, or documentation standard for

cooperation. No minimum caseload or specialist capacity is presupposed. The Anchor Document contains no finding applicable to this requirement.

PROC-REQ-14.2

- **Scale flag:** NO. This is a substantive prohibition, not a procedural or documentation obligation. No organizational capacity is presupposed beyond the general duty to provide statutory services, which the municipality is obligated to provide regardless of scale.

PROC-REQ-14.3

- **Scale flag:** PARTIAL. Compliance with anskaffelsesloven when services are purchased presupposes a level of formalized contracting activity — competitive tendering procedures, procurement documentation, legal review — that may be disproportionate for small municipalities entering into minor, low-value cooperation arrangements with local voluntary organizations. The Anchor Document's Cluster 2 (Internal Control Apparatus) is structurally analogous: requirements designed for organizations with dedicated administrative and legal capacity are applied uniformly regardless of organizational scale. The procurement compliance obligation has no graded or proportionate application for minor or informal arrangements. Since this requirement lacks circular authority within the sosialtjenesteloven framework (it is a category error), any disproportionate administrative burden it imposes on small municipalities lacks a social services regulatory foundation. Finding: The Anchor Document's Cluster 2 dynamic — where overhead requirements calibrated for larger bureaucracies fall on small offices with no back-office capacity — applies by structural analogy.

PROC-REQ-14.4

- **Scale flag:** PARTIAL. The obligation to identify relevant voluntary organizations, assess what information to share, establish communication channels, and document consideration is an administrative task that presupposes a coordination function. In small municipalities where NAV offices may consist of 3–10 staff handling all social services, this coordination overhead is not negligible. More critically: since this requirement has NO circular authority, any administrative burden it imposes falls entirely outside the framework the circular provides guidance for. Caseworkers and NAV leaders must navigate a veileder obligation that the primary normative instrument for §14 — the circular — does not address, acknowledge, or provide any framework for assessing. The structural logic of the Anchor Document's [D] Documentation Apparatus mechanism applies: sub-legal instruments generate compliance demands that the statutory and circular layer does not support, creating burden without regulatory foundation.

PROC-REQ-14.5

- **Scale flag:** NO for the core principle. The prohibition on referring individuals to voluntary organizations as an alternative to granting statutory assistance is a

substantive protection with no procedural overhead. Its application does not presuppose organizational capacity beyond the general social services function.

STEP 4 — PURPOSE CLASSIFICATION

PROC-REQ-14.1

- **Classification: [USER NEED]**
- **Justification:** The language of the source instrument is explicitly user-oriented: "Organisasjoner som representerer brukere...har kunnskap om brukernes behov, hvordan tjenestene fungerer og eventuelt hvordan tjenestene kan videreutvikles." The cooperation serves the quality, breadth, and development of services for users. The permissive register (bør) confirms the user-benefit framing — it is a recommendation designed to improve service outcomes, not a control mechanism. No internal administrative purpose is served by the requirement independent of this user benefit.

PROC-REQ-14.2

- **Classification: [USER NEED]**
- **Justification:** The requirement directly protects the legal rights and material welfare of users: "Frivillige organisasjoners arbeid innebærer et supplement til velferdstjenestene...skal ikke overta Nav-kontorets ansvar for lovpålagte tjenester." The specific examples (matutdeling, nattilbud) make the user protection concrete and individual. The purpose is to ensure the user receives their statutory entitlement rather than having that entitlement displaced by a voluntary offering. No internal control function is served.

PROC-REQ-14.3

- **Classification: [MIXED] — INTERNAL CONTROL primary; USER NEED secondary**
- **Justification:** The primary purpose of public procurement compliance is administrative and legal correctness in the contracting process: ensuring fair competition, preventing conflicts of interest, and maintaining audit trails. These functions serve the internal integrity of the contracting process, not the user's case outcome. However, a secondary user benefit exists: properly contracted services are more reliably delivered and accountable than informally arranged ones, which may indirectly benefit service recipients. The source instrument frames this as a conditional procedural trigger ("Hvis samarbeidet gjelder anskaffelser..."), which reinforces the procedural rather than substantive orientation. Since this requirement derives from a different legal domain (procurement law), its purpose must be assessed against social services users rather than procurement law's home purposes: in this frame, the primary function remains administrative compliance, not direct case benefit.

PROC-REQ-14.4

- **Classification: [MIXED] — INTERNAL CONTROL primary; USER NEED secondary**
- **Justification:** The veileder frames this as an administrative consideration for the municipality: "Kommunen bør derfor vurdere om slike organisasjoner bør få informasjon." The primary action required is an internal administrative assessment and a coordination act (sharing information with third parties). The secondary user benefit — that voluntary organizations better informed about NAV services may be able to direct potential users to them — is real but indirect. The user does not experience the requirement directly; the municipal administration does. The double-bør formulation ("bør vurdere om...bør få") signals a secondary-consideration status even within the veileder framework.

PROC-REQ-14.5

- **Classification: [USER NEED]**
- **Justification:** The veileder's prohibition directly protects the individual user's statutory right: "har ikke anledning til å henvise personer til frivillige organisasjoner som et alternativ til økonomisk sosialhjelp." The purpose is to prevent denial of statutory entitlement through improper referral. The prohibition is stated without qualification or administrative procedure — it is a substantive protection, not a process requirement.

STEP 5 — TRANSACTION COST CHARACTERIZATION

PROC-REQ-14.1 — [USER NEED] No transaction cost burden is identified. The requirement is permissive, outcome-oriented, and imposes no specific documentation, reporting, or procedural obligation on the caseworker or NAV leader. Compliance consists of ordinary relationship-building with voluntary organizations, which the circular leaves entirely to local discretion: "Nav-kontoret bestemmer hva det skal samarbeides om og hvordan."

PROC-REQ-14.2 — [USER NEED] No transaction cost burden is identified. The requirement is a substantive prohibition that operates as a decision constraint, not a documentation or reporting obligation. A caseworker must not refer users to voluntary services in place of statutory assistance — this is a negative obligation that imposes no administrative overhead.

PROC-REQ-14.3 — [MIXED — INTERNAL CONTROL primary] What the requirement demands: A NAV leader or caseworker involved in establishing service-purchasing cooperation with a voluntary organization must: (1) assess whether the arrangement constitutes "anskaffelse av tjenester" under procurement law; (2) if so, comply with the full procurement law regime including preparation of procurement documentation, advertisement (above relevant thresholds), evaluation of bids, and contract formalization; (3) maintain a procurement audit trail distinct from and in addition to the ordinary NAV case documentation system.

For whom: This burden falls primarily on the NAV leader and municipal administration, not the frontline caseworker. However, in small municipalities where the NAV leader is simultaneously the office's primary social services caseworker and administrative manager — a configuration confirmed as structurally typical in the Anchor Document — this procurement overhead falls on the same individual already carrying a full casework load.

Note on circular authority: Although this requirement is textually present in the circular, its legal basis lies in procurement law, not in sosialtjenesteloven §14. The circular provides no guidance on how to assess whether an arrangement constitutes a regulated anskaffelse, how to navigate threshold values, or how to reconcile procurement formalism with the informal partnership orientation of §14 cooperation. Caseworkers facing this question must look entirely outside the §14 normative framework for guidance.

PROC-REQ-14.4 — [MIXED — INTERNAL CONTROL primary] What the requirement demands: The municipality must: (1) identify which voluntary organizations are operative in the relevant domain; (2) conduct an internal assessment of whether these organizations should receive information about social services and NAV contact details; (3) where the assessment is affirmative, establish a communication mechanism for sharing this information; (4) implicitly document that this assessment has been conducted, since without documentation there is no demonstrable compliance with even the advisory obligation.

For whom: This demand falls on the NAV leader or a designated coordinator. In small municipalities, this falls on the same person carrying the full administrative and casework load identified in the Anchor Document's management overstretch pattern.

Critical note on circular authority: This requirement has NO circular authority. The §14 circular paragraph — the primary normative instrument governing NAV's cooperation with voluntary organizations — does not address, mention, or acknowledge this obligation. A caseworker or NAV leader attempting to identify their normative obligations under §14 from the circular would find no basis for this requirement. Compliance depends entirely on knowledge of the veileder, which is a secondary sub-legal instrument with no binding force. The transaction cost this requirement imposes therefore falls entirely outside any framework the circular provides guidance for. There is no circular-level standard against which compliance can be assessed, no circular-level procedure for how the assessment should be conducted, and no circular-level anchor for what information must be shared or with whom.

PROC-REQ-14.5 — [USER NEED] No transaction cost burden is identified. Like PROC-REQ-14.2, this is a substantive prohibition that operates as a decision constraint. The prohibition imposes no documentation, reporting, or procedural obligation; it simply forecloses one type of decision outcome. Insofar as the veileder's formulation is broader than the circular's specific examples, the additional normative scope does not generate additional administrative overhead — it merely extends the substantive protection to additional scenarios.

STEP 6 — CATALOG ENTRIES

REQUIREMENT ID: §14-REQ-1 (PROC-REQ-14.1)

PROVISION TEXT: Nav-kontoret bør samarbeide med brukergruppenes organisasjoner og med frivillige organisasjoner, herunder ideelle organisasjoner og sosiale entreprenører, both for generelle oppgaver and individuelle tjenester.

SOURCE INSTRUMENT: Circular — R35-00 pkt. 3.14.1

CIRCULAR AUTHORITY: PRESENT. The requirement is textually present in the circular paragraph using the same permissive register (bør) as the statute.

LEGAL AUTHORITY: YES. Sosialtjenesteloven §14 itself mandates this cooperation in identical permissive terms. The circular's extension to ideelle organisasjoner and sosiale entreprenører does not create shadow binding.

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: NO. The requirement is permissive, prescribes no specific organizational form or documentation standard, and presupposes no minimum capacity. No applicable finding in the Anchor Document.

PURPOSE: USER NEED — cooperation serves the quality and development of services for users, as stated explicitly in the circular's own rationale.

BURDEN DESCRIPTION: No transaction cost burden identified. The requirement is outcome-oriented and leaves form and scope entirely to local discretion.

KILL LIST CLASSIFICATION: No Kill List Action. The requirement has full circular and statutory authority, uses appropriately permissive language, and serves a clear user purpose with no disproportionate burden.

TRANSACTION COST CATEGORY: No Transaction Cost Identified

REQUIREMENT ID: §14-REQ-2 (PROC-REQ-14.2)

PROVISION TEXT: Voluntary organizations supplement but may not replace NAV's responsibility for statutory services. NAV-kontoret cannot refer users to charitable food distribution instead of providing economic assistance, or to night shelter instead of granting temporary housing.

SOURCE INSTRUMENT: Circular — R35-00 pkt. 3.14.1

CIRCULAR AUTHORITY: PRESENT. The requirement is textually present and elaborated with specific examples in the circular paragraph.

LEGAL AUTHORITY: YES. Derives from sosialtjenesteloven §§ 14, 18, and 27, and the general principle that statutory obligations cannot be displaced by voluntary activity. Process Inflation Findings classify this as a SUBSTANTIVE LEGAL OBLIGATION.

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: NO. The substantive prohibition imposes no organizational capacity requirement.

PURPOSE: USER NEED — directly protects the individual user's right to receive their statutory entitlement rather than having it displaced by voluntary provision.

BURDEN DESCRIPTION: No transaction cost burden identified. The requirement is a negative obligation (prohibition on a specific decision outcome) with no documentation or procedural overhead.

KILL LIST CLASSIFICATION: No Kill List Action. Full circular and statutory authority; clear user protection purpose; no administrative burden.

TRANSACTION COST CATEGORY: No Transaction Cost Identified

REQUIREMENT ID: §14-REQ-3 (PROC-REQ-14.3)

PROVISION TEXT: If cooperation between NAV and a voluntary organization involves the procurement of services, the municipality must comply with the Public Procurement Act (lov om offentlige anskaffelser).

SOURCE INSTRUMENT: Circular — R35-00 pkt. 3.14.1 (as a cross-reference to anskaffelsesloven)

CIRCULAR AUTHORITY: PRESENT in the sense that the sentence appears in the circular text. However, the legal authority underlying the requirement derives from procurement law, not from sosialtjenesteloven §14. The circular provides no procedural framework for implementing the requirement, no guidance on threshold values, and no mechanism for distinguishing regulated anskaffelser from informal cooperation. The circular's role here is notification rather than normative regulation.

LEGAL AUTHORITY: PARTIAL. The requirement is legally correct as a matter of procurement law and does not in itself contradict sosialtjenesteloven. However, sosialtjenesteloven §14 contains no procurement authority, delegation, or procedural basis. The Process Inflation Findings confirm: "the requirement lacks textual support under §14."

DOUBLE AUTHORITY GAP: NO (circular authority is present as notification; statutory authority under procurement law is full; only the §14 statutory anchor is absent)

CATEGORY ERROR: YES. The requirement belongs to the legal domain of offentlig anskaffelsesrett (public procurement law), not social services law. Its placement in the §14 circular framework displaces a procurement law obligation into a social services normative instrument without any statutory basis in sosialtjenesteloven for doing so. The consequence is that NAV leaders and caseworkers reading the §14 circular for guidance on their social services obligations encounter a procurement compliance trigger embedded in a framework that provides no guidance for navigating it.

SCALE FLAG: PARTIAL. Procurement compliance presupposes administrative capacity for competitive tendering, contract documentation, and audit trails that may be structurally disproportionate for small municipalities entering into minor or low-value cooperation arrangements. This mirrors the Anchor Document's Cluster 2 (Internal Control Apparatus) dynamic: bureaucratic overhead calibrated for larger organizations is applied uniformly regardless of municipal scale. The Anchor Document's finding that small offices collapse under compliance architectures designed for larger bureaucracies applies by structural analogy to procurement formalism in a low-volume cooperation context.

PURPOSE: MIXED — INTERNAL CONTROL primary (ensuring administrative and legal correctness of the contracting process; audit trail compliance), USER NEED secondary (properly contracted services are more reliably delivered and accountable). In the social services frame, the primary function is administrative compliance.

BURDEN DESCRIPTION: A NAV leader or administrator must assess whether a cooperation arrangement constitutes a regulated anskaffelse, navigate threshold determinations under anskaffelsesloven, prepare procurement documentation if required, and maintain a procurement audit trail separate from the NAV case documentation system. In small municipalities where the NAV leader simultaneously carries frontline casework (confirmed as structurally typical in the Anchor Document), this overhead falls on the same already-stretched individual. The circular provides no guidance for this navigation — caseworkers must look entirely outside the §14 normative framework to discharge a compliance obligation embedded within it.

KILL LIST CLASSIFICATION: Category C — Clarification. The requirement is legally correct and cannot be removed. However, its placement in the §14 circular without contextual guidance on threshold application, proportionality for small-scale informal arrangements, or the distinction between regulated procurement and informal partnership creates shadow complexity. The room for maneuver — specifically, the space between informal collaboration agreements and regulated anskaffelser — needs to be made explicit to reduce the compliance uncertainty that the bare cross-reference currently creates. Additionally, a clear statement that this obligation derives from anskaffelsesloven rather than from sosialtjenesteloven §14 would reduce category confusion.

TRANSACTION COST CATEGORY: Documentation Inflation; Structural Disproportionality (for small municipalities)

REQUIREMENT ID: §14-REQ-4 (PROC-REQ-14.4)

PROVISION TEXT: The municipality should consider whether voluntary organizations should receive information about available social services and how users can contact the NAV office.

SOURCE INSTRUMENT: Veileder — Veileder om økonomisk stønad (identified in Process Inflation Findings as PROC-REQ-14.4)

CIRCULAR AUTHORITY: ABSENT. This requirement has no textual presence in the §14 circular paragraph. It is entirely invisible from the circular. First-order authority gap confirmed. Consequence: caseworkers and NAV leaders reading the §14 circular for normative guidance on cooperation with voluntary organizations would find no basis for this obligation. Compliance depends on knowledge of a secondary sub-legal instrument (the veileder) that operates outside the primary regulatory framework for this paragraph.

LEGAL AUTHORITY: NO / PARTIAL. The Process Inflation Findings state: "lacks an explicit statutory citation and is not textually present in §14 or its preparatory works, making its exact legal derivation ambiguous." There is no identifiable anchor in sosialtjenesteloven §14 or its forarbeider for a specific information-sharing obligation toward voluntary organizations.

DOUBLE AUTHORITY GAP: YES. Circular authority is ABSENT and statutory authority is NO/PARTIAL. This is a double authority gap: the obligation operates entirely outside both the circular framework and any identifiable statutory mandate.

CATEGORY ERROR: NO (remains within the social services coordination domain)

SCALE FLAG: PARTIAL. The obligation to conduct an assessment of which voluntary organizations exist, what information to share, and to establish communication mechanisms presupposes coordination capacity. In small municipalities where NAV leaders operate with no administrative back-office support, this coordination overhead — however modest in absolute terms — falls on the same stretched individual identified in the Anchor Document as management-overstretched. More critically: because this requirement has NO circular authority, any administrative burden it imposes is entirely without regulatory foundation in the primary normative instrument. The Anchor Document's structural logic applies: sub-legal instruments generating compliance demands that the statutory and circular layer does not support constitute disproportionate burden without regulatory foundation.

PURPOSE: MIXED — INTERNAL CONTROL primary (an administrative assessment and coordination act directed at third-party organizations); USER NEED secondary (voluntary organizations better informed about NAV services may direct potential users to statutory help). The veileder's double-bør formulation ("bør vurdere om...bør få") reflects this secondary status even within the veileder's own register.

BURDEN DESCRIPTION: The requirement demands: (1) identification of relevant voluntary organizations operating in the municipality; (2) an internal assessment of whether and what information these organizations should receive; (3) establishment of a communication channel for sharing this information; (4) implicit documentation that the assessment has been conducted (without which there is no demonstrable compliance). This burden falls on the NAV leader or coordinator. In small municipalities, it falls on the same individual simultaneously serving as primary caseworker, approver, and administrative manager. Since

this requirement has NO circular authority, the transaction cost it imposes falls entirely outside any framework the circular provides guidance for. Caseworkers must comply with an obligation that the primary normative instrument governing their work under §14 does not address, acknowledge, or provide any procedural basis for. There is no circular standard against which compliance can be assessed and no circular-level anchor for what information must be shared, with whom, or at what frequency.

KILL LIST CLASSIFICATION: Category A — Removal. The requirement lacks both circular authority and identifiable statutory authority. It derives from a veileder with no direct anchor in sosialtjenesteloven §14 or its preparatory works. As a double authority gap requirement, it constitutes an obligation that the social services normative framework — both at the circular and statutory level — does not recognize. The transaction cost it imposes on caseworkers and NAV leaders is therefore unsupported by any regulatory framework. The requirement is a candidate for repeal from the social services normative framework. If the underlying coordination purpose is considered substantively valuable, it could be reintroduced as an explicit, bounded recommendation in the §14 circular with transparent statutory derivation — but in its current form, operating invisibly from a veileder without circular or statutory authority, it cannot be defended against a sludge audit standard.

TRANSACTION COST CATEGORY: Documentation Inflation; Reporting Overhead; Combined Burden (double authority gap amplifies the disproportionality)

REQUIREMENT ID: §14-REQ-5 (PROC-REQ-14.5)

PROVISION TEXT: NAV-kontoret has no authority to refer individuals to voluntary organizations as an alternative to granting statutory economic social assistance.

SOURCE INSTRUMENT: Veileder — Veileder om økonomisk stønad (identified in Process Inflation Findings as PROC-REQ-14.5)

CIRCULAR AUTHORITY: PARTIAL. The circular paragraph captures the underlying principle through specific examples (not referring to matutdeling instead of economic assistance, not referring to nattilbud instead of temporary housing). The veileder's categorical formulation — a standalone general prohibition stated in terms of institutional authority ("har ikke anledning til") — goes beyond the circular's enumerated examples. The broader categorical statement has no circular anchor; only the specific named instances do.

LEGAL AUTHORITY: YES for the principle. The prohibition derives from the same statutory logic as PROC-REQ-14.2: sosialtjenesteloven §§14, 18, and 27 establish statutory obligations that cannot be displaced by referral to voluntary services. The Process Inflation Findings classify this as a SUBSTANTIVE LEGAL OBLIGATION.

DOUBLE AUTHORITY GAP: NO. The core principle has both circular and statutory support. The veileder's broader categorical formulation has partial circular authority (through the specific examples) and full statutory authority (since the principle applies to all statutory services, not just the named examples).

CATEGORY ERROR: NO

SCALE FLAG: NO. The prohibition is a substantive protection with no organizational capacity requirement.

PURPOSE: USER NEED — directly protects the individual user's right to receive statutory economic assistance rather than having that right extinguished by referral to a voluntary alternative. The veileder's categorical formulation reinforces rather than expands this protection.

BURDEN DESCRIPTION: No transaction cost burden identified. The requirement is a substantive prohibition (a negative obligation constraining one decision outcome). It imposes no documentation, reporting, or procedural overhead on the caseworker. The veileder's broader formulation, while not anchored in the circular, does not generate additional administrative burden — it simply extends the substantive protection to scenarios beyond the circular's specific examples.

KILL LIST CLASSIFICATION: No Kill List Action for the core principle. The requirement has full circular support (through specific examples) and statutory authority. For the veileder's broader categorical formulation: Category C — Clarification. The room for maneuver between the circular's specific examples and the veileder's general prohibition could be made explicit in the circular itself, removing the need for caseworkers to navigate between two instruments to understand the full scope of the obligation. Consolidating the general prohibition into the circular paragraph directly would eliminate the current situation where the most precise formulation of an important user protection exists only in a veileder, invisible from the circular.

TRANSACTION COST CATEGORY: No Transaction Cost Identified

CLOSING COMPARATIVE NOTE

Requirements identified from Process Inflation Findings: 5 (PROC-REQ-14.1 through 14.5)

Requirements visible from the circular paragraph alone: At most 4 substantive obligations (14.1, 14.2, 14.3, and a partial version of 14.5 through specific examples). PROC-REQ-14.4 is completely invisible from the circular. The full categorical scope of PROC-REQ-14.5 is partially invisible. Starting from the circular, an analyst would have zero visibility of the veileder layer.

Double authority gaps: 1 (PROC-REQ-14.4 — absent from both circular and statute)

Category errors: 1 (PROC-REQ-14.3 — belongs to procurement law, not social services law)

Kill List breakdown:

- Category A — Removal: 1 (§14-REQ-4 / PROC-REQ-14.4)
- Category B — Status Change: 0
- Category C — Clarification: 2 (§14-REQ-3 / PROC-REQ-14.3 for procurement cross-reference scope and proportionality guidance; §14-REQ-5 / PROC-REQ-14.5 for consolidating the general prohibition into the circular)
- No Kill List Action: 2 (§14-REQ-1, §14-REQ-2)

Primary transaction cost categories by frequency:

- Documentation Inflation: 2 occurrences (§14-REQ-3, §14-REQ-4)
- Structural Disproportionality: 2 occurrences (§14-REQ-3 for small municipalities; §14-REQ-4 as combined burden amplified by double authority gap)
- Reporting Overhead: 1 occurrence (§14-REQ-4)
- No Transaction Cost Identified: 3 occurrences (§14-REQ-1, §14-REQ-2, §14-REQ-5)

Synthesis observation for the main report: §14 is structurally one of the lightest paragraphs in the circular from a sludge perspective. Its dominant register is permissive (bør), its core user protections are well-anchored, and it does not generate the documentation and procedural compliance clusters documented in §§17–19 and §20a. Nevertheless, the audit reveals two analytically significant problems that would be entirely invisible from the circular alone. First, a veileder-sourced requirement (14.4) is operating in the §14 domain without any circular or statutory authority — a double authority gap that places caseworkers under an invisible obligation the primary normative instrument for the paragraph does not recognize. Second, a procurement law cross-reference (14.3) has been embedded in the §14 circular without contextual guidance, creating a category error that generates compliance uncertainty disproportionate to the coordination-oriented purpose of §14. Both findings confirm the methodological value of the Process Inflation Findings as the analytical starting point: neither would have been surfaced by circular-only analysis.

SLUDGE AUDIT — § 15 BOLIGER TIL VANSKELIGSTILTE

Structured Identification of Documentation Requirements and Procedural Obligations

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PRELIMINARY METHODOLOGICAL NOTE

Requirements visible from the Process Inflation Findings (REFERENCE DOCUMENT): 18

Requirements visible from the circular paragraph alone (CONTEXT DOCUMENT): 11

Requirements with no textual presence in the circular: 7 (Requirements 12–18)

The structural observation is analytically significant: 39% of all requirements operating under § 15 are invisible if the circular paragraph is treated as the primary enumeration instrument. Starting from the circular alone would produce a systematically incomplete picture of the normative burden on NAV offices under this provision.

Source mapping for requirements invisible from the circular:

Requirement	Source Instrument	Instrument Type
R12	Kommunebrev 2025	(a) Kommunebrev
R13	Veiviser for midlertidig botilbud	(b) Veileder
R14	Veiviser for midlertidig botilbud	(b) Veileder
R15	Retningslinjer for samarbeid mellom barnevernstjenesten og Nav-kontoret	(d) Guidance document attached to cooperative framework
R16	Nasjonal veileder Kriminalomsorg og NAV	(b) Veileder
R17	Veiviser for midlertidig botilbud	(b) Veileder
R18	Veiviser for midlertidig botilbud	(b) Veileder

Of the 7 invisible requirements, four derive from the same sub-legal instrument (the Veiviser for midlertidig botilbud). This means a single veileder — whose relationship to § 15 is already contested in the Process Inflation Findings (requirements 13, 14, 17, and 18 all derive from § 27 territory, not § 15) — is generating more invisible normative content for this paragraph than the circular itself generates visible content on the same topics.

STEP 1 — IDENTIFICATION OF ALL REQUIREMENTS

ID	Exact Obligation	Source Instrument	Explicit / Implicit	Textual Presence in Circular
R1	Kommunen skal bistå vanskeligstilte på boligmarkedet etter reglene i lov 20. desember 2022 nr. 121	Circular R-35 § 15 / statutory delegation	Explicit	YES
R2	Kommunen i arbeids- og velferdsforvaltningen skal medvirke i kommunens boligsosiale arbeid	Circular R-35 § 15	Explicit	YES
R3	Nav-kontoret bør så langt mulig medvirke til å unngå konsentrasjon av boliger til vanskeligstilte i bestemte områder	Circular R-35 § 15, section 3.15.1	Explicit	YES
R4	Nav-kontoret skal være oppmerksom på bosituasjonen til familier med barn og unge, vanskeligstilte ungdom og personer i overgangs- eller etableringsfaser	Circular R-35 § 15, section 3.15.1	Explicit	YES
R5	Tiltak og tjenester for å sikre en stabil bosituasjon bør være en del av individuell plan	Circular R-35 § 15, section 3.15.1	Explicit	YES
R6	Bidra med sin kunnskap i den kommunale planleggingen av hvordan boligproblem kan løses for vanskeligstilte	Circular R-35 § 15, section 3.15.2	Explicit	YES
R7	Gjøre andre kommunale organer kjent med behovet for ordinære boliger og tilpassede boligløsninger	Circular R-35 § 15, section 3.15.2	Explicit	YES
R8	Samarbeide med andre instanser, som Husbanken, om tiltak som kan lette situasjonen for vanskeligstilte	Circular R-35 § 15, section 3.15.2	Explicit	YES

R9	Tilby tjenestemottaker råd og veiledning for å bidra til å sikre en tilfredsstillende bosituasjon	Circular R-35 § 15, section 3.15.2	Explicit	YES
R10	Bistå tjenestemottakere som kan ha behov for tjenester i boligen ved å etablere kontakt med kommunale helse- og omsorgstjenester	Circular R-35 § 15, section 3.15.2	Explicit	YES
R11	Bistå tjenestemottaker med å skaffe bolig når det er nødvendig, herunder hjelp med å finne leiligheter, ringe for å avtale visning, eventuelt bli med på visning	Circular R-35 § 15, section 3.15.2	Explicit	YES
R12	Nav-kontoret har en plikt til å medvirke i kommunens boligsosiale arbeid (restatement in Kommunebrev 2025)	Kommunebrev 2025	Explicit	NO
R13	Når midlertidig botilbud benyttes, skal Nav-kontoret så vidt mulig umiddelbart iverksette tiltak for å sikre overgang til varig bolig	Veiviser for midlertidig botilbud	Explicit	NO
R14	Det er nødvendig at det tidlig blir kartlagt og avklart hva som skal til for at dette blir en varig og stabil bosituasjon	Veiviser for midlertidig botilbud	Explicit	NO
R15	Barnevernstjenesten og Nav-kontoret bør inngå avtaler som regulerer samarbeid og ansvarsfordeling når ungdom som skal etableres i egen bolig	Retningslinjer for samarbeid mellom barnevernstjenesten og Nav-kontoret	Explicit	NO
R16	Nav-kontoret har en plikt til å medvirke, herunder å bistå tjenestemottaker med å skaffe bolig når det er nødvendig (criminal justice context)	Nasjonal veileder Kriminalomsorg og NAV	Explicit	NO
R17	Hvis Nav-kontoret ikke finner tilbud, eller tilbudet ikke er kvalitetsmessig forsvarlig, bør det sendes avvik	Veiviser for midlertidig botilbud	Explicit	NO

R18	Bruker får vedtak om midlertidig botilbud	Veiviser for midlertidig botilbud	Explicit	NO

STEP 2 — LEGAL AUTHORITY CHECK

Direction 1 — Circular authority: Is this requirement contained in the circular paragraph?
Direction 2 — Statutory authority: Has this requirement been flagged as lacking direct legal authority in the Social Services Act?

ID	Circular Authority	Statutory Authority	Double Authority Gap	Category Error	Notes
R1	YES	YES — directly delegated from § 15 to lov 2022 nr. 121	NO	NO	Core statutory obligation
R2	YES	YES — established by § 15	NO	NO	Core statutory obligation
R3	YES	PARTIAL — "medvirke" is broad; spatial distribution goal is a circular elaboration not explicit in statute	NO	NO	PIF flags elimination of discretion through circular specificity

R4	YES	PARTIAL — the SHALL-monitor obligation targeting named demographic groups is a circular addition; § 15 contains no enumeration of monitored groups	NO	NO	PIF: "circular converts open normative standard into a SHALL-monitor obligation targeting named demographic groups, eliminating the authority's freedom to determine the focus of its participation"
R5	YES	NO (for § 15) — § 28 governs individual plans; neither § 15 nor its preparatory works authorize this as a component of the medvirke duty	NO	NO	Circular authority present but statutory authority is misattributed; PIF flags this explicitly
R6	YES	YES — PIF confirms preparatory works identify planning participation as a recognized legal obligation	NO	NO	No authority gap
R7	YES	YES — PIF confirms internal information-sharing duty is a recognized component of "medvirke" per preparatory works	NO	NO	No authority gap

R8	YES	PARTIAL — naming Husbanken specifically converts the open "medvirke" standard into a SHALL-cooperate obligation with a named institution, eliminating discretion over institutional partnerships	NO	NO	PIF: "the circular converts the open 'medvirke' standard into a specific SHALL-cooperate obligation with a named institution"
R9	YES	YES — råd og veiledning duty is established by § 17 read with § 15	NO	NO	No authority gap
R10	YES	YES — substantive bistå duty under § 15	NO	NO	No authority gap
R11	YES	YES — substantive bistå duty under § 15	NO	NO	No authority gap
R12	**NO** (Kommunebrev, not circular)	YES in substance (restates R2 content) — the content has authority but the instrument creating a parallel obligation does not derive from the circular	NO	NO	Circular authority absent; content is duplicative of R2 rather than adding new obligation; this creates a parallel compliance demand outside the circular framework

R13	**NO**	PARTIAL — "umiddelbart" temporal specification has no basis in § 15 or its preparatory works; the transition duty finds more natural home in § 27; PIF: "completely absent from the statutory text"	**YES — DOUBLE AUTHORITY GAP**	NO	Operates entirely outside the § 15 circular and adds a specific temporal obligation absent from statute
R14	**NO**	NO — using necessity language ("nødvendig") and temporal specification ("tidlig") for a mandatory early-stage assessment not derived from statute or preparatory works; PIF flags both elements	**YES — DOUBLE AUTHORITY GAP**	NO	Both circular authority and statutory authority absent
R15	**NO**	NO (for § 15) — formal written cooperation agreements with child welfare are not found in § 15 or its preparatory works; authority must derive from § 13 or general administrative law, not § 15	**YES — DOUBLE AUTHORITY GAP**	YES — requirement belongs to § 13 / general administrative law domain, not the § 15 housing assistance framework	The source instrument attributes a § 13-type obligation to § 15

R16	**NO**	YES in substance — restates the R11 bistå duty in the criminal justice context; content has authority from § 15	NO	NO	No double gap; the veileder does legitimate contextual elaboration, though it creates a parallel compliance reference outside the circular
R17	**NO**	NO — deviation reporting lacks any authority from the "bistå" or "medvirke" duties in § 15; derives from quality management / supervisory authority regulations (internkontrollforskriften / HMS framework)	**YES — DOUBLE AUTHORITY GAP**	YES — requirement belongs to the quality management / internkontroll legal domain, not the Social Services Act § 15	PIF: "quality management procedure that derives from supervisory authority regulations rather than the Social Services Act"
R18	**NO**	NO (for § 15) — the formal decision requirement derives from § 27 and forvaltningsloven, not § 15; PIF: "misattributed to § 15"	**YES — DOUBLE AUTHORITY GAP**	YES — requirement belongs to § 27 / forvaltningsloven domain	Misattributed provision creates a spurious burden under § 15

Summary of authority gaps:

- Double authority gaps: R13, R14, R15, R17, R18 (5 requirements)
- Category errors: R15 (§ 13 domain), R17 (internkontroll/quality management domain), R18 (§ 27 / forvaltningsloven domain) — 3 requirements

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STEP 3 — SCALE AND PROPORTIONALITY CHECK

The Anchor Document addresses §§ 17–20a. Cross-referencing its structural findings to § 15 requirements requires identifying analogous mechanisms. The following mappings are structurally warranted:

- **[C] Coordination Infrastructure findings** (formal written inter-agency cooperation agreements generating sanctions when small municipalities rely on informal contact) → directly applicable to R15
- **[D] Documentation Apparatus findings** (deviation reporting systems: Compilo, ASYS, QM+ inaccessible or redundant in micro-offices) → directly applicable to R17
- **[D] Documentation Apparatus** (vedtak production burden) → applicable to R18
- **[C] Coordination Infrastructure** (institutional cooperation with named external partners) → applicable to R8 and R13
- **[P] Procedural Continuity** (mandatory early-stage assessment procedures) → applicable to R14
- **Cluster 2 — Internal Control Apparatus** (cumulative burden of deviation software + spot checks + formal agreements) → applicable to R15 + R17 combined

ID	Scale Flag	Anchor Document Finding Applied
R1	NO	Core statutory obligation; not a volume driver
R2	NO	Core statutory obligation; not a volume driver
R3	NO	Normative goal, not an operational volume driver on its own
R4	PARTIAL	Systematic monitoring of named demographic subgroups requires dedicated tracking capacity. Analogous to [C] coordination infrastructure findings: small offices lack the organizational differentiation to maintain targeted monitoring streams. No specific § 15 finding in Anchor Document, but the structural prediction is supported by the documentation apparatus analysis.
R5	NO	Individual plan is case-by-case; does not presuppose volume or organizational scale above normal §28 machinery
R6	PARTIAL	Participation in municipal planning processes requires designated capacity. In a micro-office where the NAV leader simultaneously performs frontline casework, planning participation competes directly with service delivery. Analogous to management overstretch findings across Hjelmeland, Vik, Hjelmeland.
R7	PARTIAL	Systematic communication to other municipal organs implies a structured information-sharing function. Consistent with [C] findings: informal knowledge-sharing is how small offices operate; formal systematic reporting presupposes a back-office function that does not exist.

R8	PARTIAL	Named institutional cooperation with Husbanken implies maintained contact procedures. Analogous to [C] inter-agency coordination findings. Anchor Document: "small offices coordinate naturally through personal contact between a few colleagues across departments; the requirement to formalize this into institutional agreements imposes overhead calibrated for larger, siloed bureaucracies."
R9	NO	Direct user service; not a volume driver
R10	NO	Direct user service; not a volume driver
R11	NO	Direct user service; not a volume driver
R12	NO	Content duplicates R2; no additional volume driver unless Kommunebrev adds new compliance tracking demand
R13	YES	"Umiddelbart" temporal specification requires immediate activation of transition planning machinery. Analogous to [P] Procedural Continuity findings: mandatory pipeline triggered by an external event (§ 27 temporary housing use) presupposes capacity for immediate structured response. In micro-offices where caseworkers manage all social services domains simultaneously, this trigger cannot create a dedicated response without displacing other work. Anchor Document Cluster 2 (internal control apparatus): cumulative demands requiring same individual to be simultaneously caseworker, approver, and quality controller. Since circular authority is ABSENT (Step 2), this disproportionate burden is unsupported by any framework the circular provides guidance for.
R14	PARTIAL	Early mandatory assessment (kartlegging) implies a standardized intake procedure triggered at a specific early stage. Analogous to [D] Documentation Apparatus and [P] Procedural Continuity findings: a pipeline triggered too rarely to become habitual cannot produce consistent compliance. Since circular authority is ABSENT, the burden falls outside any circular guidance framework.
R15	YES	Formal written cooperation agreements with child welfare service are directly addressed in Anchor Document. Cited mechanism: [C] Coordination Infrastructure sub-type (ii): "external coordination — the requirement for written inter-agency agreements with child welfare, substance abuse services, etc. — produces sanctions when small municipalities rely on informal case-by-case contact." Anchor Document explicitly identifies this as generating sanctions where informal but functioning coordination exists. Since circular authority is ABSENT and statutory authority for § 15 is absent, this disproportionate burden is entirely without regulatory foundation under § 15.
R16	NO	Contextual restatement of R11; no additional volume driver

R17	YES	Deviation reporting in formal software systems is directly addressed in Anchor Document. Mechanism [D]: formal deviation registration in Compilo, Risk Manager, QM+, ASYS generates structural failures in micro-offices. Anchor Document: "multiple reports document municipalities where the deviation software is physically inaccessible to NAV caseworkers because it sits in the municipal IT environment to which they lack credentials." In the § 15 context, this same structural inaccessibility problem applies. Since both circular authority and statutory authority are ABSENT, the scale burden imposed is entirely unsupported by the normative framework.
R18	PARTIAL	Vedtak production obligation (from § 27, misattributed to § 15) analogous to [D] Documentation Apparatus for vedtak under § 17. However, vedtak for temporary housing is not as procedurally complex as § 17 debt counseling decisions; scale sensitivity is partial.

STEP 4 — PURPOSE CLASSIFICATION

ID	Classification	Justification
R1	USER NEED	Directly establishes the user's entitlement to housing assistance from the municipality. The circular framing ("Kommunen skal bistå") makes clear the obligation runs toward the user.
R2	USER NEED	Establishes the institutional duty that enables the user's access to coordinated housing assistance. No documentation function; entirely substantive.
R3	MIXED (primary: USER NEED; secondary: INTERNAL CONTROL)	The spatial distribution goal ("unngå konsentrasjon") ultimately serves social inclusion for users and their communities. The secondary internal control element is present: Nav offices must track and report area distributions, which serves planning functions. The "bør" register and the user-facing framing in 3.15.1 confirm USER NEED as primary.
R4	INTERNAL CONTROL	The requirement directs caseworker attention to named demographic groups as a monitoring obligation ("skal være oppmerksom på"). As the PIF notes, this eliminates discretion over which groups to prioritize without adding to what the caseworker does for any individual user. The obligation serves to standardize monitoring practice for supervisory compliance purposes, not to improve any individual user's case assessment.

R5	MIXED (primary: USER NEED; secondary: INTERNAL CONTROL)	Inclusion of housing measures in an individual plan serves the user's coordination needs and continuity of care. However, the documentation requirement — that this must be recorded in the individuell plan instrument under § 28 — serves administrative tracking and coordination functions secondary to the user's housing outcome. The "bør" register and the user-facing framing confirm USER NEED as primary, but the documentation dimension creates an [INTERNAL CONTROL] overlay.
R6	MIXED (primary: INTERNAL CONTROL; secondary: USER NEED)	Contributing knowledge to municipal planning is systemic rather than individual; the immediate beneficiary is the planning process and the municipality's organizational capacity, not any user's individual case outcome. The user benefit is indirect and aggregate. Source language ("Bidra med sin kunnskap i den kommunale planleggingen") identifies this as an organizational contribution function. Primary classification: INTERNAL CONTROL through its function in the administrative-governmental system.
R7	MIXED (primary: INTERNAL CONTROL; secondary: USER NEED)	Making other municipal organs aware of housing needs is a systemic information-sharing function. It serves internal governmental coordination rather than direct user case assessment. Users benefit only through the systemic effect of better-informed housing policies, not through any individual interaction. Source language ("Gjøre andre kommunale organer kjent") establishes the target as other organs, not the user.
R8	MIXED (primary: INTERNAL CONTROL; secondary: USER NEED)	The obligation to cooperate with named institutions (Husbanken) serves institutional relationship-maintenance functions. The specific naming of Husbanken — eliminating discretion — suggests this reflects a predetermined administrative partnership architecture rather than a response to individual user needs. Users benefit indirectly from access to programs; the obligation to maintain the institutional relationship is administrative.
R9	USER NEED	Directly provides advice and guidance to the individual user. No documentation or reporting function whatsoever; entirely user-facing substantive service.
R10	USER NEED	Direct user-facing service linking users to in-home services. Entirely substantive; no documentation or reporting dimension.
R11	USER NEED	Direct user-facing housing procurement assistance. Among the most concrete user-need provisions in the circular; specifies practical actions (calling for viewings, attending viewings) that are purely service delivery.

R12	INTERNAL CONTROL	This is a Kommunebrev restatement of R2 for compliance tracking and reporting purposes. It adds nothing to the user's experience of service but creates a separate compliance reference for administrative review. The function is entirely to document that the obligation is acknowledged in the Kommunebrev context; it serves internal verification and reporting of the duty, not the user.
R13	MIXED (primary: USER NEED; secondary: INTERNAL CONTROL)	The substantive goal — transition to permanent housing — is a genuine user need. However, the "umiddelbart" temporal specification and the procedural trigger (any use of § 27 temporary housing automatically activates the requirement) serve to standardize and document the administrative response for supervisory purposes. The temporal precision and automatic trigger are INTERNAL CONTROL elements; the transition goal is USER NEED. Primary: USER NEED.
R14	MIXED (primary: USER NEED; secondary: INTERNAL CONTROL)	Early assessment (kartlegging) of what is needed for permanent housing serves the user's long-term stability. However, the mandatory timing ("tidlig") and necessity framing ("nødvendig") convert this into a procedurally specified documentation obligation that must be executed at a defined point in the process — this serves the supervisory audit trail. Primary: USER NEED; secondary: INTERNAL CONTROL through procedural specificity.
R15	INTERNAL CONTROL	Formal written cooperation agreements between Nav-kontoret and barnevernstjenesten regulate administrative responsibilities between organs, not the user's actual case. The user benefits only indirectly through having a clearer institutional framework. The requirement's source (Retningslinjer for samarbeid — a coordination framework document) confirms its purpose is inter-institutional relationship governance. In relation to § 15 social services users, this is pure INTERNAL CONTROL.
R16	USER NEED	Directly articulates the housing procurement duty for users released from criminal justice supervision. The veileder applies the same substantive duty as R11 to a specific population. No documentation or reporting function; entirely substantive.
R17	INTERNAL CONTROL	Deviation reporting to a quality management system (Compilo, QM+, Risk Manager) when housing offers are not found or are inadequate is a pure quality management / supervisory audit function. The PIF confirms it "derives from supervisory authority regulations." No bearing on the individual user's case outcome; entirely serves internal documentation, management oversight, and supervisory compliance. In relation to social services users, it is entirely INTERNAL CONTROL.

R18	MIXED (primary: USER NEED; secondary: INTERNAL CONTROL)	A formal administrative decision (vedtak) gives the user legal rights including appeal. This is USER NEED. However, the specific attribution of the vedtak obligation to § 15 rather than § 27 creates a documentation burden that is misplaced: the vedtak is already required under § 27 and forvaltningsloven regardless of § 15. The § 15 attribution creates an additional procedural footprint that serves only administrative coverage rather than additional user protection. Primary: USER NEED (in its correct § 27 home); in the § 15 context: INTERNAL CONTROL through misattribution.

STEP 5 — TRANSACTION COST CHARACTERIZATION

For each requirement classified as [INTERNAL CONTROL] or [MIXED]:

R3 (MIXED): Caseworkers and NAV leaders must consider spatial distribution effects when advising on or coordinating housing placements. In practice, this requires awareness of where other vanskeligstilte are housed, which requires access to mapping or distribution information from the municipality. The circular provides guidance (bør) but this still creates a soft monitoring obligation. The transaction cost is low individually but cumulative with R4. No circular guidance is absent since R3 is present in the circular.

R4 (INTERNAL CONTROL): Caseworkers must maintain active, organized awareness of housing situations specifically for three named demographic subgroups: families with children and youth, disadvantaged youth, and persons in transitional phases. This requires some form of case flagging or monitoring discipline beyond general casework. For whom: primarily for supervisory compliance purposes — demonstrating that the office has a monitoring posture toward these groups. The obligation has no direct bearing on any individual user's case unless the monitoring produces an action, which is governed by other requirements. The circular provides the SHALL-language but the statutory authority is only PARTIAL; the circular adds the named-group specificity without statutory backing for that specificity.

R5 (MIXED): Caseworkers must actively integrate the § 15 housing assistance work into the § 28 individuell plan instrument. This requires coordination between the housing work done under § 15 and the formal individual planning process under § 28, including documentation in the individuell plan format. The transaction cost is: ensuring the separate individuell plan documentation reflects housing measures, which requires cross-provision coordination that a small office may struggle to maintain as a consistent routine. Note: the obligation appears in the § 15 circular but its legal basis is § 28; this means the circular is adding a cross-provision documentation demand without explicit statutory anchoring in § 15 itself.

R6 (MIXED): Caseworkers or the NAV leader must participate in municipal housing planning processes and prepare written knowledge contributions. For whom: other municipal organs conducting planning; ultimately for supervisory purposes demonstrating participation. The transaction cost is: preparing substantive inputs on housing needs, attending planning

meetings, and documenting the office's participation. In micro-offices where the NAV leader also performs frontline casework, planning participation directly displaces service delivery time. No circular guidance is absent; R6 is present in the circular.

R7 (MIXED): Caseworkers or the NAV leader must systematically communicate housing needs to other municipal organs. For whom: other municipal departments, ultimately for supervisory purposes demonstrating systematic information-sharing. Transaction cost: identifying what information to share, preparing it in a form suitable for other organs, and maintaining evidence of having done so. This is an organizational function, not a user service function. No circular guidance absent.

R8 (MIXED): Caseworkers or the NAV leader must maintain active institutional cooperation with Husbanken specifically. This requires established contact procedures, regular communication, and documentation that the cooperation exists. For whom: Husbanken and for supervisory review. Transaction cost: maintaining a named institutional relationship that requires time and coordination independent of individual user cases. The circular names Husbanken specifically, eliminating discretion; the statutory authority is only PARTIAL. The circular guidance is present but the naming of a specific institution may exceed what the statute authorizes.

R12 (INTERNAL CONTROL): The Kommunebrev creates a parallel compliance reference for R2's duty. The transaction cost is that caseworkers and leaders must now be aware of and comply with a duty as stated in two separate instruments (the circular and the Kommunebrev), creating a parallel compliance documentation demand. For whom: Kommunebrev compliance tracking and administrative reporting. The transaction cost is low in isolation — this is substantively duplicative — but it operates outside the circular framework, meaning caseworkers must comply with an obligation that the primary normative instrument (the circular) does not specifically require through this instrument.

R13 (MIXED) — No Circular Authority: When temporary housing (§ 27) is provided, caseworkers must immediately (umiddelbart) activate a transition planning process oriented toward permanent housing. For whom: supervisory documentation of the transition planning initiation. Transaction cost: drafting and documenting a transition plan at the moment of entry into temporary housing, simultaneously with the immediate crisis response. This is a time-critical documentation demand layered onto an already resource-intensive situation (emergency temporary housing placement). **The transaction cost imposed falls entirely outside the framework the circular provides guidance for** — the § 15 circular does not address temporary housing at all; caseworkers must comply with this obligation without any guidance from the primary normative instrument governing their § 15 work.

R14 (MIXED) — No Circular Authority: Caseworkers must conduct and document an early-stage assessment (kartlegging og avklaring) of what is required to achieve permanent housing. For whom: documentation for internal case management and supervisory review. Transaction cost: preparing a structured assessment document at a specific early point in the case — separate from, and in addition to, any general case notes. The necessity framing ("nødvendig") in the veileder creates a compliance standard with no clear limit on what constitutes an adequate early assessment. **Transaction cost falls outside circular**

guidance — caseworkers must execute a mandatory assessment procedure that the primary normative instrument (the § 15 circular) does not address.

R15 (INTERNAL CONTROL) — No Circular Authority: NAV leaders must negotiate, draft, and maintain written formal cooperation agreements with barnevernstjenesten specifically governing responsibilities when youth are to be established in independent housing. For whom: inter-institutional compliance record; supervisory review. Transaction cost: significant one-time drafting burden plus ongoing maintenance of the agreement's currency. In small municipalities where the Nav leader personally knows the child welfare caseworkers and informal coordination functions effectively, this imposes a bureaucratic formalization overhead with no operational benefit for individual users. **The transaction cost falls entirely outside the framework the circular provides guidance for** — neither § 15 nor R15's source instrument (Retningslinjer for samarbeid) has any presence in the § 15 circular, meaning caseworkers face a cooperation governance obligation that their primary normative instrument does not acknowledge.

R17 (INTERNAL CONTROL) — No Circular Authority: Caseworkers must register a formal deviation report in the designated quality management software (Compilo, Risk Manager, QM+, ASYS, or equivalent) when a housing offer is not found or is of inadequate quality. For whom: quality management system; management oversight; supervisory audit. Transaction cost: accessing and operating the deviation software, drafting the deviation report, ensuring it reaches the right system and the right personnel within the system. As the Anchor Document establishes, this software is frequently inaccessible to NAV caseworkers in small municipalities due to IT system splits between state and municipal environments. **The transaction cost falls entirely outside any framework the circular provides guidance for** — the § 15 circular does not address deviation reporting; this is a quality management obligation operating under a completely separate normative framework (internkontrollforskriften and quality management law) that has been injected into § 15 practice through a veileder without any circular anchor or statutory basis in the Social Services Act.

R18 (MIXED) — No Circular Authority: Caseworkers must produce a formal administrative decision (vedtak) for temporary housing provision. For whom: the user (appeal rights); administrative record; supervisory review. Transaction cost: drafting a formal vedtak with legal basis, appeal rights information, and decision content. This is a legitimate burden for the user's benefit, but its attribution to § 15 rather than § 27 means it is incorrectly anchored in the § 15 normative framework. The vedtak obligation already exists under § 27; the § 15 attribution creates a duplicative procedural footprint without additional user benefit. **The transaction cost, while substantively necessary under § 27, falls outside the circular guidance framework for § 15** — caseworkers are told by the veileder that this is a § 15 obligation when it is not, producing potential confusion about legal basis in the decision document itself.

Requirements classified as [USER NEED] — no transaction cost burden identified: R1, R2, R9, R10, R11, R16 — these requirements impose substantive service delivery obligations that serve users directly. While they require caseworker effort, that effort is directed toward assisting users, not toward documentation, reporting, or audit compliance. No transaction cost burden in the Sludge Audit sense is identified for these requirements.

STEP 6 — CATALOG ENTRIES

REQUIREMENT ID: § 15 — R1 **PROVISION TEXT:** Kommunen skal bistå vanskeligstilte på boligmarkedet etter reglene i lov 20. desember 2022 nr. 121 om kommunenes ansvar på det boligsosiale feltet. **SOURCE INSTRUMENT:** Circular R-35, § 15 opening provision / lov 2022 nr. 121 (statutory delegation) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — direct statutory delegation to external statute **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost identified. This establishes the statutory entitlement framework for housing assistance. Caseworker effort is directed entirely toward assisting the user, with no documentation or reporting function intrinsic to this requirement. **KILL LIST CLASSIFICATION:** No Kill List Action — sufficient authority and proportionate burden **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 15 — R2 **PROVISION TEXT:** Kommunen i arbeids- og velferdsforvaltningen skal medvirke i kommunens boligsosiale arbeid. **SOURCE INSTRUMENT:** Circular R-35, § 15 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — established by § 15 **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost identified. Core substantive institutional duty; effort is directed toward service system participation for users' benefit. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 15 — R3 **PROVISION TEXT:** Nav-kontoret bør så langt mulig medvirke til å unngå konsentrasjon av boliger til vanskeligstilte i bestemte områder. **SOURCE INSTRUMENT:** Circular R-35, § 15, section 3.15.1 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — "medvirke" in § 15 is broad; the specific spatial distribution goal is a circular elaboration not explicitly found in the statutory text. PIF finding: circular specifies a substantive goal (avoiding concentration) that goes beyond the statutory text. **DOUBLE AUTHORITY GAP:** NO (circular authority present) **CATEGORY ERROR:** NO **SCALE FLAG:** NO — no specific Anchor Document finding for this requirement **PURPOSE:** MIXED (primary: USER NEED — social inclusion for users and communities; secondary: INTERNAL CONTROL — planning/policy monitoring obligation) **BURDEN DESCRIPTION:** Caseworkers must factor spatial distribution effects when advising on housing placements, implying some monitoring of area distributions. The "bør" register reduces but does not eliminate the compliance demand. In small municipalities where the Nav leader has direct knowledge of the local housing situation, this is largely handled through operational awareness rather than formal tracking. **KILL LIST CLASSIFICATION:** Category C — Clarification: the statutory basis for the spatial distribution goal as a specific "medvirke" component should be made explicit; the room for maneuver

regarding what "so far as possible" means operationally requires clarification to prevent shadow binding **TRANSACTION COST CATEGORY:** No Transaction Cost Identified (bør language and low operational burden)

REQUIREMENT ID: § 15 — R4 **PROVISION TEXT:** Nav-kontoret skal være oppmerksom på bosituasjonen til familier med barn og unge, vanskeligstilte ungdom og personer i overgangs- eller etableringsfaser. **SOURCE INSTRUMENT:** Circular R-35, § 15, section 3.15.1 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — the SHALL-monitor obligation targeting named demographic groups is a circular addition to the broad "medvirke" standard. PIF: "the circular converts the open normative standard into a SHALL-monitor obligation targeting named demographic groups, eliminating the authority's freedom to determine the focus of its participation without explicit statutory authority." **DOUBLE AUTHORITY GAP:** NO (circular authority present) **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — systematic monitoring of named demographic subgroups requires dedicated tracking capacity analogous to [C] coordination infrastructure findings in the Anchor Document; small offices lack organizational differentiation to maintain targeted monitoring streams **PURPOSE:** INTERNAL CONTROL — the monitoring obligation directs caseworker attention for supervisory compliance purposes; it does not directly affect any individual user's case assessment; no specific action is mandated upon becoming "oppmerksom på" **BURDEN DESCRIPTION:** Caseworkers must maintain organized awareness specifically for three named demographic groups beyond general casework attention. In micro-offices this imposes an implicit obligation to maintain some form of case flagging or cross-referencing system for these groups. The SHALL-language creates a compliance standard without a clear operational definition of what adequate monitoring looks like, generating shadow binding effects. **KILL LIST CLASSIFICATION:** Category B — Status Change: the imperative "skal" creates a monitoring obligation for named groups without the statutory authority to eliminate NAV's discretion over its monitoring focus; candidate for reformulation to permissive language that restores local judgment about which groups to prioritize given local conditions **TRANSACTION COST CATEGORY:** Documentation Inflation (implicit tracking requirement for named groups)

REQUIREMENT ID: § 15 — R5 **PROVISION TEXT:** For tjenestemottakere som ikke klarer å ivareta sine interesser på boligmarkedet, bør tiltak og tjenester for å sikre en stabil bosituasjon være en del av individuell plan. **SOURCE INSTRUMENT:** Circular R-35, § 15, section 3.15.1 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** NO (for § 15) — § 15 contains no reference to individual plans; this requirement is governed by § 28 of the Social Services Act. PIF: "neither § 15 nor its preparatory works authorize it as a component of the 'medvirke' duty." The legal authority exists, but in a different provision (§ 28). **DOUBLE AUTHORITY GAP:** NO (circular authority present) **CATEGORY ERROR:** NO (remains within Social Services Act, but wrongly attributed provision) **SCALE FLAG:** NO — individual plan processes are case-by-case and do not presuppose a specific case volume **PURPOSE:** MIXED (primary: USER NEED — individual plans serve coordination of user's housing and services; secondary: INTERNAL CONTROL — the requirement to document housing measures within the individuell plan instrument serves administrative tracking under § 28

machinery) **BURDEN DESCRIPTION:** Caseworkers must coordinate the § 15 housing assistance work with the § 28 individuell plan instrument, ensuring that housing measures are formally reflected in individual plans where applicable. This creates a cross-provision documentation demand — work done under § 15 must be documented in a § 28-governed instrument — that the circular introduces without clear statutory anchoring in § 15. The "bør" language reduces binding force but the location in the circular creates a default expectation. **KILL LIST CLASSIFICATION:** Category C — Clarification: the room for maneuver regarding when housing measures should or must appear in individual plans needs to be made explicit, including a clear statement that the obligation derives from § 28, not § 15, to prevent shadow binding through the § 15 circular **TRANSACTION COST CATEGORY:** Documentation Inflation (cross-provision documentation demand)

REQUIREMENT ID: § 15 — R6 **PROVISION TEXT:** Bidra med sin kunnskap i den kommunale planleggingen av hvordan boligproblem kan løses for vanskeligstilte. **SOURCE INSTRUMENT:** Circular R-35, § 15, section 3.15.2 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — PIF confirms preparatory works identify planning participation as a recognized legal obligation **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — participation in formal planning processes requires designated capacity; analogous to management overstretch findings in Anchor Document; in micro-offices where the NAV leader also performs frontline casework, planning participation directly competes with service delivery **PURPOSE:** MIXED (primary: INTERNAL CONTROL — organizational contribution to governmental planning; secondary: USER NEED — aggregate user benefit through better housing policies) **BURDEN DESCRIPTION:** Caseworkers or NAV leaders must participate in municipal planning processes and prepare knowledge inputs about housing needs for disadvantaged groups. This requires time for planning meetings, preparation of written inputs, and documentation of participation — time that competes directly with frontline service delivery in small offices. The obligation is without operational limits on what constitutes adequate participation. **KILL LIST CLASSIFICATION:** Category C — Clarification: the scope of what constitutes adequate "bidra med kunnskap" in planning contexts should be specified to prevent open-ended compliance demand, particularly regarding the minimum participation standard and what counts as having discharged this obligation **TRANSACTION COST CATEGORY:** Reporting Overhead (knowledge contribution to planning processes)

REQUIREMENT ID: § 15 — R7 **PROVISION TEXT:** Gjøre andre kommunale organer kjent med behovet for ordinære boliger og tilpassede boligløsninger. **SOURCE INSTRUMENT:** Circular R-35, § 15, section 3.15.2 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — PIF confirms this internal information-sharing duty is a recognized component of "medvirke" per preparatory works **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — systematic communication to other municipal organs implies a structured information-sharing function; in small municipalities with few housing cases, this function is handled through informal cross-department contact; supervisory standards may treat informal communication as non-compliant analogous to [C] findings in Anchor Document **PURPOSE:** MIXED (primary: INTERNAL CONTROL —

inter-organ information sharing for governmental coordination; secondary: USER NEED — aggregate benefit through better-informed housing allocation) **BURDEN DESCRIPTION:** Caseworkers or NAV leaders must systematically communicate housing needs to other municipal organs. Without a defined procedure, format, or frequency, this creates an open compliance demand. In small municipalities, this function is typically discharged through informal contact; supervisory standards may not accept this as adequate. **KILL LIST CLASSIFICATION:** Category C — Clarification: what constitutes adequate communication of housing needs to other organs — including whether informal contact is permissible or whether formal written communication is required — should be made explicit to reduce shadow binding in small municipalities **TRANSACTION COST CATEGORY:** Reporting Overhead (inter-organ information sharing)

REQUIREMENT ID: § 15 — R8 **PROVISION TEXT:** Samarbeide med andre instanser, som Husbanken, om tiltak som kan lette situasjonen for vanskeligstilte på boligmarkedet. **SOURCE INSTRUMENT:** Circular R-35, § 15, section 3.15.2 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — the open "medvirke" standard is converted into a SHALL-cooperate obligation with a named institution (Husbanken), eliminating discretion over institutional partnerships. PIF: "the circular converts the open 'medvirke' standard into a specific SHALL-cooperate obligation with a named institution." **DOUBLE AUTHORITY GAP:** NO (circular authority present) **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — sustained institutional cooperation with a named national institution implies maintained contact procedures, familiarity with Husbanken programs, and documented cooperation history; analogous to [C] coordination infrastructure findings in Anchor Document where formalizing naturally informal inter-institutional contact imposes overhead calibrated for larger organizations **PURPOSE:** MIXED (primary: INTERNAL CONTROL — institutional relationship maintenance with named partner; secondary: USER NEED — user access to Husbanken programs) **BURDEN DESCRIPTION:** Caseworkers or NAV leaders must maintain an active institutional relationship with Husbanken. This implies knowledge of Husbanken's programs, established contact procedures, and some documentation that cooperation exists. The naming of Husbanken specifically creates an obligation that cannot be discharged through cooperation with other equivalent institutions. **KILL LIST CLASSIFICATION:** Category B — Status Change: the circular's SHALL-cooperate framing with a named institution eliminates the statutory discretion inherent in the open "medvirke" standard without statutory backing for this specific institutional mandate; candidate for reformulation that names Husbanken as an example ("for eksempel Husbanken") rather than as a required partner, restoring local discretion over institutional relationships **TRANSACTION COST CATEGORY:** Structural Disproportionality (mandatory named institutional relationship)

REQUIREMENT ID: § 15 — R9 **PROVISION TEXT:** Tilby tjenestemottaker råd og veiledning for å bidra til å sikre en tilfredsstillende bosituasjon, herunder informasjon om kommunale og statlige låne- og støtteordninger, og hjelp til søknad om kommunal bolig. **SOURCE INSTRUMENT:** Circular R-35, § 15, section 3.15.2 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — råd og veiledning duty established under §§ 15 and 17

DOUBLE AUTHORITY GAP: NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost identified. Direct user-facing service delivery. Effort is entirely directed toward assisting the user. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 15 — R10 **PROVISION TEXT:** Bistå tjenestemottakere som kan ha behov for tjenester i boligen ved å etablere kontakt med kommunale helse- og omsorgstjenester. **SOURCE INSTRUMENT:** Circular R-35, § 15, section 3.15.2 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — substantive bistå duty under § 15 **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost identified. Direct user-facing service delivery. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 15 — R11 **PROVISION TEXT:** Bistå tjenestemottaker med å skaffe bolig når det er nødvendig, for eksempel ved å hjelpe med å finne leiligheter, ringe for å avtale visning, eventuelt bli med på visning. **SOURCE INSTRUMENT:** Circular R-35, § 15, section 3.15.2 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — substantive bistå duty under § 15 **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost identified. Direct user-facing housing procurement assistance; the most concrete practical service delivery provision in the circular. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 15 — R12 **PROVISION TEXT:** Nav-kontoret har en plikt til å medvirke i kommunens boligsosiale arbeid (restatement in Kommunebrev 2025). **SOURCE INSTRUMENT:** Kommunebrev 2025 **CIRCULAR AUTHORITY:** ABSENT — derives from a Kommunebrev, not the circular paragraph. Consequence: this requirement operates outside the circular framework entirely. Caseworkers must comply with an obligation through an instrument that the primary normative document for § 15 (the circular) does not address. **LEGAL AUTHORITY:** YES in substance (duplicates R2 content). The CONTENT has authority but the instrument generating a parallel compliance reference does not derive from or connect to the circular. **DOUBLE AUTHORITY GAP:** NO (legal authority present in substance) **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** INTERNAL CONTROL — the Kommunebrev restatement serves compliance documentation and administrative reporting purposes; it adds nothing to the user's experience of service **BURDEN DESCRIPTION:** The Kommunebrev creates a parallel compliance reference that caseworkers and leaders must be aware of. In practice, this means a single substantive duty (medvirke) now appears in two separate normative instruments, creating the potential for divergent interpretations and a double compliance footprint. The circular provides no guidance on this parallel obligation because the Kommunebrev is outside the circular framework. **KILL LIST CLASSIFICATION:** Category A — Removal: the Kommunebrev

restatement is redundant with R2 and creates a parallel compliance reference without adding normative content; it should be removed from the § 15 normative framework as procedurally duplicative; if needed, the Kommunebrev function is better served by reference to the circular rather than a parallel restatement **TRANSACTION COST CATEGORY:** Procedural Duplication

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REQUIREMENT ID: § 15 — R13 **PROVISION TEXT:** Når midlertidig botilbud benyttes, skal Nav-kontoret så vidt mulig umiddelbart iverksette tiltak for å sikre overgang til varig bolig. **SOURCE INSTRUMENT:** Veiviser for midlertidig botilbud **CIRCULAR AUTHORITY:** ABSENT — the § 15 circular contains no provision on temporary housing or transition planning; this requirement operates entirely outside the § 15 circular framework. Consequence: caseworkers must comply with a SHALL-immediately obligation with no guidance whatsoever from the primary normative instrument governing their § 15 work. **LEGAL AUTHORITY:** PARTIAL — the transition-to-permanent-housing goal is consistent with § 15's general intent, but the "umiddelbart" temporal specification has no basis in § 15 or its preparatory works; PIF: "the temporal obligation triggered by an external event (§ 27 temporary housing use) is completely absent from the statutory text"; the correct home for this obligation is § 27, not § 15 **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT; statutory authority for § 15 is PARTIAL only, with the temporal specificity having no statutory basis at all **CATEGORY ERROR:** NO (remains within Social Services Act, though misattributed as § 15 rather than § 27) **SCALE FLAG:** YES — "umiddelbart" temporal specification requires immediate activation of transition planning simultaneously with emergency temporary housing response; analogous to [P] Procedural Continuity findings in Anchor Document regarding mandatory pipeline triggered by external event; in micro-offices where caseworkers manage all social services, this trigger cannot produce a dedicated response without displacing other work; since circular authority is absent, this disproportionate burden has no regulatory foundation under § 15 **PURPOSE:** MIXED (primary: USER NEED — transition to permanent housing serves the user's long-term stability; secondary: INTERNAL CONTROL — the procedural trigger and temporal specification serve standardization of administrative response for supervisory review) **BURDEN DESCRIPTION:** When any § 27 temporary housing placement is made, caseworkers must immediately activate and document a transition planning process. This is a time-critical documentation demand layered onto an already resource-intensive emergency response situation. The "umiddelbart" standard creates a compliance trigger without defining what an adequate immediate response looks like. The transaction cost falls entirely outside any framework the § 15 circular provides guidance for — caseworkers must execute this obligation without any anchor in their primary normative instrument. **KILL LIST CLASSIFICATION:** Category A — Removal (from § 15 normative framework): this obligation has no circular authority in the § 15 framework and its temporal specificity lacks statutory basis in § 15; it should either be relocated to the § 27 normative framework where it belongs, or if retained, its temporal and procedural specifications should be grounded in explicit statutory authority **TRANSACTION COST CATEGORY:** Combined Burden (Structural Disproportionality + Documentation Inflation)

REQUIREMENT ID: § 15 — R14 **PROVISION TEXT:** Det er nødvendig at det tidlig blir kartlagt og avklart hva som skal til for at dette blir en varig og stabil bosituasjon. **SOURCE INSTRUMENT:** Veiviser for midlertidig botilbud **CIRCULAR AUTHORITY:** ABSENT — the § 15 circular contains no provision on mandatory early-stage assessment; the § 15 circular does not address the content of veiviser obligations at all. Consequence: caseworkers face a mandatory assessment obligation that their primary normative instrument does not acknowledge. **LEGAL AUTHORITY:** NO — using necessity language ("nødvendig") and temporal specification ("tidlig") for a mandatory early-stage assessment that is not derived from the statutory text or preparatory works of § 15; PIF identifies both elements as lacking statutory derivation **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT; legal authority NO **CATEGORY ERROR:** NO (remains within Social Services Act) **SCALE FLAG:** PARTIAL — mandatory early-stage assessment with defined timing implies a structured intake procedure; analogous to [D] Documentation Apparatus and [P] Procedural Continuity findings where a pipeline triggered too rarely becomes habitually non-compliant; since circular authority is absent, any scale-related burden is without regulatory foundation **PURPOSE:** MIXED (primary: USER NEED — early assessment of housing needs serves the user's long-term stability planning; secondary: INTERNAL CONTROL — the necessity framing and timing specification create a mandatory procedural checkpoint serving supervisory audit documentation) **BURDEN DESCRIPTION:** Caseworkers must conduct and document a formal early-stage assessment at a defined point in the process, determining what is required for permanent and stable housing. The "nødvendig" framing creates a strict obligation without defining what constitutes an adequate assessment or what timing "tidlig" requires. The transaction cost falls outside any framework the § 15 circular provides guidance for. **KILL LIST CLASSIFICATION:** Category A — Removal: lacks both circular authority and legal authority; the necessity and timing specifications are sub-legal constructs with no statutory basis; candidate for repeal from the § 15 normative framework; any legitimate housing assessment needs are better served through the general medvirke and bistå duties already present in the circular **TRANSACTION COST CATEGORY:** Documentation Inflation

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REQUIREMENT ID: § 15 — R15 **PROVISION TEXT:** Barnevernstjenesten og Nav-kontoret bør inngå avtaler som regulerer samarbeid og ansvarsfordeling når ungdom som skal etableres i egen bolig. **SOURCE INSTRUMENT:** Retningslinjer for samarbeid mellom barnevernstjenesten og Nav-kontoret **CIRCULAR AUTHORITY:** ABSENT — the § 15 circular contains no provision on inter-agency cooperation agreements; this requirement operates entirely outside the § 15 circular framework. Consequence: caseworkers must comply with a formal agreement obligation with no guidance from the primary normative instrument governing their § 15 work. **LEGAL AUTHORITY:** NO (for § 15) — formal written agreements between NAV and child welfare are not found in § 15 or its preparatory works; authority must derive from § 13 or general administrative law; PIF: "specific authority for such agreements must derive from § 13 or general administrative law, not § 15" **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT; legal authority NO for § 15 **CATEGORY ERROR:** YES — this requirement belongs to the § 13 / general administrative cooperation law domain, not the § 15 housing assistance framework; it has been injected into § 15 practice through a cooperation retningslinjer without any § 15 legal basis **SCALE FLAG:** YES — directly addressed in Anchor Document: [C] Coordination Infrastructure

sub-type (ii): "external coordination — the requirement for written inter-agency agreements with child welfare, substance abuse services, etc. — produces sanctions when small municipalities rely on informal case-by-case contact"; Anchor Document notes that "small offices coordinate naturally through personal contact" and that the formalization requirement "imposes overhead calibrated for larger, siloed bureaucracies"; since both circular authority and § 15 statutory authority are absent, this disproportionate burden is entirely without regulatory foundation under § 15 **PURPOSE:** INTERNAL CONTROL — formal written cooperation agreements govern inter-institutional responsibility allocation; in relation to § 15 social services users, the agreement regulates administrative liability between organs, not the quality of service to individual users; the user benefits only indirectly through having a clearer institutional framework **BURDEN DESCRIPTION:** NAV leaders must negotiate, draft, and maintain written formal cooperation agreements with barnevernstjenesten, including provisions for responsibility allocation when youth are established in independent housing. This requires significant one-time drafting work, legal review of the agreement's terms, and ongoing maintenance of the agreement's currency as circumstances change. In small municipalities with well-functioning informal inter-departmental relationships, this imposes bureaucratic formalization overhead with no operational service benefit for individual users. The transaction cost falls entirely outside any framework the § 15 circular provides guidance for, and is unsupported by § 15 legal authority. **KILL LIST CLASSIFICATION:** Category A — Removal: the requirement lacks both circular authority for § 15 and statutory authority under § 15; it belongs to the § 13 domain and should be removed from the § 15 normative framework entirely; if cooperation agreements are required, they should be governed through § 13 instruments, not injected into § 15 through a retningslinjer **TRANSACTION COST CATEGORY:** Combined Burden (Documentation Inflation + Structural Disproportionality)

REQUIREMENT ID: § 15 — R16 **PROVISION TEXT:** Nav-kontoret har en plikt til å medvirke, herunder å bistå tjenestemottaker med å skaffe bolig når det er nødvendig (criminal justice context). **SOURCE INSTRUMENT:** Nasjonal veileder Kriminalomsorg og NAV **CIRCULAR AUTHORITY:** ABSENT — the § 15 circular contains no specific provision for users in criminal justice contexts. Consequence: this contextual application of the bistå duty operates without circular guidance for the § 15 framework specifically. **LEGAL AUTHORITY:** YES in substance — restates the bistå duty from R11 in the criminal justice context; § 15 authority is present for the underlying obligation **DOUBLE AUTHORITY GAP:** NO (legal authority present in substance) **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED — direct articulation of the housing procurement duty for users released from criminal justice supervision; contextual elaboration of R11 **BURDEN DESCRIPTION:** No transaction cost identified. This is legitimate contextual elaboration of R11 for a specific user population. While it operates outside the circular framework (creating a parallel veileder reference), it imposes no additional documentation or reporting burden beyond the substantive bistå duty already present. **KILL LIST CLASSIFICATION:** No Kill List Action for § 15 purposes — the substance is authorized; however, a Category C clarification may be warranted if the veileder creates uncertainty about whether additional obligations beyond R11 apply in criminal justice contexts **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 15 — R17 **PROVISION TEXT:** Hvis Nav-kontoret ikke finner tilbud, eller tilbudet ikke er kvalitetsmessig forsvarlig, bør det sendes avvik. **SOURCE INSTRUMENT:** Veiviser for midlertidig botilbud **CIRCULAR AUTHORITY:** ABSENT — the § 15 circular contains no provision on deviation reporting; this requirement operates entirely outside the § 15 circular framework. Consequence: caseworkers must comply with a quality management obligation that their primary normative instrument does not address and cannot provide guidance for. **LEGAL AUTHORITY:** NO — deviation reporting lacks any authority from the "bistå" or "medvirke" duties in § 15; PIF: "quality management procedure that derives from supervisory authority regulations rather than the Social Services Act"; the requirement belongs to the internkontrollforskriften / HMS quality management framework, not § 15 **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT; legal authority NO for § 15 **CATEGORY ERROR:** YES — this requirement belongs to the quality management / internkontroll legal domain (internkontrollforskriften, quality management regulations), not the Social Services Act § 15 housing assistance framework; it has been injected into § 15 practice through a veileder without any § 15 legal basis or circular anchor **SCALE FLAG:** YES — directly addressed in Anchor Document: formal deviation reporting in quality management software (Compilo, Risk Manager, QM+, ASYS) identified as generating structural failures in micro-offices; Anchor Document: "multiple reports document municipalities where the deviation software is physically inaccessible to NAV caseworkers because it sits in the municipal IT environment to which they lack credentials"; in the § 15 context, the same structural inaccessibility pattern applies; since both circular and statutory authority are absent, the scale burden is entirely without regulatory foundation **PURPOSE:** INTERNAL CONTROL — deviation reporting to a quality management system serves management oversight, supervisory audit, and quality control functions; it has no direct bearing on any individual user's case outcome; the user would not receive a better housing outcome because a deviation was registered; the requirement serves the administrative compliance record entirely **BURDEN DESCRIPTION:** Caseworkers must access the designated quality management software and register a formal deviation report whenever a housing offer is not found or is inadequate. As documented in the Anchor Document, this software is frequently inaccessible to NAV caseworkers in small municipalities due to IT system splits between state and municipal environments. Even where accessible, operating the deviation system, drafting a compliant report, and ensuring routing to the correct management level constitutes a significant administrative overhead. The transaction cost falls entirely outside any framework the § 15 circular provides guidance for; caseworkers face a quality management obligation derived from a different legal domain that has been inserted into § 15 practice without circular authority or § 15 legal basis. **KILL LIST CLASSIFICATION:** Category A — Removal: the requirement lacks both circular authority and § 15 legal authority, and constitutes a category error by injecting an internkontroll/quality management obligation into the § 15 social services framework; candidate for repeal from the § 15 normative framework; any deviation reporting function for housing failures is more appropriately governed through the general internkontroll framework, not a § 15 veileder **TRANSACTION COST CATEGORY:** Combined Burden (Reporting Overhead + Structural Disproportionality)

REQUIREMENT ID: § 15 — R18 **PROVISION TEXT:** Bruker får vedtak om midlertidig botilbud. **SOURCE INSTRUMENT:** Veiviser for midlertidig botilbud **CIRCULAR AUTHORITY:** ABSENT — the § 15 circular contains no provision on vedtak for midlertidig botilbud; this requirement operates outside the § 15 circular framework. Consequence: the vedtak requirement as attributed to § 15 lacks circular guidance, creating confusion about its legal basis in decision documents. **LEGAL AUTHORITY:** NO (for § 15) — the obligation to issue vedtak for temporary housing derives from § 27 and forvaltningsloven, not § 15; PIF: "the formal decision requirement is misattributed to § 15"; the vedtak is already legally required under § 27, making the § 15 attribution redundant and potentially misleading as to legal basis **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT; legal authority NO for § 15 (though legal authority exists in § 27) **CATEGORY ERROR:** YES — this requirement belongs to the § 27 / forvaltningsloven domain; its attribution to § 15 in the veileder constitutes a misattribution that places it in the wrong legal domain for § 15 purposes **SCALE FLAG:** PARTIAL — vedtak production is analogous to [D] Documentation Apparatus findings in the Anchor Document, though temporary housing vedtak are less procedurally complex than § 17 debt counseling decisions; scale sensitivity is partial; since circular authority is absent, any production burden falls outside the § 15 circular guidance framework **PURPOSE:** MIXED (primary: USER NEED — vedtak gives the user legal rights including appeal; secondary: INTERNAL CONTROL — the attribution to § 15 rather than § 27 creates an additional administrative documentation footprint without additional user benefit, serving only administrative coverage) **BURDEN DESCRIPTION:** Caseworkers must produce a formal administrative decision for temporary housing provision. This is a legitimate burden for the user's benefit but is already required under § 27. The § 15 attribution creates potential confusion about the correct legal basis to cite in the decision document. If caseworkers cite § 15 as the authority for the vedtak — guided by the veileder — the decision may be procedurally defective, since the correct basis is § 27. The transaction cost, while substantively legitimate under § 27, falls outside the § 15 circular guidance framework and the § 15 attribution serves no user protection purpose. **KILL LIST CLASSIFICATION:** Category A — Removal (from § 15 normative framework): the vedtak obligation is correctly located in the § 27 framework and should be removed from the § 15 veileder to prevent misattribution of legal basis; no loss of user protection results from removal, since the obligation remains in force under § 27 **TRANSACTION COST CATEGORY:** Procedural Duplication (obligation already exists under § 27; § 15 attribution creates a duplicative and potentially misleading reference)

CLOSING COMPARATIVE NOTE

Requirements identified starting from Process Inflation Findings: 18

Requirements that would have been visible starting from the circular alone: 11

Invisible requirements (starting from circular): 7 — representing 39% of the total normative burden operating under § 15. This gap between the circular's apparent normative content and the actual operational requirement landscape is the primary analytical finding of this audit. The circular presents a substantially incomplete picture of the compliance demands placed on NAV offices under this provision.

Double authority gaps: 5 (R13, R14, R15, R17, R18) — requirements where both circular authority is absent AND legal authority under § 15 is absent or limited to PARTIAL only

Requirements deriving from a different legal domain (category errors): 3 — R15 (§ 13 / administrative cooperation law), R17 (internkontrollforskriften / quality management), R18 (§ 27 / forvaltningsloven)

Of particular note: all five double authority gaps derive from sub-legal instruments (veileder × 4, retningslinjer × 1), none from the circular itself. The circular, while not free from authority gaps (R4, R8), generates binding-force problems through its own language. The more severe structural problem — requirements that are both invisible from the circular and lack statutory authority — originates entirely from the veileder/retningslinjer layer below the circular.

Kill List breakdown:

Category	Count	Requirements
Category A — Removal	5	R12, R13, R14, R15, R17, R18
Category B — Status Change	3	R4, R8, R12
Category C — Clarification	4	R3, R5, R6, R7
No Kill List Action	6	R1, R2, R9, R10, R11, R16

Note: R12 appears in both Category A (Removal as redundant Kommunebrev restatement) and Category B (reformulation to remove imperative language if retained); if not removed, it requires at minimum a status change.

Total Kill List candidates: 12 of 18 requirements — 67% of the total normative content operating under § 15 requires some form of revision, removal, or clarification.

Primary transaction cost categories by frequency:

Category	Count	Requirements
Documentation Inflation	4	R5, R14, R15, R18
Combined Burden	3	R13, R15, R17
Reporting Overhead	3	R6, R7, R17
Procedural Duplication	2	R12, R18
Structural Disproportionality	3	R8, R13, R15

No Transaction Cost Identified	6	R1, R2, R9, R10, R11, R16

Note: several requirements carry multiple transaction cost categories; counts reflect all applicable categories.

Synthesis observation for main report:

The § 15 normative landscape reveals a dual-layer authority problem. In the first layer, the circular itself introduces partially unauthorized obligations (R4's monitoring mandate for named groups, R8's named institutional partnership) through the conversion of open legal standards into specific administrative directives. In the second and more severe layer, four sub-legal instruments — primarily the Veiviser for midlertidig botilbud — have introduced requirements that are not only invisible from the circular but lack § 15 legal authority and in three cases belong to entirely different legal domains. The most consequential finding for the Kill List is that three of the five double authority gaps are category errors: obligations from the quality management domain (R17), the § 27 emergency housing domain (R18), and the § 13 inter-institutional cooperation domain (R15) have been injected into the § 15 framework through veileders and retningslinjer, creating compliance burdens that the statute, the circular, and the intended scope of § 15 all fail to support.

SLUDGE AUDIT — § 16 BEREDSKAPSPLAN, HJELPEPLIKT OG GJENSIDIG BISTAND

PRELIMINARY METHODOLOGICAL NOTE

Requirement count differential: The Process Inflation Findings identify **14 distinct requirements** attributable to or operative under § 16. The circular paragraph in the Context Document (statutory text plus section 3.16.1 commentary) makes visible at most **8 of these requirements** to a reader examining only the circular. The remaining **6 requirements have no textual presence in the circular** whatsoever.

Requirements invisible from the circular alone — source mapping:

Requirement ID	Obligation summary	Source instrument	Category
REQ-16.9	Notification routine described in unit beredskapsplan	Veileder til standard for trygge brukermøter i NAV	(b) veileder
REQ-16.10	Every NAV unit prepares own beredskapsplan per government security instruction	Veileder til standard for trygge brukermøter i NAV	(b) veileder
REQ-16.11	Overarching plan guarantees owners fulfill statutory and operational requirements	Veileder til partnerskapsavtalen	(b) veileder
REQ-16.12	Owners jointly detail and describe documentation content	Veileder til partnerskapsavtalen	(b) veileder
REQ-16.13	Emergency applications assessed rapidly, preferably same day	Veileder for økonomisk stønad	(b) veileder
REQ-16.14	Information gathered and documented limited to minimum for rapid processing	Veileder for økonomisk stønad	(b) veileder

Structural observation: All six requirements invisible from the circular derive from veilederes — sub-legal guidance instruments that carry no binding normative force equivalent to the circular itself. Three distinct veilederes are operative, from three separate administrative domains: workplace safety (trygge brukermøter), partnership governance (partnerskapsavtalen), and economic assistance (økonomisk stønad). This dispersion

across domains is itself analytically significant and is carried forward into Step 2's category error analysis.

STEP 1 — IDENTIFICATION OF ALL REQUIREMENTS

REQ-16.1 *Exact obligation:* Kommunen plikter å utarbeide en beredskapsplan for kommunen i arbeids- og velferdsforvaltningen i samsvar med lov om helsemessig og sosial beredskap. *Source instrument:* Circular R-35, § 16 (statutory text, PROC-REQ-16.1 / DOC-REQ-16.1) *Explicit/implicit:* Explicit *Textual presence in circular:* YES — verbatim statutory text

REQ-16.2 *Exact obligation:* Sosialberedskapsplanen skal samordnes med kommunens øvrige beredskapsplaner. *Source instrument:* Circular R-35, § 16 (statutory text, PROC-REQ-16.2 / DOC-REQ-16.2) *Explicit/implicit:* Explicit *Textual presence in circular:* YES — verbatim statutory text

REQ-16.3 *Exact obligation:* Kommunen skal gi nødvendig hjelp under ulykker eller andre akutte situasjoner. *Source instrument:* Circular R-35, § 16 (statutory text, PROC-REQ-16.3) *Explicit/implicit:* Explicit *Textual presence in circular:* YES — verbatim statutory text

REQ-16.4 *Exact obligation:* Dersom forholdene tilsier det, skal kommunen yte bistand til andre kommuner ved ulykker og andre akutte situasjoner. *Source instrument:* Circular R-35, § 16 (statutory text, PROC-REQ-16.4) *Explicit/implicit:* Explicit *Textual presence in circular:* YES — verbatim statutory text

REQ-16.5 *Exact obligation:* Den kommunen som mottar bistand etter tredje ledd skal yte kommunen som bidrar med hjelp, kompensasjon for utgiftene, med mindre noe annet er avtalt. *Source instrument:* Circular R-35, § 16 (statutory text, PROC-REQ-16.5) *Explicit/implicit:* Explicit *Textual presence in circular:* YES — verbatim statutory text

REQ-16.6 *Exact obligation:* Statsforvalteren skal føre tilsyn med at planleggingsplikten blir fulgt opp. *Source instrument:* Circular R-35, § 16 (section 3.16.1, PROC-REQ-16.6) *Explicit/implicit:* Explicit *Textual presence in circular:* YES — stated in 3.16.1 commentary; however, the Process Inflation Findings identify a mis-attribution gap: the true legal basis exists in § 9, not § 16

REQ-16.7 *Exact obligation:* Nav-kontoret er ansvarlig for å yte tjenester; kommunen er pålagt å utarbeide beredskapsplan spesifikt for sosiale tjenester i Nav-kontoret. *Source instrument:* Circular R-35, § 16 section 3.16.1 (DOC-REQ-16.3) *Explicit/implicit:* Explicit in commentary *Textual presence in circular:* YES — section 3.16.1; however, this sub-unit specificity is a circular addition not found in the statutory text

REQ-16.8 *Exact obligation:* Beredskapsplanen skal utarbeides i samsvar med lov om helsemessig og sosial beredskap, og nærmere krav er gitt i denne loven og tilhørende forskrifter. *Source instrument:* Circular R-35, § 16 (DOC-REQ-16.4) *Explicit/implicit:* Explicit *Textual presence in circular:* YES — reiterated in both statutory text and commentary

REQ-16.9 *Exact obligation:* Varslingsrutinen skal være beskrevet i den enkelte enhets beredskapsplan. *Source instrument:* Veileder til standard for trygge brukermøter i NAV (DOC-REQ-16.5 / PROC-REQ-16.8) *Explicit/implicit:* Explicit in veileder *Textual presence in circular:* NO — entirely absent from the circular paragraph

REQ-16.10 *Exact obligation:* Alle NAV-enheter skal ha utarbeidet en egen beredskapsplan, basert på samfunnssikkerhetsinstruksen til regjeringen. *Source instrument:* Veileder til standard for trygge brukermøter i NAV (DOC-REQ-16.6 / PROC-REQ-16.7) *Explicit/implicit:* Explicit in veileder *Textual presence in circular:* NO — entirely absent from the circular paragraph

REQ-16.11 *Exact obligation:* Den helhetlige planen må ivareta at eierne oppfyller lovpålagte krav i respektiv organisasjon og krav til etablering og drift av NAV-kontoret. *Source instrument:* Veileder til partnerskapsavtalen (DOC-REQ-16.7 / PROC-REQ-16.10) *Explicit/implicit:* Explicit in veileder *Textual presence in circular:* NO — entirely absent from the circular paragraph

REQ-16.12 *Exact obligation:* Eierne skal i fellesskap sørge for at innholdet i dokumentasjonen detaljeres og beskrives. *Source instrument:* Veileder til partnerskapsavtalen (DOC-REQ-16.8 / PROC-REQ-16.9) *Explicit/implicit:* Explicit in veileder *Textual presence in circular:* NO — entirely absent from the circular paragraph

REQ-16.13 *Exact obligation:* Hvis henvendelsen gjelder hjelp i en nødsituasjon, må søknaden vurderes raskt, helst samme dag. *Source instrument:* Veileder for økonomisk stønad (PROC-REQ-16.11) *Explicit/implicit:* Explicit in veileder *Textual presence in circular:* NO — entirely absent from the circular paragraph

REQ-16.14 *Exact obligation:* Hvilke opplysninger som skal innhentes og hvordan de skal dokumenteres må begrenses til et minimum for å sikre rask saksbehandling. *Source instrument:* Veileder for økonomisk stønad (PROC-REQ-16.12) *Explicit/implicit:* Explicit in veileder *Textual presence in circular:* NO — entirely absent from the circular paragraph

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STEP 2 — LEGAL AUTHORITY CHECK

REQ-16.1 Direction 1 — Circular authority: YES Direction 2 — Statutory authority: YES. Sosialtjenesteloven § 16 first paragraph is the direct textual anchor. No authority gap. Double authority gap: NO Category error: NO

REQ-16.2 Direction 1 — Circular authority: YES Direction 2 — Statutory authority: YES. § 16 second sentence of first paragraph mandates coordination with other municipal plans. No authority gap. Double authority gap: NO Category error: NO

REQ-16.3 Direction 1 — Circular authority: YES Direction 2 — Statutory authority: YES. § 16 second paragraph establishes the unconditional duty to provide necessary help. Substantive legal obligation with full statutory anchor. Double authority gap: NO Category error: NO

REQ-16.4 Direction 1 — Circular authority: YES Direction 2 — Statutory authority: YES. § 16 third paragraph establishes the conditional inter-municipal assistance duty. Full statutory anchor. Double authority gap: NO Category error: NO

REQ-16.5 Direction 1 — Circular authority: YES Direction 2 — Statutory authority: YES. § 16 fourth paragraph directly establishes the compensation obligation. Full statutory anchor. Double authority gap: NO Category error: NO

REQ-16.6 Direction 1 — Circular authority: PRESENT but misattributed. The Process Inflation Findings note that § 16 contains no language authorizing supervision; the correct legal basis is § 9. The circular's placement of this provision under § 16 constitutes a mis-attribution gap. Direction 2 — Statutory authority: PARTIAL. Supervisory authority exists and is statutory, but its statutory home is § 9, not § 16. The requirement as framed under § 16 has only partial statutory support because the authority cited is incorrect. Applicable finding: Process Inflation Finding for Krav 6 — "The requirement is placed under § 16 in the circular, but § 16 contains no language authorizing supervision; the true legal basis exists in § 9, leading to a gap of mis-attribution." Double authority gap: NO (circular authority is present, even if misattributed; statutory authority is partial but exists at § 9) Category error: NO — supervision remains within the social services administrative domain

REQ-16.7 Direction 1 — Circular authority: PRESENT in the sense that section 3.16.1 of the circular creates this sub-unit obligation. However, this is a case where the circular itself exceeds its statutory mandate — the obligation created in 3.16.1 goes beyond what the statutory text authorizes. Direction 2 — Statutory authority: PARTIAL. The statute authorizes a municipal-level plan obligation; the circular's elevation of this to a specific sub-unit obligation within the NAV office is a circular addition without explicit statutory support. Applicable finding: Process Inflation Finding for Krav 7 — "The statute establishes the plan duty at the municipal level, whereas the circular creates a sub-divided, unit-specific obligation not explicitly found in § 16." Double authority gap: NO (circular authority formally present, though exceeding statutory mandate) Category error: NO

REQ-16.8 Direction 1 — Circular authority: YES Direction 2 — Statutory authority: YES. The requirement that the plan conform to the health and social preparedness act is confirmed in both statutory text and commentary. Double authority gap: NO Category error: NO

REQ-16.9 Direction 1 — Circular authority: NO. The circular is entirely silent on specific content requirements for beredskapsplaner. This is a first-order authority gap: the requirement operates outside the circular framework entirely. Direction 2 — Statutory authority: NO. § 16 contains no content prescription for beredskapsplaner. The specific requirement that a notification routine must be inscribed in the plan derives solely from the Veileder til standard for trygge brukermøter i NAV — an instrument whose primary domain is workplace safety and user encounter management, not social services emergency preparedness law. Applicable finding: Process Inflation Finding for Krav 9 — "Section 16 is silent on specific content requirements, but the circular imposes a mandatory content requirement that is not found in the statute." Supplemented by the observation that the source instrument belongs to the HMS/workplace safety domain. Double authority gap: YES — no circular authority AND no statutory authority Category error: YES. The Veileder til standard for trygge brukermøter i NAV governs the physical safety of NAV workplaces and

the management of threatening encounters between staff and users. Its primary legal domain is arbeidsmiljøloven / HMS regulation, not sosialtjenesteloven § 16. Importing a notification-routine prescription from a workplace safety instrument into the social services emergency preparedness framework constitutes a category error in addition to the double authority gap.

REQ-16.10 Direction 1 — Circular authority: NO. The circular authorizes one plan obligation at the municipal level. The multiplication of this into a per-unit obligation for every NAV unit finds no support in the circular text. Direction 2 — Statutory authority: NO. The statute establishes one municipal-level plan obligation. The requirement that each NAV unit independently prepare its own plan — referenced not to sosialtjenesteloven but to a government societal security instruction (samfunnssikkerhetsinstruksen) — is an unauthorized multiplication and basis-shift beyond § 16. Applicable finding: Process Inflation Finding for Krav 10 — "The statute authorizes a single municipal-level plan, but the circular multiplies this into a per-unit obligation and inappropriately shifts the legal basis to an administrative instruction not authorized by § 16." Double authority gap: YES Category error: YES. The Veileder til standard for trygge brukermøter i NAV belongs to the HMS domain (see REQ-16.9). The reference to samfunnssikkerhetsinstruksen further anchors this requirement in the civil security / beredskapslov framework, which is distinct from the social services statutory framework under which § 16 operates.

REQ-16.11 Direction 1 — Circular authority: NO. The circular paragraph contains no provision extending the plan duty to cover the full organizational compliance obligations of both the state and municipal owners. Direction 2 — Statutory authority: NO. § 16 establishes a beredskapsplan obligation for the municipality's social services in NAV. The Veileder til partnerskapsavtalen reformulates this into a comprehensive inter-organizational compliance instrument covering both owners' full statutory portfolios — a scope extension that § 16 does not authorize. Applicable finding: Process Inflation Finding for Krav 11 — "The circular reformulates the plan duty into a comprehensive compliance tool spanning both owners' entire organizations, extending well beyond the authorized scope of § 16." Double authority gap: YES Category error: YES. The Veileder til partnerskapsavtalen belongs to the administrative governance domain of the NAV partnership (NAV-loven §§ 13-15 framework), not to sosialtjenesteloven § 16. Obligations deriving from partnership governance instruments and partner compliance management do not have their legal home in social services emergency preparedness law.

REQ-16.12 Direction 1 — Circular authority: NO. No basis in the circular for a joint owner documentation obligation. Direction 2 — Statutory authority: NO. § 16 imposes obligations on the municipality as a legal unit; it does not establish a joint procedural co-obligation for both organizational owners to collectively generate documentation content. This construction is entirely absent from the statutory text. Applicable finding: Process Inflation Finding for Krav 12 — "The circular introduces a joint, mandatory procedural co-obligation for both owners to collectively generate documentation, which is completely absent from § 16 and cannot be derived from its text." Double authority gap: YES Category error: YES. Same domain analysis as REQ-16.11 — Veileder til partnerskapsavtalen belongs to partnership governance (NAV-loven), not social services emergency preparedness law.

REQ-16.13 Direction 1 — Circular authority: NO. The circular does not establish any procedural time standard for emergency applications. The circular's treatment of § 16 concerns beredskapsplanlegging and inter-municipal assistance obligations, not individual case processing timelines. Direction 2 — Statutory authority: PARTIAL. § 16's second paragraph establishes the duty to provide "nødvendig hjelp" in acute situations — a substantive obligation with full statutory anchor. However, the Veileder's conversion of this open normative standard into a near-absolute same-day processing obligation shadow-binds the authority's discretion in a manner the statute does not mandate. The Process Inflation Findings confirm: "The circular converts the law's open normative standard ('nødvendig hjelp') into a near-absolute, specific time-bound processing obligation." Double authority gap: YES — circular authority ABSENT, statutory authority PARTIAL Category error: NO. This requirement derives from Veileder for økonomisk stønad, which belongs to the social services domain. However, its substantive content (individual case processing timelines) properly belongs under §§ 18-21 rather than § 16. The placement under § 16 represents a sub-framework misattribution within social services law, not a cross-domain category error.

REQ-16.14 Direction 1 — Circular authority: NO. The circular contains no provision limiting evidence-gathering to a minimum. Direction 2 — Statutory authority: PARTIAL. The underlying principle of proportionate evidence-gathering in urgent situations is consistent with general administrative law, but the Veileder's formulation of an absolute upper ceiling on information acquisition shadow-binds the legally granted evidence discretion of the caseworker. "The circular shadow-binds the authority's evidence-discretion by imposing an absolute upper limit on evidence gathering, which eliminates the legally granted freedom to ascertain what information is actually needed." Double authority gap: YES — circular authority ABSENT, statutory authority PARTIAL Category error: NO. Same analysis as REQ-16.13 — belongs to the social services domain but is substantively misplaced under § 16.

STEP 3 — SCALE AND PROPORTIONALITY CHECK

A preliminary observation is required: the Anchor Document (Volume Driver Findings) addresses §§ 17–19 and § 20a in detail, with no specific supervision findings concerning § 16 beredskapsplan obligations. There are no set B entries documenting formal sanctions for failure to maintain beredskapsplaner. The scale analysis for § 16 therefore proceeds from the general structural findings in the Anchor Document rather than from specific § 16 empirical confirmation.

REQ-16.1: Scale flag: NO. The plan obligation is imposed at the municipal level as a single document requirement. No volume-sensitivity identified.

REQ-16.2: Scale flag: NO. Coordination with existing plans is a one-time and periodic administrative task; no volume-sensitivity identified.

REQ-16.3: Scale flag: NO. This is a substantive legal obligation, not a documentation or procedural requirement. No disproportionality analysis applies.

REQ-16.4: Scale flag: NO. Substantive legal obligation. No disproportionality analysis applies.

REQ-16.5: Scale flag: NO. Substantive legal obligation governing financial outcomes between municipalities. No disproportionality analysis applies.

REQ-16.6: Scale flag: NO. Supervisory obligation runs to Statsforvalteren, not to municipal caseworkers. No municipality-level volume burden.

REQ-16.7: Scale flag: PARTIAL. The sub-unit plan obligation for social services within the NAV office presupposes sufficient organizational differentiation to produce a plan distinct from the municipal plan. For the smallest municipalities — those documented across the Anchor Document as operating with two or three social services caseworkers covering all domains — the requirement to produce a separate sub-unit plan imposes a documentation overhead that the organization does not have dedicated capacity to support. This aligns with the Anchor Document's general observation on Documentation Apparatus [D] as the dominant mechanism: "roughly half of all Set B findings involve sanctions for failure to maintain formal written records." As this obligation lacks full statutory authority (Step 2), any scale-related burden it imposes is unsupported by the circular framework.

REQ-16.8: Scale flag: NO. The requirement to conform the plan to the health and social preparedness act is a quality standard for a plan that must be written in any case under REQ-16.1; it adds no separate volume burden.

REQ-16.9: Scale flag: YES. The requirement that each individual unit describe its notification routine in its own plan creates a documentation obligation that presupposes dedicated plan-management capacity. The Anchor Document confirms that Documentation Apparatus [D] failures are structurally concentrated in small offices where leaders simultaneously perform frontline casework and administrative functions. This requirement, when combined with REQ-16.10 and REQ-16.11, contributes to a beredskapsplan documentation cluster whose cumulative burden falls on a leader who, in small municipalities, is already the sole or primary social services caseworker. As this requirement has no circular authority (Step 2), any scale-related burden it imposes falls entirely outside the guidance framework the circular provides. Applicable Anchor Document finding: Documentation Apparatus [D] general finding — "caseworkers in small offices actually deliver the service, often effectively and to the satisfaction of users, but fail to translate this delivery into the formal administrative record expected by the supervision standard." Applied here: NAV leaders in small offices may maintain practical preparedness but fail to translate it into the content-specific plan documentation demanded.

REQ-16.10: Scale flag: YES. The requirement that every NAV unit produce its own separate beredskapsplan — separate from the municipal plan, separate from the NAV-office-level plan required by REQ-16.7 — creates a document multiplication obligation that presupposes organizational differentiation between units. In municipalities with one consolidated NAV office serving all social services, the notion of "alle NAV-enheter" producing separate plans is structurally incoherent: there is only one unit. For inter-municipal NAV offices or larger offices with functional sub-units, this creates multiple simultaneous documentation obligations. The Anchor Document's Cluster 2 (Internal Control Apparatus) analysis is directly applicable: requirements designed for larger, differentiated organizations are imposed without

adaptation on offices that cannot sustain the organizational complexity they presuppose. As this requirement lacks both circular and statutory authority, any scale-related burden is entirely without regulatory foundation. Applicable Anchor Document finding: Cluster 2 — "requirements collectively assume an organization with at least three structurally distinct layers… In offices of five to fifteen people, these tiers collapse onto one or two individuals."

REQ-16.11: Scale flag: YES. The requirement that the overarching plan cover the full statutory compliance of both owning organizations extends the documentation burden across both the state (Arbeids- og velferdsetaten) and municipal organizational hierarchies simultaneously. In small municipalities, the NAV leader who must satisfy this requirement has no back-office capacity for inter-institutional documentation management. The Anchor Document's observation on Structural Disproportionality is applicable: requirements that presuppose multi-tier organizational structures are experienced as structurally disproportionate when imposed on micro-offices. As this requirement lacks both circular and statutory authority, the scale-related burden is unsupported by any regulatory framework.

REQ-16.12: Scale flag: YES. The joint owner obligation to collectively detail and describe documentation content presupposes an active bilateral governance process. Small municipalities lack the administrative infrastructure for ongoing bilateral plan-content coordination between the municipal and state ownership tiers. This aligns with the Anchor Document's Coordination Infrastructure [C] findings: "the requirement for formalized inter-agency coordination agreements produces sanctions when small municipalities rely on informal case-by-case contact." The parallel here is strong: this requirement penalizes the natural adaptive behavior of small offices where informal coordination functions correctly at the operational level, by demanding formal documentation of a process that is actually managed through direct interpersonal contact.

REQ-16.13: Scale flag: PARTIAL. The same-day processing standard for emergency applications does not directly presuppose organizational scale, since the obligation falls on the individual caseworker processing the case. However, in the smallest municipalities where a single caseworker manages the full social services portfolio on a given day, the same-day standard may be incompatible with competing caseload pressures. The Anchor Document does not address this specific requirement, so the scale flag is partial and based on structural inference rather than specific supervision evidence.

REQ-16.14: Scale flag: NO. The minimum-documentation standard imposes a constraint on what caseworkers do rather than presupposing organizational capacity they do not have. If anything, this requirement lightens the documentation burden in emergencies rather than adding to it. No scale-related disproportionality identified.

STEP 4 — PURPOSE CLASSIFICATION

REQ-16.1: [USER NEED]. The beredskapsplan obligation directly serves the continuity of social services to users during crises, disasters, and emergencies. Its purpose is the protection of the user's right to receive necessary assistance even under extraordinary

conditions. The statutory language — "for å sikre at Nav-kontoret er tilstrekkelig forberedt på uforutsette hendelser" — frames the plan as a user-protective instrument.

REQ-16.2: [MIXED]. Coordination with other municipal preparedness plans primarily serves users by ensuring that social services emergency response integrates with the broader municipal crisis management apparatus — a substantive user protection function. The procedural element of achieving documented coordination is secondary and serves administrative coherence. User protection is the primary function; coordination procedure is secondary.

REQ-16.3: [USER NEED]. The substantive duty to provide necessary help during acute situations is a direct, unconditional legal protection for users facing emergencies. No transaction cost burden is identified for this requirement — it is an operative legal obligation, not a documentation or procedural overlay.

REQ-16.4: [USER NEED]. The conditional inter-municipal assistance obligation serves users in the receiving municipality by ensuring that help can be mobilized beyond local capacity. Substantive legal protection function; no documentation or procedural burden is created for individual caseworkers.

REQ-16.5: [USER NEED]. The compensation mechanism serves users indirectly by ensuring that municipalities are not deterred from providing inter-municipal assistance by financial exposure. It governs outcomes between legal entities, not documentation requirements for caseworkers.

REQ-16.6: [INTERNAL CONTROL]. Supervisory control by Statsforvalteren exists to verify compliance with the planning obligation, not to directly improve the user's experience of social services. The language of 3.16.1 frames supervision as a verification mechanism: "Statsforvalteren skal føre tilsyn med at planleggingsplikten blir fulgt opp." The beneficiary of this requirement is the administrative supervisory system, not the individual service user.

REQ-16.7: [MIXED]. The sub-unit beredskapsplan for social services in the NAV office serves users by ensuring that the specific social services dimension of emergency preparedness is planned for, not subsumed within a generic municipal plan. However, the obligation to produce a separate sub-unit document rather than a dedicated section within the municipal plan adds a documentation dimension that serves administrative differentiation rather than user outcome. User protection is the primary function; separate document production is the secondary, control-serving function.

REQ-16.8: [USER NEED]. The requirement that the plan conform to the health and social preparedness act is a quality assurance measure ensuring the plan is adequate to its stated purpose of protecting users in emergencies. Conformance with legal standards directly serves the substantive quality of the preparedness instrument.

REQ-16.9: [INTERNAL CONTROL]. The Veileder til standard for trygge brukermøter i NAV frames the notification routine as an internal safety and coordination procedure for NAV staff managing threatening situations — a workplace safety function. From the perspective of social services users, a documented notification routine in a plan document has no direct

bearing on case assessment quality, legal security, or service delivery outcome. The requirement serves internal safety management and administrative record-keeping.

REQ-16.10: [INTERNAL CONTROL]. The per-unit beredskapsplan based on the government security instruction serves institutional compliance documentation. From the perspective of social services users, whether the NAV office has produced one comprehensive plan or several unit-level plans is immaterial to service quality. The multiplication of plan documents serves administrative accountability and supervisory inspection, not user protection. The language of "alle NAV-enheter skal ha utarbeidet" reflects a documentation audit-trail orientation, not a user protection orientation.

REQ-16.11: [INTERNAL CONTROL]. The requirement that the plan guarantee owner compliance with statutory and operational requirements across both organizational hierarchies is explicitly a compliance demonstration instrument. The Veileder til partnerskapsavtalen frames the plan as a tool for the owners to demonstrate mutual fulfillment of obligations — a governance accountability function. This serves the state-municipal ownership relationship, not the user's right to receive emergency assistance. The framing ("ivareta at eierne oppfyller lovpålagte krav") is governance-oriented, not service-oriented.

REQ-16.12: [INTERNAL CONTROL]. The joint documentation process imposed on the owners serves the administrative relationship between the owning parties. The obligation to collectively detail and describe documentation content is a governance coordination requirement without any direct relationship to service quality for users. "Eierne skal i fellesskap sørge for at innholdet i dokumentasjonen detaljeres og beskrives" is formulated entirely in terms of the owners' documentation obligations, not in terms of user benefit.

REQ-16.13: [MIXED]. The rapid processing requirement primarily serves the user by ensuring emergency applications are not left unaddressed while urgent needs go unmet. User need is the primary function. However, the conversion of the open statutory standard ("nødvendig hjelp") into a near-absolute procedural timeline ("helst samme dag") introduces a secondary internal control dimension: caseworkers must be able to demonstrate that emergency applications were processed within the shadow-bound timeline, which creates a documentation-of-compliance overhead. The user protection purpose is primary; the procedural constraint on caseworker discretion is secondary.

REQ-16.14: [MIXED]. The minimum-documentation standard serves users in emergency situations by preventing unnecessary procedural delays caused by disproportionate evidence-gathering. User access to rapid help is the primary function. However, the shadow-binding of evidence discretion is a secondary constraint that limits the caseworker's legitimate professional judgment about what information is actually needed to fulfill the statutory duty adequately. The Anchor Document's general observation on procedural overreach is applicable: the requirement imposes an upper ceiling that constrains professional authority without statutory basis.

STEP 5 — TRANSACTION COST CHARACTERIZATION

Requirements classified as [USER NEED] — REQ-16.1 (as primary obligation), REQ-16.3, REQ-16.4, REQ-16.5, REQ-16.8 — generate no transaction cost burden relevant to this analysis. The obligation is substantive and operative; the administrative production involved in meeting it is the legally intended exercise of authority, not overhead layered on top of it.

REQ-16.2 [MIXED]: The caseworker or NAV leader must document coordination between the social services beredskapsplan and the municipality's other preparedness plans — most plausibly through references within the plan document itself or through participation in a coordination process. The primary burden is on the person responsible for plan maintenance (typically the NAV leader or municipal social services manager). The coordination documentation is a one-time and periodically recurring obligation rather than a case-by-case burden. Transaction cost is modest and proportionate to its purpose.

REQ-16.6 [INTERNAL CONTROL]: Statsforvalteren must structure and carry out inspections of the planning obligation. For the municipality and NAV office, this creates a compliance-readiness obligation: the NAV leader must maintain documentation demonstrating that the beredskapsplan has been prepared, is current, and has been coordinated with other plans — so that supervisory inspection can be met. The practical demand is plan maintenance and documentation of review dates. The burden falls on the NAV leader. The circular provides guidance through its reference to § 9, though the mis-attribution of this requirement to § 16 rather than § 9 creates a normative confusion that may make it harder for municipalities to locate the correct supervisory framework.

REQ-16.7 [MIXED]: The NAV leader (or social services manager) must produce a separate beredskapsplan specifically for the NAV office's social services component — distinct from the general municipal beredskapsplan. This involves drafting, maintaining, and updating a dedicated plan document that addresses the specific operational conditions of the NAV office. The burden is on the plan author; the product is a documentation artifact that exists primarily for supervisory inspection and internal control purposes. The circular's creation of this sub-unit obligation without explicit statutory support means the transaction cost imposed here extends beyond what the statute requires. Caseworkers must comply with an obligation the statutory text of § 16 does not address.

REQ-16.9 [INTERNAL CONTROL]: The NAV leader or designated plan responsible must draft, incorporate, and keep current a specific notification routine section within the unit's beredskapsplan. This involves: identifying the personnel involved in the notification chain, specifying trigger criteria and escalation steps, documenting contact information and fallback procedures, and reviewing the routine at intervals. This is documentation-intensive internal safety management work. Because this requirement derives from a workplace safety veileder with no circular authority, caseworkers and leaders must comply with an obligation that the primary normative instrument governing their social services work — the circular — does not address at all. The compliance overhead falls outside any guidance the circular provides.

REQ-16.10 [INTERNAL CONTROL]: Every organizational unit within the NAV office must produce its own separate beredskapsplan — requiring each unit leader or designated responsible to draft, maintain, update, and make available a standalone plan document referenced against the government's societal security instruction

(samfunnssikkerhetsinstruksen). In offices with multiple functional units, this means multiple simultaneous plan documents, each requiring periodic review. In the smallest municipalities, this requirement creates structural incoherence: a single-unit NAV office faces the obligation to produce an "alle enheter" plan set for a single organizational entity, generating documentation for formal compliance purposes without substantive organizational justification. The transaction cost is pure Documentation Inflation. Because this requirement has no circular authority, caseworkers must comply with an obligation the circular does not address, compounded by structural disproportionality to organizational scale.

REQ-16.11 [INTERNAL CONTROL]: Both the municipal and state owners of the NAV office must ensure the joint preparedness plan formally documents that each owner's full portfolio of statutory obligations and operational conditions is covered. This requires: identification of relevant statutory obligations on both sides, documented confirmation that each is addressed in the plan, bilateral review and sign-off, and periodic updating as legal obligations change. The NAV leader and the municipal administrative leadership must coordinate this documentation process. The burden falls simultaneously on two organizational hierarchies — exactly the joint coordination demand the Anchor Document identifies as generating compliance overhead in small municipalities without the administrative infrastructure to manage bilateral governance processes. Because this requirement has no circular authority and no statutory authority in § 16, the coordination and documentation burden imposed falls entirely outside any regulatory framework that provides guidance or proportionality standards.

REQ-16.12 [INTERNAL CONTROL]: Both owners must jointly engage in a collaborative process of detailing and describing the content of the documentation produced under REQ-16.11. This is a procedural co-obligation: it mandates not just a documentation product but an ongoing bilateral process of collaborative documentation maintenance. The NAV leader, municipal HR, legal, and management functions, and the state partner-organization's counterparts must be actively engaged in the documentation process as a continuing obligation. This is an administrative governance overhead with no direct bearing on any user's emergency service access. Because this requirement has no circular authority and no statutory authority, the procedural co-obligation it imposes is entirely without regulatory foundation in the circular framework, meaning the administrative parties must comply with an obligation the primary normative instrument of their social services work does not acknowledge.

REQ-16.13 [MIXED]: The caseworker must assess emergency applications on the same day as receipt — preferably within the duty shift. This creates a turnaround standard that constrains the caseworker's workday planning and prioritization. The primary transaction cost is the processing obligation itself, which is substantively user-serving. The secondary transaction cost is demonstrating compliance with the same-day standard: the caseworker must log receipt time and decision time in a manner that shows compliance, creating a documentation-of-timeliness overhead layered on top of the substantive assessment. Because this requirement has no circular authority, caseworkers must manage a near-absolute timeline standard that the primary normative instrument governing § 16 does not address, meaning there is no circular guidance on how to manage cases where same-day processing is operationally difficult.

REQ-16.14 [MIXED]: The caseworker must consciously constrain evidence-gathering to the minimum necessary for rapid processing. This inverts the normal documentation dynamic: rather than adding documentation burden, it imposes a ceiling on what may be gathered. The transaction cost here is the constraint on professional discretion — the caseworker cannot document or pursue information that professional judgment might otherwise indicate is relevant. The secondary risk is legal exposure: if a caseworker under-documents in compliance with this minimum standard, and the decision is subsequently challenged, the thin documentation record may undermine the municipality's position. Because this requirement has no circular authority, caseworkers must navigate an evidence-ceiling that the governing circular does not acknowledge, with no guidance on where exactly the minimum lies.

STEP 6 — CATALOG ENTRIES

REQUIREMENT ID: § 16 — REQ-16.1 **PROVISION TEXT:** Municipality obligated to prepare a beredskapsplan for the labor and welfare administration in accordance with the health and social preparedness act **SOURCE INSTRUMENT:** Circular R-35, § 16 (statutory text) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — sosialtjenesteloven § 16 first paragraph; Process Inflation finding: HAS_HJEMMEL confirmed **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. The plan obligation is the legally intended administrative exercise of the municipality's preparedness duty in service of user protection. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 16 — REQ-16.2 **PROVISION TEXT:** The social preparedness plan must be coordinated with the municipality's other preparedness plans **SOURCE INSTRUMENT:** Circular R-35, § 16 (statutory text) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — sosialtjenesteloven § 16; coordination duty explicitly statutory; Process Inflation finding: HAS_HJEMMEL confirmed **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** MIXED — user protection (primary): ensures integrated emergency response; coordination documentation (secondary) **BURDEN DESCRIPTION:** NAV leader or plan responsible must document coordination process between social services plan and other municipal plans, typically through plan references and participation in municipal planning processes. Burden is modest, periodic, and proportionate. Circular guidance available. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified (burden is proportionate and within circular framework)

REQUIREMENT ID: § 16 — REQ-16.3 **PROVISION TEXT:** Municipality shall provide necessary help during accidents and acute situations **SOURCE INSTRUMENT:** Circular

R-35, § 16 (statutory text) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — sosialtjenesteloven § 16 second paragraph; substantive legal obligation; classified [SUBSTANTIVE LEGAL OBLIGATION] in Process Inflation Findings **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. This is an operative substantive duty, not a documentation or procedural overlay. The administrative work involved in meeting the duty is the legally intended service delivery. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 16 — REQ-16.4 **PROVISION TEXT:** Municipality shall, when conditions indicate, provide assistance to other municipalities during accidents and acute situations **SOURCE INSTRUMENT:** Circular R-35, § 16 (statutory text) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — sosialtjenesteloven § 16 third paragraph; conditional substantive legal obligation; classified [SUBSTANTIVE LEGAL OBLIGATION] in Process Inflation Findings **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. Substantive inter-municipal assistance obligation; administrative logistics involved are the intended exercise of the legal duty. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 16 — REQ-16.5 **PROVISION TEXT:** Receiving municipality shall compensate the assisting municipality for expenses, unless otherwise agreed **SOURCE INSTRUMENT:** Circular R-35, § 16 (statutory text) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — sosialtjenesteloven § 16 fourth paragraph; governs financial outcomes between municipalities; classified [SUBSTANTIVE LEGAL OBLIGATION] in Process Inflation Findings **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED — indirectly, by enabling the assistance mechanism through financial sustainability **BURDEN DESCRIPTION:** No transaction cost burden identified for caseworkers or NAV leaders. This is a legal obligation governing financial relationships between municipal entities, not a documentation or procedural requirement for frontline administration. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 16 — REQ-16.6 **PROVISION TEXT:** Statsforvalteren shall supervise that the planning obligation is fulfilled **SOURCE INSTRUMENT:** Circular R-35, section 3.16.1 (circular commentary) **CIRCULAR AUTHORITY:** PRESENT — but with consequence: the requirement is mis-attributed to § 16 in the circular when its correct statutory home is § 9. This creates interpretive confusion about which supervisory framework governs. **LEGAL AUTHORITY:** PARTIAL — the supervisory obligation is statutory and valid, but its legal basis is § 9, not § 16. The Process Inflation Finding for Krav 6 confirms: "§ 16 contains no language authorizing supervision; the true legal basis exists in § 9, leading to a gap of

mis-attribution." **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** INTERNAL CONTROL — supervisory compliance verification; no direct bearing on user case assessment quality **BURDEN DESCRIPTION:** Municipalities and NAV offices must maintain documentation demonstrating fulfillment of the planning obligation in order to meet supervisory inspection requirements. The NAV leader must ensure plan documents are current, dated, and accessible for inspection. The mis-attribution of supervisory authority to § 16 rather than § 9 creates a normative confusion that complicates municipalities' ability to locate the correct legal framework governing their compliance obligations. **KILL LIST CLASSIFICATION:** Category C — Clarification. The normative confusion created by mis-attributing § 9 supervisory authority to § 16 needs to be made explicit. The circular should clearly cross-reference § 9 as the correct legal basis for supervisory authority, restoring normative precision and reducing shadow-binding through ambiguity. **TRANSACTION COST CATEGORY:** Reporting Overhead

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REQUIREMENT ID: § 16 — REQ-16.7 **PROVISION TEXT:** Municipality obligated to prepare a beredskapsplan specifically for the social services component within the NAV office **SOURCE INSTRUMENT:** Circular R-35, section 3.16.1 (circular commentary) **CIRCULAR AUTHORITY:** PRESENT — formally present in section 3.16.1; however, the circular here exceeds its statutory mandate by creating a sub-unit obligation not found in the statutory text of § 16 **LEGAL AUTHORITY:** PARTIAL — sosialtjenesteloven § 16 mandates a municipal-level plan obligation; the circular's elevation of this to a specific sub-unit plan for social services within the NAV office is a circular addition. Process Inflation Finding for Krav 7: "The statute establishes the plan duty at the municipal level, whereas the circular creates a sub-divided, unit-specific obligation not explicitly found in § 16." **DOUBLE AUTHORITY GAP:** NO (circular authority formally present, even though it exceeds statutory mandate) **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — in the smallest municipalities, producing a separate sub-unit plan requires dedicated administrative capacity that the office may not have; Anchor Document [D] documentation burden applies **PURPOSE:** MIXED — user protection (primary): dedicated social services planning ensures NAV-specific emergency response; separate sub-unit documentation (secondary): serves administrative differentiation and supervisory inspection rather than direct user outcome **BURDEN DESCRIPTION:** The NAV leader or social services manager must produce, maintain, and periodically update a beredskapsplan specifically for the social services functions of the NAV office — a document separate from the general municipal preparedness plan. This documentation obligation exceeds what the statute mandates: the circular creates a requirement the primary statutory text does not contain, meaning caseworkers and leaders are subject to an obligation for which the circular provides the only normative anchor, and whose statutory basis is partial. In small municipalities, this obligation competes with frontline casework capacity. **KILL LIST CLASSIFICATION:** Category B — Status Change. The circular uses imperative language ("er kommunen pålagt") to create a sub-unit obligation that the statute does not contain. Reformulation to permissive language — recommending a dedicated social services section within the municipal plan as a best practice, rather than mandating a separate sub-unit plan document — would restore local discretion to determine the appropriate plan architecture while preserving the user-protective purpose. **TRANSACTION COST CATEGORY:** Documentation Inflation

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REQUIREMENT ID: § 16 — REQ-16.8 **PROVISION TEXT:** Beredskapsplan must be prepared in conformance with the health and social preparedness act and its regulations **SOURCE INSTRUMENT:** Circular R-35, § 16 and section 3.16.1 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — sosialtjenesteloven § 16 explicitly references lov om helsemessig og sosial beredskap; conformance standard is fully statutory; Process Inflation finding: HAS_HJEMMEL confirmed **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED — ensures the plan is substantively adequate to its user-protective purpose by meeting the legally established quality standard **BURDEN DESCRIPTION:** No transaction cost burden identified beyond what REQ-16.1 already imposes. The conformance requirement is a quality dimension of the plan obligation, not a separate documentation layer. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: § 16 — REQ-16.9 **PROVISION TEXT:** Notification routine (varslingsrutine) must be explicitly described in each individual unit's beredskapsplan **SOURCE INSTRUMENT:** Veileder til standard for trygge brukermøter i NAV (DOC-REQ-16.5 / PROC-REQ-16.8) **CIRCULAR AUTHORITY:** ABSENT. § 16 and section 3.16.1 are entirely silent on specific content requirements for beredskapsplaner. This constitutes a first-order authority gap: the requirement operates outside the circular framework entirely. Caseworkers and leaders must comply with a specific content obligation that the primary normative instrument governing their work does not address. **LEGAL AUTHORITY:** NO. Sosialtjenesteloven § 16 contains no content prescription for beredskapsplaner. The source instrument — Veileder til standard for trygge brukermøter i NAV — is an HMS/workplace safety document whose operative legal domain is arbeidsmiljøloven, not sosialtjenesteloven § 16. Process Inflation Finding for Krav 9: "Section 16 is silent on specific content requirements." **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT and statutory authority NO **CATEGORY ERROR:** YES. The Veileder til standard for trygge brukermøter i NAV governs workplace safety and the physical management of threatening user encounters in NAV offices. Its primary legal domain is arbeidsmiljøloven / HMS regulation. Importing a specific notification-routine documentation prescription from this instrument into the social services emergency preparedness framework governed by sosialtjenesteloven § 16 constitutes a category error: the obligation belongs to a different legal domain. **SCALE FLAG:** YES. Drafting, maintaining, and updating a notification routine section requires dedicated plan-management capacity. In small offices where the NAV leader simultaneously manages frontline casework, this documentation obligation competes directly with service delivery capacity. Anchor Document [D] general finding applicable. As this requirement lacks circular authority, any scale-related burden is entirely without regulatory foundation in the social services circular framework. **PURPOSE:** INTERNAL CONTROL. The notification routine prescribes internal operational procedures for staff to follow when safety threats arise — a workplace safety management function. Assessed from the perspective of social services users, whether this routine is documented in the plan has no direct bearing on case quality, legal security, or service access outcomes. **BURDEN DESCRIPTION:** The NAV leader or designated plan responsible must draft a specific notification routine section covering trigger criteria, escalation steps, contact chains, and

fallback procedures — and must keep this section current as personnel and procedures change. This is documentation-intensive internal safety management work with no direct user benefit. Because this requirement derives from a workplace safety veileder and has no circular authority, the obligation falls entirely outside the guidance framework the circular provides: there is no normative anchor in the primary social services instrument to interpret, calibrate, or constrain what the notification routine must contain. **KILL LIST CLASSIFICATION:** Category A — Removal. This requirement lacks legal authority under sosialtjenesteloven § 16, derives from a different legal domain (arbeidsmiljøloven / HMS), and has no circular basis. It is a candidate for repeal from the social services normative framework. If a notification routine is required for workplace safety purposes, it belongs in the HMS regulatory framework under its correct legal basis, not within the social services emergency preparedness obligation. **TRANSACTION COST CATEGORY:** Documentation Inflation; Combined Burden (contributes to beredskapsplan documentation cluster with REQ-16.10, REQ-16.11, REQ-16.12)

REQUIREMENT ID: § 16 — REQ-16.10 **PROVISION TEXT:** All NAV units must have prepared their own separate beredskapsplan, based on the government's societal security instruction (samfunnssikkerhetsinstruksen) **SOURCE INSTRUMENT:** Veileder til standard for trygge brukermøter i NAV (DOC-REQ-16.6 / PROC-REQ-16.7) **CIRCULAR AUTHORITY:** ABSENT. The circular paragraph authorizes one plan obligation at the municipal level. The multiplication of this into per-unit plans for every NAV unit, with a different legal basis than sosialtjenesteloven § 16, finds no support in the circular. This is a first-order authority gap. Caseworkers and leaders must comply with an obligation the circular does not acknowledge. **LEGAL AUTHORITY:** NO. Sosialtjenesteloven § 16 authorizes a single municipal-level plan. The per-unit multiplication and basis-shift to samfunnssikkerhetsinstruksen represents an unauthorized elaboration. Process Inflation Finding for Krav 10: "The statute authorizes a single municipal-level plan, but the circular multiplies this into a per-unit obligation and inappropriately shifts the legal basis to an administrative instruction not authorized by § 16." **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT and statutory authority NO **CATEGORY ERROR:** YES. The source instrument (Veileder til standard for trygge brukermøter i NAV) belongs to the HMS domain. The reference to samfunnssikkerhetsinstruksen further anchors this requirement in the civil emergency management / security framework, which operates under its own statutory basis (sivilbeskyttelsesloven, DSB-instrukser) distinct from sosialtjenesteloven. This is a category error: the obligation belongs to a different legal domain (civil security / workplace safety), not to the social services emergency preparedness framework. **SCALE FLAG:** YES. Requiring every NAV unit to produce its own standalone beredskapsplan creates a document multiplication obligation that is structurally incoherent in single-unit NAV offices — the dominant configuration in small municipalities. Even in larger offices, the requirement presupposes dedicated plan-management capacity per unit, which most NAV units do not have. Anchor Document Cluster 2 analysis (internal control apparatus requiring organizational differentiation that small offices cannot achieve) applies directly. As this requirement lacks both circular and statutory authority, any scale-related burden is entirely without regulatory foundation. **PURPOSE:** INTERNAL CONTROL. The per-unit plan obligation creates separate documentation artifacts for supervisory inspection and internal accountability. From the perspective of social services users, whether emergency

preparedness is documented in one municipal plan or in multiple unit-level plan documents has no direct bearing on service quality, case outcomes, or legal security. The multiplication of plan documents serves administrative audit logic, not user protection. **BURDEN DESCRIPTION:** Every organizational unit within the NAV office must independently produce, maintain, and update a separate beredskapsplan document — referenced against a government security instruction that is not part of the sosialtjenesteloven framework. In single-unit offices, this creates documentation of an organizational multiplicity that does not exist, producing compliance paperwork without substantive organizational justification. In multi-unit offices, it creates concurrent documentation obligations across units simultaneously. The obligation falls on unit leaders who in small municipalities are also the primary caseworkers. Because this requirement has no circular authority and belongs to a different legal domain, the documentation burden it imposes falls entirely outside any guidance framework the social services circular provides. **KILL LIST CLASSIFICATION:** Category A — Removal. This requirement lacks legal authority under sosialtjenesteloven § 16, derives from a different legal domain (HMS/civil security), constitutes an unauthorized multiplication of the statutory plan obligation, and imposes disproportionate documentation burden without regulatory foundation. It is a candidate for repeal from the social services normative framework. **TRANSACTION COST CATEGORY:** Documentation Inflation; Procedural Duplication (duplicates the municipal plan obligation without statutory basis); Structural Disproportionality (presupposes organizational differentiation the majority of NAV offices do not have)

REQUIREMENT ID: § 16 — REQ-16.11 **PROVISION TEXT:** The overarching plan must ensure that the owners fulfill their respective statutory requirements in each organization, and the requirements set for establishing and operating the NAV office **SOURCE INSTRUMENT:** Veileder til partnerskapsavtalen (DOC-REQ-16.7 / PROC-REQ-16.10) **CIRCULAR AUTHORITY:** ABSENT. The circular paragraph contains no provision extending the beredskapsplan obligation into a comprehensive owner-compliance instrument. The circular framework offers no guidance for this requirement. This is a first-order authority gap. **LEGAL AUTHORITY:** NO. Sosialtjenesteloven § 16 authorizes a beredskapsplan for the municipality's social services functions. It does not authorize conversion of the plan into a bilateral compliance instrument spanning both organizational owners' full statutory portfolios. Process Inflation Finding for Krav 11: "The circular reformulates the plan duty into a comprehensive compliance tool spanning both owners' entire organizations, extending well beyond the authorized scope of § 16." **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT and statutory authority NO **CATEGORY ERROR:** YES. The Veileder til partnerskapsavtalen belongs to the administrative governance domain of the NAV partnership framework (NAV-loven §§ 13–15 and the bilateral partnership agreements between state and municipality). Obligations deriving from the partnership governance framework do not have their legal home in sosialtjenesteloven § 16. This is a category error: the requirement belongs to a different legal domain (NAV partnership law and organizational governance), not to social services emergency preparedness. **SCALE FLAG:** YES. In small municipalities, the NAV leader must generate documentation confirming that both the municipal and state owners' full portfolios of statutory obligations are addressed in the plan — a task that presupposes access to both organizational hierarchies' legal compliance inventories and bilateral governance capacity that small offices cannot sustain. Anchor

Document [C] Coordination Infrastructure and [D] Documentation Apparatus findings apply. As this requirement lacks both circular and statutory authority, any scale-related burden is entirely without regulatory foundation. **PURPOSE:** INTERNAL CONTROL. This requirement transforms a user-protective emergency preparedness plan into a bilateral compliance demonstration instrument for organizational owners. The language ("ivareta at eierne oppfyller lovpålagte krav") is governance-oriented rather than service-oriented. From the perspective of social services users, whether the plan formally documents both owners' statutory compliance portfolios has no direct bearing on their access to emergency assistance. **BURDEN DESCRIPTION:** Both the municipal and state organizational partners must ensure the joint plan formally documents full bilateral statutory compliance. This requires: legal compliance inventories for both organizations, coordinated documentation processes across two organizational hierarchies, bilateral review and sign-off, and periodic updating as legal obligations change. The NAV leader and municipal administration must manage this process jointly with state counterparts. Because this requirement has no circular authority and belongs to a different legal domain, the bilateral documentation obligation it imposes falls entirely outside any guidance framework the social services circular provides. Caseworkers and leaders must satisfy a governance accountability obligation for which neither sosialtjenesteloven nor the circular offers normative grounding. **KILL LIST CLASSIFICATION:** Category A — Removal. This requirement lacks legal authority under sosialtjenesteloven § 16, derives from a different legal domain (NAV partnership governance), constitutes an unauthorized scope extension of the beredskapsplan obligation, and imposes bilateral documentation overhead without regulatory foundation. It is a candidate for repeal from the social services normative framework. If partnership compliance documentation is required, it belongs in the partnership governance instruments under their correct legal basis. **TRANSACTION COST CATEGORY:** Documentation Inflation; Structural Disproportionality (presupposes bilateral governance capacity unavailable in small offices); Combined Burden (cumulates with REQ-16.9, REQ-16.10, REQ-16.12 to form a beredskapsplan documentation cluster)

REQUIREMENT ID: § 16 — REQ-16.12 **PROVISION TEXT:** The owners shall jointly ensure that the content of the documentation is detailed and described **SOURCE INSTRUMENT:** Veileder til partnerskapsavtalen (DOC-REQ-16.8 / PROC-REQ-16.9) **CIRCULAR AUTHORITY:** ABSENT. The circular paragraph contains no basis for a joint owner documentation process obligation. This is a first-order authority gap. **LEGAL AUTHORITY:** NO. Sosialtjenesteloven § 16 imposes obligations on the municipality as a legal unit; it does not establish a bilateral procedural co-obligation for both organizational owners to collectively generate and maintain documentation content. Process Inflation Finding for Krav 12: "The circular introduces a joint, mandatory procedural co-obligation for both owners to collectively generate documentation, which is completely absent from § 16 and cannot be derived from its text." **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT and statutory authority NO **CATEGORY ERROR:** YES. Same domain analysis as REQ-16.11. The Veileder til partnerskapsavtalen belongs to the NAV partnership governance domain (NAV-loven), not to sosialtjenesteloven § 16. The obligation to maintain an ongoing bilateral documentation process is a partnership governance function, not a social services emergency preparedness obligation. **SCALE FLAG:** YES. The joint documentation obligation requires active coordination between two organizational hierarchies on an ongoing

basis — precisely the kind of formalized inter-agency process that the Anchor Document identifies as producing compliance failures in small municipalities: "the requirement for formalized inter-agency coordination agreements produces sanctions when small municipalities rely on informal case-by-case contact." The parallel is structurally exact. As this requirement lacks both circular and statutory authority, any scale-related burden is entirely without regulatory foundation. **PURPOSE:** INTERNAL CONTROL. The obligation that owners collectively detail and describe documentation content serves the administrative relationship between the owning parties. It creates a governance accountability process between organizational principals. From the perspective of social services users, the documentation process between state and municipal owners has no direct bearing on emergency assistance quality, case outcomes, or legal security. **BURDEN DESCRIPTION:** The NAV leader and counterparts in both the municipal administration and state organizational hierarchy must engage in an ongoing, joint process of reviewing, detailing, and describing the content of the partnership preparedness documentation — with no cap on frequency or scope defined in the veileder. In small municipalities, this process must be managed by a NAV leader who has no dedicated partnership administration capacity. Because this requirement has no circular authority and belongs to a different legal domain, the bilateral procedural obligation it imposes is without any normative grounding in the social services framework governing the caseworkers' and leaders' primary work obligations. **KILL LIST CLASSIFICATION:** Category A — Removal. This requirement lacks legal authority under sosialtjenesteloven § 16, derives from a different legal domain (NAV partnership governance), creates a joint procedural co-obligation without statutory basis, and imposes bilateral administrative overhead that falls entirely outside the social services circular framework. It is a candidate for repeal from the social services normative framework. **TRANSACTION COST CATEGORY:** Documentation Inflation; Structural Disproportionality; Reporting Overhead (ongoing bilateral documentation maintenance obligation to partnership principals)

REQUIREMENT ID: § 16 — REQ-16.13 **PROVISION TEXT:** Applications concerning help in an emergency situation must be assessed rapidly, preferably on the same day **SOURCE INSTRUMENT:** Veileder for økonomisk stønad (PROC-REQ-16.11) **CIRCULAR AUTHORITY:** ABSENT. The circular paragraph for § 16 contains no individual case processing timeline standard. The circular addresses beredskapsplanlegging and inter-municipal assistance obligations, not individual case handling speed. This is a first-order authority gap. Caseworkers must comply with a near-absolute processing standard that the primary normative instrument governing § 16 does not address. **LEGAL AUTHORITY:** PARTIAL. Sosialtjenesteloven § 16 establishes the duty to provide "nødvendig hjelp" in acute situations — a substantive obligation with full statutory anchor. However, the conversion of this open normative standard into a procedurally specific "helst samme dag" timeline is a veileder construction, not a statutory prescription. The Process Inflation Finding for this requirement confirms: "The circular converts the law's open normative standard ('nødvendig hjelp') into a near-absolute, specific time-bound processing obligation, shadow-binding the authority's freedom to assess the appropriate response timeframe." **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT and statutory authority PARTIAL **CATEGORY ERROR:** NO. This requirement derives from Veileder for økonomisk stønad, which belongs to the social services domain. The substantive content is within the §

16 subject matter. However, the requirement properly belongs to the casework standards framework for individual assistance processing (§§ 18–21 domain) rather than to § 16's emergency preparedness framework, constituting a sub-framework misattribution within social services law. **SCALE FLAG:** PARTIAL. The same-day processing standard does not directly presuppose organizational scale, but in the smallest municipalities where a single caseworker manages the full social services portfolio, the standard may be incompatible with concurrent caseload pressures on the same day. No specific § 16 Anchor Document findings exist; the scale flag is partial based on structural inference. **PURPOSE:** MIXED. User access to emergency assistance as rapidly as possible is the primary purpose — this is directly user-serving. The conversion to a near-absolute timeline introduces a secondary constraint: caseworkers must be able to demonstrate same-day processing compliance, generating a timeliness-documentation overhead layered on the substantive obligation. User protection is primary; shadow-binding of processing discretion is secondary. **BURDEN DESCRIPTION:** The caseworker must assess emergency applications on the day of receipt, managing their workday to ensure rapid turnaround. The secondary documentation burden involves recording receipt and decision times to demonstrate compliance with the same-day standard. Because this requirement has no circular authority, caseworkers must manage a near-absolute processing timeline with no guidance from the primary normative instrument about how to handle cases where same-day processing is operationally difficult — for instance, where an emergency application arrives late in the shift concurrent with other urgent obligations. The constraint on discretion regarding what constitutes "nødvendig hjelp" timing is operative without normative support in the circular. **KILL LIST CLASSIFICATION:** Category B — Status Change. The veileder uses imperative language ("helst samme dag" paired with "må søknaden vurderes raskt") to shadow-bind a statutory standard ("nødvendig hjelp") that the legislature deliberately left open to allow professional assessment of what timing is appropriate in each case. Reformulation to permissive language — articulating same-day processing as a best-practice goal while preserving the caseworker's professional discretion to assess appropriate urgency response — would restore the discretionary space the statute provides. **TRANSACTION COST CATEGORY:** No Transaction Cost Identified (primary burden is substantive user service delivery; secondary documentation burden is modest)

REQUIREMENT ID: § 16 — REQ-16.14 **PROVISION TEXT:** Which information is to be obtained and how it is documented must be limited to a minimum to ensure rapid case processing **SOURCE INSTRUMENT:** Veileder for økonomisk stønad (PROC-REQ-16.12) **CIRCULAR AUTHORITY:** ABSENT. The circular paragraph contains no provision establishing an upper ceiling on evidence-gathering for emergency situations. This is a first-order authority gap. Caseworkers must comply with an evidence-ceiling constraint that the primary normative instrument governing § 16 does not address. **LEGAL AUTHORITY:** PARTIAL. The proportionality principle in case processing is consistent with general administrative law, and expedience in emergency situations is implied by § 16's "nødvendig hjelp" obligation. However, the Veileder's formulation of an absolute upper limit on evidence acquisition shadow-binds the caseworker's legally granted discretion regarding what information is actually needed to fulfill the statutory duty adequately. Process Inflation Finding for this requirement: "The circular shadow-binds the authority's evidence-discretion by imposing an absolute upper limit on evidence gathering, which eliminates the legally

granted freedom to ascertain what information is actually needed to fulfill the statutory duty." **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT and statutory authority PARTIAL **CATEGORY ERROR:** NO. This requirement belongs to the social services domain; it is substantively misplaced under § 16 rather than a cross-domain import. **SCALE FLAG:** NO. The evidence-ceiling does not presuppose organizational scale. If anything, it reduces the documentation burden in emergency cases rather than adding to it. **PURPOSE:** MIXED. Ensuring fast processing in emergency situations directly serves users by preventing access delays caused by disproportionate evidence-gathering (primary purpose). The imposition of an absolute evidence ceiling constrains professional judgment about what information is necessary — a secondary shadow-binding effect that can produce under-documentation with legal exposure consequences. **BURDEN DESCRIPTION:** The caseworker must consciously constrain evidence-gathering and documentation below what professional judgment might otherwise indicate as adequate for a defensible decision record. The risk is inverse to most documentation requirements: rather than demanding more paperwork, this constraint may produce under-documentation that creates legal vulnerability if the emergency decision is subsequently challenged. Because this requirement has no circular authority, caseworkers must navigate an evidence-ceiling with no guidance from the primary normative instrument about where exactly the minimum threshold lies — leaving the caseworker simultaneously obligated to limit evidence and unable to locate the authoritative standard against which their compliance can be assessed. **KILL LIST CLASSIFICATION:** Category B — Status Change. The veileder uses imperative language ("må begrenses") to impose an evidence-ceiling that the statute does not prescribe. Reformulation to permissive language — guidance that evidence-gathering in emergency cases should be proportionate and efficient, without a mandatory upper limit that shadows-binds caseworker discretion — would restore the professional assessment space the statute provides. **TRANSACTION COST CATEGORY:** No Transaction Cost Identified (the primary effect is a constraint on documentation rather than a documentation burden; secondary risk is legal exposure from under-documentation, but this is a legal risk rather than a transaction cost in the conventional sense)

CLOSING COMPARATIVE NOTE

Total requirements identified starting from the Process Inflation Findings: 14

Requirements visible from the circular alone: 8 (REQ-16.1 through REQ-16.8)

Requirements invisible from the circular alone: 6 (REQ-16.9 through REQ-16.14) — representing 43% of all identified requirements in this paragraph

Double authority gaps: 6 (REQ-16.9, REQ-16.10, REQ-16.11, REQ-16.12, REQ-16.13, REQ-16.14) — all six requirements invisible from the circular also constitute double authority gaps; no requirement with circular authority also lacks statutory authority entirely

Category errors (requirements belonging to a different legal domain): 4 (REQ-16.9, REQ-16.10 from the HMS/workplace safety domain; REQ-16.11, REQ-16.12 from the NAV partnership governance domain). Note that REQ-16.13 and REQ-16.14 are substantively

misattributed within the social services framework but do not constitute cross-domain category errors.

Kill List breakdown:

- Category A — Removal: 4 requirements (REQ-16.9, REQ-16.10, REQ-16.11, REQ-16.12)
- Category B — Status Change: 3 requirements (REQ-16.7, REQ-16.13, REQ-16.14)
- Category C — Clarification: 1 requirement (REQ-16.6)
- No Kill List Action: 6 requirements (REQ-16.1, REQ-16.2, REQ-16.3, REQ-16.4, REQ-16.5, REQ-16.8)

Primary transaction cost categories by frequency:

- Documentation Inflation: 4 requirements (REQ-16.7, REQ-16.9, REQ-16.10, REQ-16.11, REQ-16.12) — dominant category
- Structural Disproportionality: 3 requirements (REQ-16.10, REQ-16.11, REQ-16.12)
- Reporting Overhead: 2 requirements (REQ-16.6, REQ-16.12)
- Procedural Duplication: 1 requirement (REQ-16.10)
- Combined Burden: 3 requirements (REQ-16.9, REQ-16.10, REQ-16.11 — as components of the beredskapsplan documentation cluster)
- No Transaction Cost Identified: 6 requirements

Synthesis observation: § 16 presents a structurally distinctive sludge profile compared to the service-delivery paragraphs analyzed in the Anchor Document. The statutory core of § 16 is lean and well-anchored: five substantive obligations with clear legal basis and no meaningful documentation inflation. The sludge load is entirely concentrated in six requirements imported from three separate sub-legal instruments across three administrative domains — none of which appear in the circular. Four of these constitute category errors, meaning they import obligations from HMS regulation and partnership governance law into the social services emergency preparedness framework without statutory authorization. The result is a paragraph whose statutory text is administratively straightforward, but whose effective normative load — as revealed only through the Process Inflation Findings — is significantly inflated by sub-legal instruments operating outside the circular's framework and outside the statutory domain of sosialtjenesteloven § 16 altogether.

SLUDGE AUDIT — § 17 OPPLYSNING, RÅD OG VEILEDNING

Systematic Identification of Documentation Requirements and Procedural Obligations Serving Internal Control Rather Than User Needs

Legal-administrative analysis. Draft for manual legal verification.

PRELIMINARY METHODOLOGICAL NOTE

Requirement count comparison:

Starting from the Process Inflation Findings (Reference Document), **39 requirements** are identifiable for § 17.

Starting from the circular paragraph alone (R-35 § 4.17 in its entirety as reproduced in the Context Document), **18 requirements** would be visible.

This means **21 requirements — 54 percent of the total regulatory load — are invisible from the circular alone.** An analyst working only from R-35 would miss more than half the obligations that caseworkers are in practice expected to comply with.

Source mapping of the 21 invisible requirements:

Instrument	Requirements	Type
Veileder til sotjl. § 17	DOC-REQ-17.8, 17.9, 17.10, 17.11, 17.12, 17.13, 17.14, 17.15, 17.16, 17.17, 17.18, 17.19, 17.20; PROC-REQ-17.13, 17.14, 17.15	(b) veileder
Kommunebrev 2025	DOC-REQ-17.21; PROC-REQ-17.12	(a) Kommunebrev
Veileder for økonomisk rådgivning	PROC-REQ-17.16, 17.17, 17.18	(b) veileder — sub-domain guidance document

The veilederes account for 19 of the 21 invisible requirements. The Kommunebrev accounts for 2. No requirements in this paragraph derive from a standard document (type c), a guidance document attached to a standard (type d), or another unlisted sub-legal instrument

(type e). The structural implication is significant: veileders operate as shadow regulators, generating a compliance load that the primary normative instrument — R-35 — does not contain, explain, or provide a framework for caseworkers to navigate.

This source mapping is carried forward into Step 2.

STEP 1 — IDENTIFICATION OF ALL REQUIREMENTS

Documentation Requirements (DOC-REQ)

ID	Obligation	Source Instrument	Explicit/Implicit	Textual Presence in Circular
DOC-REQ-17.1	Råd og veiledning er en tjeneste som det skal fattes vedtak om eller som skal inngå som del av vedtak.	R-35, § 4.17.2.4	Explicit	PRESENT
DOC-REQ-17.2	Hvis tjenestemottaker får råd og veiledning i forbindelse med andre tjenester, skal det i vedtaket om denne tjenesten fremgå hva som er gitt av råd og veiledning.	R-35, § 4.17.2.4	Explicit	PRESENT
DOC-REQ-17.3	Hvis tjenestemottaker ikke har pågående sak, kan vedkommende søke om tjenesten og få et vedtak om retten til tjenesten.	R-35, § 4.17.2.4	Explicit	PRESENT
DOC-REQ-17.4	Det er retten til tjenesten som sådan, ikke det nærmere innhold i hva rådgivningen skal gå ut på, som må fremgå av vedtaket.	R-35, § 4.17.2.4	Explicit	PRESENT
DOC-REQ-17.5	Vedtaket skal inneholde tidspunktet for rådgivningen eller en tidsfrist for når tjenesten skal oppfylles.	R-35, § 4.17.2.4	Explicit	PRESENT
DOC-REQ-17.6	Hvis deltaker i kvalifiseringsprogram har råd og veiledning som tiltak, skal det fattes vedtak om tjenesten som tiltak.	R-35, § 4.17.2.4	Explicit	PRESENT

DOC-REQ-17.7	Det skal fattes enkeltvedtak om avslag eller avslutning av råd og veiledning.	R-35, § 4.17.2.4	Explicit	PRESENT
DOC-REQ-17.8	Nav-kontoret har plikt til å nedtegne muntlige søknader.	Veileder til sotjl. § 17	Explicit	ABSENT
DOC-REQ-17.9	Det er ikke nødvendig at nedtegnelsen skjer ved å fylle ut søknadsskjema; det holder at søknaden fremgår av saken, som i et notat.	Veileder til sotjl. § 17	Explicit	ABSENT
DOC-REQ-17.10	Tidspunktet for søknaden skal fremgå av saken.	Veileder til sotjl. § 17	Explicit	ABSENT
DOC-REQ-17.11	Råd og veiledning gitt i forbindelse med innvilgelse eller avslag av andre sosiale tjenester skal omtales i innvilgelsesvedtaket eller avslaget.	Veileder til sotjl. § 17	Explicit	ABSENT
DOC-REQ-17.12	Alle søknader skal vurderes individuelt og konkret ut fra søkerens behov, og avgjørelsen skal fattes i et enkeltvedtak.	Veileder til sotjl. § 17	Explicit	ABSENT
DOC-REQ-17.13	Vedtaket skal vise om tjenesten er innvilget eller avslått, hva som eventuelt er innvilget, og begrunnelsen for avgjørelsen.	Veileder til sotjl. § 17	Explicit	ABSENT
DOC-REQ-17.14	Vedtak om innvilgelse skal inneholde tidspunkt for oppstart av tjenesten, i form av konkret timeavtale eller frist for når første samtale skal være avholdt.	Veileder til sotjl. § 17	Explicit	ABSENT
DOC-REQ-17.15	Begrunnelsen skal vise til regelen vedtaket bygger på (sotjl. § 17) og nevne faktiske forhold ved brukerens situasjon som har hatt betydning.	Veileder til sotjl. § 17	Explicit	ABSENT

DOC-REQ-17.16	Avgjørelser om tildeling av tjenesten skal fattes i eget vedtak eller inngå som del av et vedtak som gjelder andre sosiale tjenester.	Veileder til sotjl. § 17	Explicit	ABSENT
DOC-REQ-17.17	Hvis brukeren får opplysning, råd og veiledning i forbindelse med innvilgelse eller avslag av en annen tjeneste, skal det i det andre vedtaket fremgå hva som er gitt.	Veileder til sotjl. § 17	Explicit	ABSENT
DOC-REQ-17.18	Tjenesten som tiltak (KVP) skal fattes i eget vedtak etter sotjl. § 17, og ikke inngå i vedtaket om kvalifiseringsprogram etter sotjl. § 29.	Veileder til sotjl. § 17	Explicit	ABSENT
DOC-REQ-17.19	Hvis tjenesten avsluttes av årsaker knyttet til saken, skal det skrives et avslutningsnotat, eventuelt et avslutningsbrev til brukeren.	Veileder til sotjl. § 17	Explicit	ABSENT
DOC-REQ-17.20	Hva som er gjort og hvilke løsninger som er valgt skrives i avslutningsnotatet.	Veileder til sotjl. § 17	Explicit	ABSENT
DOC-REQ-17.21	Råd og veiledning er en tjeneste som det skal fattes vedtak om eller som skal inngå som del av vedtak. Vedtaket skal bidra til å sikre tjenestemottakers rettigheter.	Kommunebrev 2025	Explicit	ABSENT

Procedural Requirements (PROC-REQ)

ID	Obligation	Source Instrument	Explicit/Implicit	Textual Presence in Circular
PROC-REQ-17.1	Nav-kontoret skal vurdere hvilke råd og veiledningsbehov den enkelte har, og tilpasse tjenesten ut fra dette.	R-35, § 4.17.1	Explicit	PRESENT

PROC-REQ-17.2	Kartlegging av barn og unges behov i familier som er mottakere av økonomisk stønad vil være nødvendig for å kunne gi veiledning i den konkrete situasjonen.	R-35, § 4.17.1	Explicit	PRESENT
PROC-REQ-17.3	Nav-kontoret skal på bakgrunn av sin råd og veiledningsplikt ha et helhetlig fokus på tjenestemottakerens livssituasjon på ulike områder (arbeid, helse, fritid, bolig, nettverk, økonomi, m.m.).	R-35, § 4.17.2.1	Explicit	PRESENT
PROC-REQ-17.4	Innholdet i råd og veiledningen må vurderes ut fra sosialfaglige normer og behovene til den enkelte tjenestemottaker.	R-35, § 4.17.2.1	Explicit	PRESENT
PROC-REQ-17.5	Nav-kontoret har plikt til å henvise til andre forvaltningsorgan der veiledningsbehovet går ut over Nav-kontorets kompetanse, og skal «så vidt mulig» sørge for at andre instanser gir hjelp.	R-35, § 4.17.2.1	Explicit	PRESENT
PROC-REQ-17.6	Råd og veiledning er en tjeneste som det skal fattes vedtak om eller som skal inngå som del av vedtak. [Procedural framing]	R-35, § 4.17.2.4	Explicit	PRESENT
PROC-REQ-17.7	Nav-kontoret må vurdere behovet for rådgivningen og angi innen hvilket tidspunkt rådgivningen skal finne sted.	R-35, § 4.17.2.4	Explicit	PRESENT
PROC-REQ-17.8	Nav-kontoret skal etter eget tiltak vurdere tjenestemottakers behov for veiledning.	R-35, § 4.17.2.6	Explicit	PRESENT
PROC-REQ-17.9	Når Nav-kontoret skal avklare tjenestemottakers behov for økonomisk rådgivning, er det nødvendig å kartlegge vedkommendes faktiske	R-35, § 4.17.2.7	Explicit	PRESENT

	inntekter, utgifter, eiendeler og gjeld.			
PROC-REQ-17.10	Ut fra kartleggingen må Nav-kontoret vurdere på hvilket nivå rådgivningen skal gis.	R-35, § 4.17.2.7	Explicit	PRESENT
PROC-REQ-17.11	Der det foreligger alvorlige gjeldsproblemer, må Nav-kontoret informere om gjeldsordningen og bistå skyldneren så langt det er mulig med å komme frem til en utenrettslig gjeldsordning.	R-35, § 4.17.2.9	Explicit	PRESENT
PROC-REQ-17.12	Råd og veiledning er en tjeneste som det skal fattes vedtak om eller som skal inngå som del av vedtak. [Kommunebrev repetition]	Kommunebrev 2025	Explicit	ABSENT
PROC-REQ-17.13	Dersom en mindreårig søker om tjenesten, må Nav-kontoret innhente samtykke fra den eller de med foreldreansvaret før det søkes om tjenesten.	Veileder sotjl. § 17	Explicit	ABSENT
PROC-REQ-17.14	I behandlingen av en søknad må Nav-kontoret avklare om det er noe som haster og må løses umiddelbart.	Veileder sotjl. § 17	Explicit	ABSENT
PROC-REQ-17.15	Alle søknader om tjenesten skal vurderes individuelt og konkret ut fra søkerens behov på søknadstidspunktet.	Veileder sotjl. § 17	Explicit	ABSENT
PROC-REQ-17.16	Det må innledningsvis avklares om saken dreier seg om forhold som faller inn under økonomisk rådgivning som kan/bør behandles av kommunal rådgivningstjeneste.	Veileder øk. rådgivning	Explicit	ABSENT
PROC-REQ-17.17	Dersom rådgiveren skal innhente dokumentasjon, må bruker gi rådgiveren fullmakt til dette.	Veileder øk. rådgivning	Explicit	ABSENT

PROC-REQ-17.18	Det er viktig å kartlegge den økonomiske situasjonen hos samboer/ektefelle, selv om denne normalt ikke er ansvarlig for brukerens gjeld.	Veileder øk. rådgivning	Explicit (recommended)	ABSENT

Note on PROC-REQ-17.4 and PROC-REQ-17.5: The Process Inflation Findings classified these as SUBSTANTIVE LEGAL OBLIGATIONS rather than PROCEDURAL/DOCUMENTATION requirements, and excluded them from further processing in the original analysis. They are retained here for completeness of enumeration but are classified as USER NEED throughout, with no Kill List action identified.

STEP 2 — LEGAL AUTHORITY CHECK

For each requirement: Direction 1 = Circular authority (PRESENT/ABSENT). Direction 2 = Statutory authority (YES/NO/PARTIAL). Double authority gaps and category errors flagged explicitly.

DOC-REQ-17.1

- Direction 1 (Circular): PRESENT — R-35 § 4.17.2.4 directly states the vedtak requirement.
- Direction 2 (Statutory): YES — The requirement to issue formal administrative decisions for social services is grounded in sosialtjenesteloven §§ 41–44 and forvaltningsloven. Process Inflation Finding: no gap established.
- Double authority gap: NO. Category error: NO.

DOC-REQ-17.2

- Direction 1 (Circular): PRESENT — R-35 § 4.17.2.4 states that the content of guidance provided must appear in the other service's vedtak.
- Direction 2 (Statutory): PARTIAL — The Process Inflation Finding establishes that the Act provides no authority regarding how guidance is documented inside a different service's decision. The placement specificity has no explicit textual anchor in § 17.
- Double authority gap: NO (circular authority present). Category error: NO.

DOC-REQ-17.3

- Direction 1 (Circular): PRESENT.
- Direction 2 (Statutory): YES — No gap established; grounded in Social Services Act and Public Administration Act.
- Double authority gap: NO. Category error: NO.

DOC-REQ-17.4

- Direction 1 (Circular): PRESENT.

- Direction 2 (Statutory): YES — Aligns with the Act's open-content design. No gap.
- Double authority gap: NO. Category error: NO.

DOC-REQ-17.5

- Direction 1 (Circular): PRESENT — R-35 § 4.17.2.4 requires timing or deadline in the vedtak.
- Direction 2 (Statutory): PARTIAL — The Process Inflation Finding establishes that while the Act leaves timing to professional discretion, the circular escalates this into mandatory vedtak content without a statutory anchor, removing professional flexibility over scheduling.
- Double authority gap: NO (circular authority present). Category error: NO.
- Note: The Anchor Document (Cluster 1) specifically identifies start-date documentation requirements as part of the documentation-competence-specialization trap.

DOC-REQ-17.6

- Direction 1 (Circular): PRESENT.
- Direction 2 (Statutory): PARTIAL — The Process Inflation Finding establishes that § 17 contains no reference to KVP (which is governed by § 29), making the specific procedural link between § 17 guidance and KVP measures textually unsupported.
- Double authority gap: NO (circular authority present). Category error: NO.

DOC-REQ-17.7

- Direction 1 (Circular): PRESENT.
- Direction 2 (Statutory): YES — The enkeltvedtak requirement for adverse decisions is fully grounded in forvaltningsloven.
- Double authority gap: NO. Category error: NO.

DOC-REQ-17.8

- Direction 1 (Circular): ABSENT — This requirement appears only in the Veileder til sotjl. § 17, not in R-35.
- Direction 2 (Statutory): YES — The duty to record oral applications is fully grounded in general administrative case management obligations (forvaltningsloven § 11 ff).
- Double authority gap: NO (statutory authority present despite absent circular authority). Category error: NO.
- Consequence of absent circular authority: Caseworkers must comply with an obligation that R-35 — their primary normative instrument — does not address. The obligation is legally valid but normatively displaced into a sub-legal instrument.

DOC-REQ-17.9

- Direction 1 (Circular): ABSENT.
- Direction 2 (Statutory): YES — Permitted relaxation consistent with administrative principles. No gap.
- Double authority gap: NO. Category error: NO.

- Consequence of absent circular authority: Same displacement as DOC-REQ-17.8; however, this requirement is burden-reducing and carries less risk.

DOC-REQ-17.10

- Direction 1 (Circular): ABSENT.
- Direction 2 (Statutory): YES — Covered by basic administrative case-management obligations.
- Double authority gap: NO. Category error: NO.
- Consequence of absent circular authority: The requirement is legally valid but appears only in the Veileder, not in R-35.

DOC-REQ-17.11

- Direction 1 (Circular): ABSENT — This requirement appears only in Veileder til sotjl. § 17.
- Direction 2 (Statutory): PARTIAL — The Process Inflation Finding establishes that the specific format-placement requirement (guidance must appear inside the other service's vedtak) lacks explicit statutory anchor within the Act.
- **Double authority gap: YES.** Both circular authority and statutory authority are absent/partial. The requirement imposes a documentation format obligation that neither R-35 nor the Social Services Act directly mandates. Category error: NO.

DOC-REQ-17.12

- Direction 1 (Circular): ABSENT.
- Direction 2 (Statutory): YES — Individual assessment and enkeltvedtak grounded in preparatory works and forvaltningsloven. No gap.
- Double authority gap: NO. Category error: NO.
- Consequence of absent circular authority: Requirement is legally valid but caseworkers must source it from the Veileder rather than R-35.

DOC-REQ-17.13

- Direction 1 (Circular): ABSENT.
- Direction 2 (Statutory): YES — Directly operationalizes forvaltningsloven begrunnelseskrav. No gap.
- Double authority gap: NO. Category error: NO.
- Consequence of absent circular authority: The specific content elements for the vedtak are defined only in the Veileder, not in R-35.

DOC-REQ-17.14

- Direction 1 (Circular): ABSENT — Appears only in Veileder til sotjl. § 17.
- Direction 2 (Statutory): PARTIAL — The Process Inflation Finding establishes that while the Act permits timing elements in decisions, making start timing a mandatory, highly specified vedtak element (concrete appointment or strict deadline) bypasses allowed professional discretion without statutory anchor.
- **Double authority gap: YES.** Category error: NO.

DOC-REQ-17.15

- Direction 1 (Circular): ABSENT.
- Direction 2 (Statutory): YES — Standard forvaltningsloven begrunnelseskrav. No gap.
- Double authority gap: NO. Category error: NO.

DOC-REQ-17.16

- Direction 1 (Circular): ABSENT.
- Direction 2 (Statutory): YES — Grounded in Social Services Act and forvaltningsloven. No gap.
- Double authority gap: NO. Category error: NO.

DOC-REQ-17.17

- Direction 1 (Circular): ABSENT — Veileder til sotjl. § 17 only.
- Direction 2 (Statutory): PARTIAL — The Process Inflation Finding establishes that requiring documentation of § 17 guidance inside a different service's vedtak has no clear statutory anchor.
- **Double authority gap: YES.** Category error: NO.

DOC-REQ-17.18

- Direction 1 (Circular): ABSENT — Veileder til sotjl. § 17 only.
- Direction 2 (Statutory): PARTIAL (approaching NO) — The Process Inflation Finding establishes that neither § 17 nor § 29 requires separation of these decisions, making this requirement structurally contradictory to the circular's own flexibility and absent of statutory basis.
- **Double authority gap: YES.** Category error: NO.

DOC-REQ-17.19

- Direction 1 (Circular): ABSENT.
- Direction 2 (Statutory): PARTIAL — The Process Inflation Finding establishes that the specific format requirement for a termination note or letter is not prescribed by § 17 or standard administrative text.
- **Double authority gap: YES.** Category error: NO.

DOC-REQ-17.20

- Direction 1 (Circular): ABSENT.
- Direction 2 (Statutory): NO — The Process Inflation Finding explicitly states that the Act contains zero documentation mandates, and forcing professional choices into a mandatory retrospective record escalates the requirement without legal authority. This is the strongest negative finding in the dataset.
- **Double authority gap: YES.** Category error: NO.

DOC-REQ-17.21

- Direction 1 (Circular): ABSENT — Source is Kommunebrev 2025, not R-35.
- Direction 2 (Statutory): YES — The underlying vedtak requirement is legally grounded; the Kommunebrev adds an interpretive purpose clause without generating new binding obligations.
- Double authority gap: NO (statutory authority present). Category error: NO.
- Note: The Kommunebrev creates compliance pressure through a parallel channel, but the underlying obligation is valid.

PROC-REQ-17.1

- Direction 1 (Circular): PRESENT — R-35 § 4.17.1.
- Direction 2 (Statutory): YES — Directly tracks individual assessment intent from preparatory works.
- Double authority gap: NO. Category error: NO.

PROC-REQ-17.2

- Direction 1 (Circular): PRESENT — R-35 § 4.17.1.
- Direction 2 (Statutory): PARTIAL — The Process Inflation Finding establishes that the specific conditional mapping obligation targeting children's needs in families receiving economic support lacks explicit statutory anchoring directly within § 17.
- Double authority gap: NO (circular authority present). Category error: NO.

PROC-REQ-17.3

- Direction 1 (Circular): PRESENT — R-35 § 4.17.2.1.
- Direction 2 (Statutory): PARTIAL — The Process Inflation Finding establishes that the Act grants professional discretion on which areas to assess, while the circular rigidly converts scope into a comprehensive mandatory methodological obligation across specific life domains.
- Double authority gap: NO (circular authority present). Category error: NO.

PROC-REQ-17.4 (substantive)

- Direction 1 (Circular): PRESENT.
- Direction 2 (Statutory): YES — Substantive legal standard.
- Double authority gap: NO. Category error: NO.

PROC-REQ-17.5 (substantive)

- Direction 1 (Circular): PRESENT.
- Direction 2 (Statutory): YES — Substantive legal duty.
- Double authority gap: NO. Category error: NO.

PROC-REQ-17.6

- Direction 1 (Circular): PRESENT — R-35 § 4.17.2.4.
- Direction 2 (Statutory): YES — Functionally identical to DOC-REQ-17.1. No gap.
- Double authority gap: NO. Category error: NO.

PROC-REQ-17.7

- Direction 1 (Circular): PRESENT — R-35 § 4.17.2.4.
- Direction 2 (Statutory): PARTIAL — The Process Inflation Finding establishes that dictating timing as mandatory inclusion within the formal decision converts an open professional scheduling element into a strict formal requirement lacking explicit statutory anchor.
- Double authority gap: NO (circular authority present). Category error: NO.

PROC-REQ-17.8

- Direction 1 (Circular): PRESENT — R-35 § 4.17.2.6.
- Direction 2 (Statutory): YES — Grounded in forvaltningsloven § 11 and preparatory works.
- Double authority gap: NO. Category error: NO.

PROC-REQ-17.9

- Direction 1 (Circular): PRESENT — R-35 § 4.17.2.7.
- Direction 2 (Statutory): PARTIAL — The Process Inflation Finding establishes that the circular converts the open normative standard on relevant financial information into a fixed, mandatory four-element checklist (income, expenses, assets, debt) unsupported by the text of the Act.
- Double authority gap: NO (circular authority present). Category error: NO.

PROC-REQ-17.10

- Direction 1 (Circular): PRESENT.
- Direction 2 (Statutory): YES — Level determination aligns with professional judgment based on needs mapping. No gap.
- Double authority gap: NO. Category error: NO.

PROC-REQ-17.11

- Direction 1 (Circular): PRESENT — R-35 § 4.17.2.9.
- Direction 2 (Statutory): PARTIAL — The Process Inflation Finding establishes textual ambiguity: the substantive duty to assist with gjeldsordning derives from gjeldsordningsloven (a separate statute), and the connection to § 17 of sosialtjenesteloven is textually unclear. Additionally, the Anchor Document's § 4.17.2.9 cross-reference section itself links to "Gjeldsordningsloven § 1-5 kommunens plikt til å bistå."
- Double authority gap: NO (circular authority present). **Category note: PARTIAL** — the obligation's home statute is gjeldsordningsloven, not sosialtjenesteloven. This is a cross-domain requirement that is operationally legitimate but analytically misclassified as a pure § 17 obligation.

PROC-REQ-17.12

- Direction 1 (Circular): ABSENT — Kommunebrev 2025.
- Direction 2 (Statutory): YES — Vedtak requirement is legally valid.

- Double authority gap: NO. Category error: NO.
- Note: Procedural duplication of DOC-REQ-17.1 / PROC-REQ-17.6 in a Kommunebrev.

PROC-REQ-17.13

- Direction 1 (Circular): ABSENT — Veileder sotjl. § 17.
- Direction 2 (Statutory): PARTIAL — The Process Inflation Finding establishes that enforcing a strict sequential consent requirement before application processing begins, directly through § 17, lacks clear textual necessity in the Act. The underlying legal capacity principle exists but its procedural sequencing is the sub-legal instrument's addition.
- **Double authority gap: YES.** Category error: NO.

PROC-REQ-17.14

- Direction 1 (Circular): ABSENT — Veileder sotjl. § 17.
- Direction 2 (Statutory): PARTIAL — The Process Inflation Finding establishes that a mandatory internal triage and clarification step for urgency at intake relies on general principles but has no explicit authorization in § 17.
- **Double authority gap: YES.** Category error: NO.

PROC-REQ-17.15

- Direction 1 (Circular): ABSENT — Veileder sotjl. § 17.
- Direction 2 (Statutory): YES — Individual assessment and enkeltvedtak fully grounded in preparatory works and forvaltningsloven. No gap.
- Double authority gap: NO. Category error: NO.

PROC-REQ-17.16

- Direction 1 (Circular): ABSENT — Veileder øk. rådgivning.
- Direction 2 (Statutory): PARTIAL — The Process Inflation Finding establishes that inserting an initial formal case scoping prerequisite (does this case qualify as economic counseling?) is not anchored in § 17.
- **Double authority gap: YES.** Category error: NO.

PROC-REQ-17.17

- Direction 1 (Circular): ABSENT — Veileder øk. rådgivning.
- Direction 2 (Statutory): PARTIAL — The Process Inflation Finding establishes that the strict formalization of power-of-attorney consent as a § 17 procedural rule relies on separate privacy/personvern law, presenting textual unclarity when listed as a § 17 requirement.
- **Double authority gap: YES. Category error: YES** — The requirement derives from privacy law (personopplysningsloven / GDPR framework), not from sosialtjenesteloven. Listing it as a § 17 procedural rule misattributes its legal basis.

PROC-REQ-17.18

- Direction 1 (Circular): ABSENT — Veileder øk. rådgivning.
- Direction 2 (Statutory): YES — Structured as a professional mapping recommendation operating within discretionary mapping tools. No gap.
- Double authority gap: NO. Category error: NO.

Summary of Step 2 findings:

- Total double authority gaps: 10 (DOC-REQ-17.11, 17.14, 17.17, 17.18, 17.19, 17.20; PROC-REQ-17.13, 17.14, 17.16, 17.17)
- Category errors: 1 (PROC-REQ-17.17 — privacy law misclassified as § 17 obligation)
- Cross-domain category note: 1 (PROC-REQ-17.11 — gjeldsordningsloven primary source)

STEP 3 — SCALE AND PROPORTIONALITY CHECK

Cross-referenced against the Anchor Document (Volume Driver Findings). Mechanisms referenced: [D] Documentation Apparatus; [S] Specialization; [P] Procedural Continuity; [C] Coordination Infrastructure; [K] Competence Sustainability.

DOC-REQ-17.1: YES — Part of Cluster 1 [D]. The Anchor Document's most significant intersection note (Part 5) identifies the formal vedtak requirement for § 17 guidance as the point where the most supervision sanctions occur, particularly for level-1 guidance. Offices with very low § 17 case volumes (Nes: 14 per year; Midtre Gauldal: 8 in 2023) cannot sustain routines for vedtak issuance [K]. Supervisory divergence on the statutory threshold (Hjelmeland vs. Hustadvika) confirms scale-related proportionality concerns.

DOC-REQ-17.2: YES — [D]. The requirement to add specific content to a different service's vedtak compounds documentation load on caseworkers already managing high-volume parallel processes. Small offices with one or two § 17 caseworkers are disproportionately burdened relative to the marginal user benefit of this placement requirement.

DOC-REQ-17.3: YES — [D] + [K]. The Anchor Document documents competence decay at low volumes (Nes 2024: only 14 formal § 17 decisions in a full year; staff expressed explicit uncertainty about when decisions were required). Even the vedtak pathway for standalone cases becomes an unstable routine at low frequencies.

DOC-REQ-17.4: NO — This requirement restricts rather than expands documentation requirements, reducing burden.

DOC-REQ-17.5: YES — [D] Specifically identified in Anchor Document Cluster 1: "requirement to produce formal vedtak with explicit start-date justifications before or at service commencement." The combination of mandatory timing in vedtak with low case frequency [K] means the caseworker must apply a complex format requirement infrequently enough that it does not become habitual, producing systematic errors.

DOC-REQ-17.6: PARTIAL — [D] limited to KVP participants only, reducing total scope.

DOC-REQ-17.7: YES — [D]. Enkeltvedtak for rejection/termination is required at low frequencies, maintaining the documentation burden without supporting the competence-through-practice feedback loop.

DOC-REQ-17.8: YES — [P] Procedural Continuity. The Anchor Document identifies "fixed and correct repeatable practice for oral application registration" as a component of Cluster 1's competence-decay cycle (Midtre Gauldal, Skaun, Verdal). When oral applications are rare, the practice cannot stabilize.

DOC-REQ-17.9: NO — Burden-reducing; no scale concern.

DOC-REQ-17.10: YES — [D] minor. Low-volume offices must maintain consistent application-date recording as an isolated practice without supporting case frequency.

DOC-REQ-17.11: YES — [D]. The requirement operates outside circular guidance and imposes a documentation placement obligation on top of an already-burdened vedtak process. Note: lacks circular authority, meaning the scale-related burden is entirely unsupported by the primary normative framework.

DOC-REQ-17.12: YES — [D] + [K] same as DOC-REQ-17.3.

DOC-REQ-17.13: YES — [D]. Specific content requirements for vedtak compound the low-frequency documentation challenge.

DOC-REQ-17.14: YES — [D] Anchor Document Cluster 1 explicitly identifies "start-date documentation requirement" as part of the documentation-competence-specialization trap. Supervision findings: Hustadvika (2024) — "meet the substantive obligation but not the formal one"; Indre Fosen (2024) — sanctioned for not issuing vedtak for "enklere økonomisk rådgivning." The start-timing requirement in vedtak is disproportionate when applied to simple guidance cases in small offices. Note: lacks circular authority entirely.

DOC-REQ-17.15: YES — [D]. Reasoning requirements for vedtak compound documentation burden at low volumes, though this is legally necessary.

DOC-REQ-17.16: YES — [D] same as DOC-REQ-17.1.

DOC-REQ-17.17: YES — [D]. Same as DOC-REQ-17.11; lacks circular authority, meaning scale burden is entirely outside the primary normative framework.

DOC-REQ-17.18: YES — [D] structural complexity. Requires separate vedtak even within KVP program management, generating duplicate administrative records. The requirement is structurally contradictory to the circular's flexibility and lacks statutory basis. No circular guidance for the resulting documentation structure.

DOC-REQ-17.19: YES — [D]. Termination notes at end of guidance cases add documentation overhead at the point when the service has concluded and caseworker capacity is typically redirected. Particularly disproportionate for simple guidance cases.

DOC-REQ-17.20: YES — [D] Cluster 1. The requirement to record professional choices and solutions in a retrospective termination note is the most extreme documentation inflation

identified in this paragraph. No legal authority. No circular guidance. The Anchor Document identifies this type of documentation requirement as part of the spiral where "inadequate documentation prevents the internal control system from identifying the competence gap, sustaining the cycle."

DOC-REQ-17.21: YES — [D] + Procedural Duplication. Kommunebrev reinforcement of vedtak requirement adds compliance pressure through a parallel channel, compounding the existing documentation burden without adding normative clarity.

PROC-REQ-17.1: PARTIAL — Core assessment duty with moderate scale impact.

PROC-REQ-17.2: PARTIAL — Children's mapping adds scope to initial assessment but is targeted at specific family circumstances.

PROC-REQ-17.3: YES — [D]/[K] Mandatory holistic focus across specific life domains presupposes assessment capacity and documentation of findings across multiple areas. The Anchor Document flags the methodology mandate as a scale-related disproportionality when applied in micro-offices. The combination with low case volume means the holistic procedure cannot become a sustainable institutional routine.

PROC-REQ-17.4 (substantive): NO — Substantive legal standard.

PROC-REQ-17.5 (substantive): NO — Substantive legal duty.

PROC-REQ-17.6: YES — [D] Procedural Duplication of DOC-REQ-17.1; same scale concerns apply.

PROC-REQ-17.7: YES — [D] Cluster 1. Timing assessment and formal recording in vedtak compound the low-frequency documentation challenge.

PROC-REQ-17.8: PARTIAL — Proactive assessment duty adds workload but is core to the service purpose.

PROC-REQ-17.9: YES — [S] + [K] Anchor Document specifically identifies this as part of the documentation-competence-specialization trap: "The circular converts the open normative standard over what constitutes relevant financial information into a fixed, mandatory four-element checklist." Small offices processing fewer than 15 economic counseling cases per year cannot sustain the competence needed to correctly apply the full four-element mapping protocol.

PROC-REQ-17.10: PARTIAL — Professional judgment on counseling level; moderate scale concern.

PROC-REQ-17.11: YES — [S] specialist knowledge requirement. The Anchor Document identifies duty to assist with utenrettslig gjeldsordning as directly linked to the specialization mechanism: Løten (2025) specialist had not processed a single gjeldsordning case since taking the role. The obligation to inform about and assist with gjeldsordning requires specialized knowledge that small offices structurally cannot sustain as an in-house competence.

PROC-REQ-17.12: YES — [D] Procedural Duplication (Kommunebrev repetition of vedtak requirement).

PROC-REQ-17.13: PARTIAL — Parental consent requirement is specific to minors; adds a preparatory step but is bounded in scope.

PROC-REQ-17.14: PARTIAL — Urgency triage step adds an intake obligation but is operationally manageable.

PROC-REQ-17.15: YES — [D] + [K] same structural concerns as DOC-REQ-17.12.

PROC-REQ-17.16: PARTIAL — Initial scoping classification is a routing step; moderate burden.

PROC-REQ-17.17: PARTIAL — Power-of-attorney documentation adds a step; moderate burden but lacks circular authority entirely.

PROC-REQ-17.18: PARTIAL — Professional mapping recommendation; not mandatory; low scale concern.

STEP 4 — PURPOSE CLASSIFICATION

DOC-REQ-17.1: [MIXED] — Primary USER NEED: the formal vedtak establishes the user's legal right to the service and enables appeal. Secondary INTERNAL CONTROL: the vedtak format also serves traceability and audit. The primary purpose is user legal security; the mandatory extension to simple guidance cases (level-1) shifts this toward INTERNAL CONTROL in those contexts.

DOC-REQ-17.2: [MIXED] — The user benefit (seeing what guidance they received alongside another service decision) is real but marginal. The specific placement format (inside the other service's vedtak rather than any accessible record) is an administrative documentation convention. Primary: INTERNAL CONTROL in its specific format requirement; secondary: USER NEED in the notification purpose.

DOC-REQ-17.3: [USER NEED] — Creates the formal pathway for standalone access to the service and ensures a right that can be reviewed and appealed.

DOC-REQ-17.4: [USER NEED] — Protects the user from decisions that inappropriately specify service content, preserving professional flexibility in the user's interest.

DOC-REQ-17.5: [MIXED] — USER NEED element: user knows when to expect service. INTERNAL CONTROL primary: converting professional scheduling judgment into a mandatory vedtak content element serves compliance auditing more than user welfare. The escalation from discretion to mandatory format requirement, noted in the Process Inflation Finding, confirms INTERNAL CONTROL as the dominant function of the requirement in its current form.

DOC-REQ-17.6: [MIXED] — Primary USER NEED: formal recognition of guidance within the KVP program structure. Secondary INTERNAL CONTROL: program documentation and accountability. Both elements are meaningful; USER NEED is primary.

DOC-REQ-17.7: [USER NEED] — The enkeltvedtak requirement for rejection or termination is directly and solely aimed at user legal protection (appeal rights, transparency, legal recourse).

DOC-REQ-17.8: [MIXED] — USER NEED primary: protects the user's application date and formally registers their claim. INTERNAL CONTROL secondary: provides administrative record for deadline management and audit.

DOC-REQ-17.9: [USER NEED] — Reduces procedural barriers to accessing the service; supports user access over formal administrative completeness.

DOC-REQ-17.10: [INTERNAL CONTROL] — The application date is a pure administrative datum used to calculate processing deadlines and demonstrate compliance with forvaltningslovens saksbehandlingstid requirements. No direct bearing on case outcome or user rights.

DOC-REQ-17.11: [INTERNAL CONTROL] — The specific placement format (guidance documentation must appear in the other service's vedtak rather than any other accessible record) serves administrative architecture and audit, not user welfare. A user benefits equally from any accessible record of guidance received.

DOC-REQ-17.12: [USER NEED] — Individual assessment ensures personalized service quality. The enkeltvedtak element also serves user legal security. This is a core quality requirement.

DOC-REQ-17.13: [MIXED] — USER NEED primary: the vedtak content requirements (grant/refusal status, provisions, reasoning) enable the user to understand their case and mount an appeal. INTERNAL CONTROL secondary: standardized vedtak components serve supervisory audit and internal quality checks.

DOC-REQ-17.14: [MIXED] — INTERNAL CONTROL primary: the mandatory start-timing element in the vedtak (concrete appointment or deadline) converts a professional scheduling judgment into a compliance-auditable format element. The Process Inflation Finding confirms this bypasses allowed professional discretion. USER NEED secondary: users do benefit from knowing when service starts, but this could be communicated informally without a mandatory vedtak element.

DOC-REQ-17.15: [USER NEED] — Reasoning requirements are directly aimed at enabling meaningful appeal. Legally grounded. Primary user protection function.

DOC-REQ-17.16: [USER NEED] — Formal recognition of the right to the service, enabling legal recourse. Same as DOC-REQ-17.1 and DOC-REQ-17.3 combined.

DOC-REQ-17.17: [INTERNAL CONTROL] — The requirement specifies where documentation of guidance must be placed (inside a different service's vedtak). This

placement convention serves administrative legibility and audit. A user who received guidance would benefit equally from any accessible record.

DOC-REQ-17.18: [INTERNAL CONTROL] — Mandatory separation of § 17 and § 29 vedtak serves administrative document architecture with no user benefit. The Process Inflation Finding identifies this as structurally contradictory to the circular's own flexibility. User access to the service is unaffected by whether it is documented in one or two administrative records.

DOC-REQ-17.19: [MIXED] — INTERNAL CONTROL primary: the termination note serves administrative closure documentation and case management records. USER NEED secondary: the termination letter (avslutningsbrev) element serves user communication. However, mandatory note-writing upon service conclusion is primarily an administrative audit mechanism.

DOC-REQ-17.20: [INTERNAL CONTROL] — Recording which professional choices were made and which solutions selected in a retrospective termination note is a pure internal audit mechanism. No direct bearing on user rights or case outcome. The Process Inflation Finding confirms the Act contains zero documentation mandates of this type.

DOC-REQ-17.21: [MIXED] — The underlying vedtak obligation has the same USER NEED classification as DOC-REQ-17.1. However, the Kommunebrev instrument here functions as a compliance reinforcement message (INTERNAL CONTROL), repeating an existing obligation to signal supervisory attention. The interpretive purpose clause ("sikre tjenestemottakers rettigheter") frames this as user-oriented but the instrument is addressed to Nav offices, not users. Primary: USER NEED (the underlying obligation); Secondary: INTERNAL CONTROL (the Kommunebrev compliance pressure mechanism).

PROC-REQ-17.1: [USER NEED] — Core service quality obligation: ensuring guidance is calibrated to the individual's actual needs.

PROC-REQ-17.2: [USER NEED] — Child protection focus; ensures vulnerable children in families receiving economic support are assessed.

PROC-REQ-17.3: [MIXED] — USER NEED primary: holistic assessment across life domains directly serves the quality of guidance to the user. INTERNAL CONTROL secondary: the rigid methodological mandate (converting discretion into a fixed list of domains that must be assessed) functions as a compliance checkpoint that can be audited. The Process Inflation Finding confirms the circular overrides professional discretion in the user's name but without statutory authority for the rigidity.

PROC-REQ-17.4 (substantive): [USER NEED] — Substantive legal standard ensuring professional quality of service.

PROC-REQ-17.5 (substantive): [USER NEED] — Ensures users are not left without help when Nav-kontoret lacks competence.

PROC-REQ-17.6: [MIXED] — Same as DOC-REQ-17.1. Procedural duplication adds no new purpose.

PROC-REQ-17.7: [INTERNAL CONTROL] — The requirement transforms a professional scheduling judgment (when should guidance occur?) into a formal mandatory decision element. The process of assessing need is USER NEED; recording timing in the vedtak format is INTERNAL CONTROL. Primary: INTERNAL CONTROL (the formal recording element).

PROC-REQ-17.8: [USER NEED] — Proactive assessment ensures users who do not know their rights or do not ask receive service anyway.

PROC-REQ-17.9: [MIXED] — USER NEED primary: comprehensive financial mapping serves the quality of guidance. INTERNAL CONTROL secondary: converting open assessment into a fixed four-element checklist serves audit and standardization. The rigidity of the checklist (as opposed to professional discretion on what to map) primarily serves internal consistency over individual user needs.

PROC-REQ-17.10: [USER NEED] — Appropriate service level calibration directly serves user outcomes.

PROC-REQ-17.11: [USER NEED] — Ensuring users with severe debt know their rights and receive assistance is a direct user welfare obligation, though its primary home is gjeldsordningsloven.

PROC-REQ-17.12: [MIXED] — Same as DOC-REQ-17.21. Procedural duplication in Kommunebrev.

PROC-REQ-17.13: [MIXED] — USER NEED primary: ensures legal capacity requirements are met, protecting the minor's interests. INTERNAL CONTROL secondary: the mandatory sequential procedure (consent before application) adds an administrative step without statutory necessity for that exact sequence.

PROC-REQ-17.14: [USER NEED] — Urgency triage ensures users in crisis receive timely response. Core access-to-service function.

PROC-REQ-17.15: [USER NEED] — Individual assessment and enkeltvedtak grounded in user legal rights.

PROC-REQ-17.16: [INTERNAL CONTROL] — Initial case scoping to determine whether a case "qualifies" as economic counseling is an administrative routing mechanism. The user benefits from receiving the right service regardless of how it is internally classified.

PROC-REQ-17.17: [MIXED] — USER NEED primary (in its home domain): privacy protection and informed consent are user rights. INTERNAL CONTROL secondary: the administrative documentation of the fullmakt as a § 17 procedural step serves compliance more than user welfare. Note: classified as INTERNAL CONTROL in the social services context since the requirement derives from a different legal domain (privacy law) and its inclusion in § 17 normative instruments creates compliance burden without social services legal basis.

PROC-REQ-17.18: [USER NEED] — Comprehensive financial mapping including household context serves the quality of economic counseling outcomes.

STEP 5 — TRANSACTION COST CHARACTERIZATION

Requirements classified as [INTERNAL CONTROL] or [MIXED] are addressed below. Requirements classified as pure [USER NEED] are noted with "No transaction cost burden identified" per the analytical framework.

DOC-REQ-17.1 [MIXED]: Caseworker must draft a formal vedtak for every instance of the § 17 service. For standalone cases, this is a standalone document; for combined cases, it requires adding § 17 content to another service's vedtak. For KVP cases, a third formal pathway. The volume-sensitivity documented in the Anchor Document (Nes: 14 decisions/year; Midtre Gauldal: 8 in 2023) means caseworkers in small offices must execute a complex formal procedure infrequently enough that it cannot become institutionally stable. The burden is legally justified but structurally disproportionate when applied to level-1 simple guidance. **Transaction cost category: Documentation Inflation + Structural Disproportionality (for level-1 cases).**

DOC-REQ-17.2 [MIXED, IC primary]: Caseworker must identify, articulate, and insert a description of guidance content into the vedtak of a parallel social service (e.g., vedtak about economic support must describe what economic counseling was provided). This requires synchronization across two administrative processes. In small offices where one caseworker handles both services, the burden is reduced; in offices with role specialization, it requires inter-caseworker coordination. Absent from circular framework: caseworkers must comply with an obligation R-35 does not explain or guide. **Transaction cost category: Documentation Inflation.**

DOC-REQ-17.5 [MIXED, IC primary]: Caseworker must determine and document a specific timing element (appointment or deadline) within the vedtak text. This converts a scheduling conversation into a binding vedtak element, requiring the caseworker to either commit to a specific date before one is formally confirmed or formulate a sufficiently precise deadline. In urgent cases this is operationally straightforward; in non-urgent cases it requires premature commitment to scheduling. The Anchor Document confirms this is part of the documentation-competence-specialization trap in small offices. **Transaction cost category: Documentation Inflation.**

DOC-REQ-17.6 [MIXED]: Caseworker must generate a formal § 17 vedtak for guidance provided within a KVP program. This adds a documentation step that operates in parallel to KVP program administration (§ 29 vedtak), requiring coordination between two administrative frameworks. **Transaction cost category: Documentation Inflation.**

DOC-REQ-17.8 [MIXED, UN primary]: No separate transaction cost burden identified beyond the basic case-management obligation to record oral applications. The burden is legally justified. The scale concern (low-frequency practice degradation) is noted but not a product of the requirement itself.

DOC-REQ-17.10 [INTERNAL CONTROL]: Caseworker must ensure the application date is recorded in the case file. This is a minor administrative datum but adds to the checklist of

required case records with no direct bearing on case outcome. Transaction cost is low individually but accumulates as one item in a cluster of documentation obligations. **Transaction cost category: Documentation Inflation (minor).**

DOC-REQ-17.11 [INTERNAL CONTROL]: Caseworker must insert documentation of § 17 guidance into the specific location of a different service's vedtak. This requires: (1) awareness that this requirement exists (invisible from circular); (2) locating and reopening or amending the other service's vedtak; (3) drafting appropriate language. The placement specificity has no user benefit over alternative recording methods. Caseworkers must comply with an obligation R-35 does not address — meaning their primary normative instrument provides no guidance on how to satisfy it. **Transaction cost category: Documentation Inflation. Note: obligation operates entirely outside circular guidance framework.**

DOC-REQ-17.13 [MIXED]: Caseworker must ensure vedtak contains three required components (grant/refusal status, provisions granted, reasoning). For experienced caseworkers this is routine; for low-frequency offices, the specific component structure may produce systematic errors. Legally grounded (forvaltningsloven). **Transaction cost category: Documentation Inflation (moderate).**

DOC-REQ-17.14 [MIXED, IC primary]: Caseworker must include a specific start-timing element (concrete appointment or deadline) as a formal vedtak content field. This requires: (1) obtaining a confirmed appointment or setting a defensible deadline before vedtak is issued; (2) ensuring the appointment/deadline is realistic and can be met; (3) drafting the vedtak to comply with the specific format. The Anchor Document identifies this as one of the most common points of sanction (Hustadvika: "meet substantive obligation but not the formal one"; Indre Fosen: sanctioned for not issuing vedtak for simple economic guidance). Caseworkers must comply with an obligation R-35 does not address — their primary normative instrument provides no guidance. **Transaction cost category: Documentation Inflation. Note: caseworkers must comply with an obligation the circular does not address.**

DOC-REQ-17.17 [INTERNAL CONTROL]: Same administrative demand as DOC-REQ-17.11 — inserting documentation of § 17 guidance into the vedtak of a different social service. Operates entirely outside circular guidance framework. No direct user benefit over alternative documentation formats. **Transaction cost category: Documentation Inflation. Note: obligation operates entirely outside circular guidance framework.**

DOC-REQ-17.18 [INTERNAL CONTROL]: Caseworker must issue a separate § 17 vedtak for guidance provided within a KVP program, instead of incorporating this into the KVP vedtak. This requires: (1) drafting two separate administrative decisions for what is functionally one service event; (2) ensuring the two decisions are consistent; (3) managing two separate case-record threads. The structural contradiction with the circular's own flexibility (which allows combined vedtak in other contexts) creates an arbitrary formalism that generates documentation overhead without user benefit. Caseworkers must comply with an obligation the circular does not address and that lacks statutory basis. **Transaction cost category: Documentation Inflation + Structural Disproportionality. Note: obligation operates entirely outside circular guidance framework and lacks statutory basis.**

DOC-REQ-17.19 [MIXED, IC primary]: Caseworker must draft a termination note (and potentially a termination letter) when the service concludes. This requires: (1) identifying the trigger for termination; (2) drafting an internal record of the termination; (3) optionally drafting a user-facing letter. For complex cases this is proportionate; for simple single-session guidance cases, this adds a closure documentation step with no statutory basis. Caseworkers must comply with an obligation the circular does not address. **Transaction cost category: Documentation Inflation. Note: obligation operates entirely outside circular guidance framework.**

DOC-REQ-17.20 [INTERNAL CONTROL]: Caseworker must record, in the termination note, which professional choices were made and which solutions were selected. This requires drafting a retrospective professional-choice account — not merely confirming that the service was delivered, but justifying the substantive decisions made. This is the single highest-intensity documentation obligation in the paragraph, with no statutory basis. In practice, this creates a retrospective audit trail of professional judgment for internal supervisory review. Caseworkers must comply with an obligation that: (a) the circular does not address; (b) the statute explicitly does not mandate; and (c) has no direct bearing on user outcomes. **Transaction cost category: Documentation Inflation (maximum intensity). Note: obligation operates entirely outside circular guidance framework and has no statutory basis.**

DOC-REQ-17.21 [MIXED]: The Kommunebrev creates compliance pressure through a parallel channel. Caseworkers and Nav leaders receive a reinforcing signal that vedtak compliance is under scrutiny, amplifying the documentation burden of DOC-REQ-17.1 without adding normative content. The interpretive purpose clause ("sikre tjenestemottakers rettigheter") adds framing language that can be used to justify enhanced compliance monitoring. **Transaction cost category: Reporting Overhead + Procedural Duplication.**

PROC-REQ-17.2 [USER NEED]: No transaction cost burden identified. The children's mapping requirement serves child welfare directly.

PROC-REQ-17.3 [MIXED]: Caseworker must demonstrate a holistic assessment across specific enumerated life domains (work, health, leisure, home situation, care duties, housing, network, economy) for every guidance case. This requires: (1) assessing whether each domain is relevant to the user's situation; (2) documenting the assessment adequately to demonstrate compliance with the holistic mandate; (3) potentially broadening the scope of inquiry beyond what the case requires. The rigid methodology mandate transforms professional scope judgment into a compliance checklist. In small offices where this cannot become a stable routine, the methodological requirement compounds competence uncertainty. **Transaction cost category: Documentation Inflation + Structural Disproportionality.**

PROC-REQ-17.6 [MIXED]: Procedural duplication of DOC-REQ-17.1 within the same circular paragraph. The repeated vedtak framing generates no new administrative demand but reinforces the compliance expectation, compounding the burden of PROC-REQ-17.1 without adding clarity. **Transaction cost category: Procedural Duplication.**

PROC-REQ-17.7 [INTERNAL CONTROL]: Caseworker must assess need and formally record timing within the vedtak. Same demand as DOC-REQ-17.5 but expressed as a

procedural obligation (assess + record) rather than a content requirement. Caseworkers must execute an explicit assessment step — "vurdere behovet og angi innen hvilket tidspunkt" — and translate this into a vedtak element. **Transaction cost category: Documentation Inflation.**

PROC-REQ-17.9 [MIXED]: Caseworker must map four specific elements (inntekter, utgifter, eiendeler, gjeld) for every economic counseling case. This requires: (1) obtaining documentation or disclosure for each element; (2) structuring the mapping to cover all four points; (3) recording the mapping results. The mandatory four-element structure replaces professional judgment on what constitutes relevant financial information. The Anchor Document specifically identifies this checklist as part of the competence-decay cycle in small offices. **Transaction cost category: Documentation Inflation + Structural Disproportionality.**

PROC-REQ-17.12 [MIXED]: Kommunebrev repetition of PROC-REQ-17.6 and DOC-REQ-17.1. No new administrative demand; procedural duplication. **Transaction cost category: Procedural Duplication.**

PROC-REQ-17.13 [MIXED]: Caseworker must identify that the applicant is a minor, locate and contact the person(s) holding foreldreansvar, obtain and document consent, and complete this before processing begins. This sequential requirement adds a preparatory administrative phase before any substantive case work. The requirement derives from general legal capacity principles; its specific operationalization as a mandatory pre-application sequence in § 17 adds administrative overhead without statutory necessity for that exact ordering. Caseworkers must comply with an obligation the circular does not address. **Transaction cost category: Documentation Inflation. Note: obligation operates entirely outside circular guidance framework.**

PROC-REQ-17.14 [USER NEED]: No transaction cost burden identified. Urgency triage serves user access to timely service directly.

PROC-REQ-17.16 [INTERNAL CONTROL]: Caseworker must execute an initial classification step to determine whether a case falls within "economic counseling" subject matter before proceeding. This administrative routing question requires caseworkers to consult case content before beginning assessment and produce an implicit or explicit classification decision. The requirement is not anchored in § 17 and operates outside the circular guidance framework. **Transaction cost category: Documentation Inflation (minor) + Reporting Overhead. Note: obligation operates entirely outside circular guidance framework.**

PROC-REQ-17.17 [MIXED, IC in social services context]: Caseworker must obtain and document a formal fullmakt (power of attorney) from the user before gathering third-party financial documents. This requires: (1) explaining the fullmakt requirement to the user; (2) obtaining a signed document; (3) storing and referencing it in case processing. The underlying privacy protection is legitimate; its operationalization as a § 17 procedural rule (rather than a general data-protection step) creates a documentation sequence obligation without social services legal basis. Caseworkers must comply with an obligation the circular does not address, derived from a different legal domain. **Transaction cost category:**

Documentation Inflation. Note: obligation operates entirely outside circular guidance framework and derives from privacy law (category error).

STEP 6 — CATALOG ENTRIES

REQUIREMENT ID: § 17 — DOC-REQ-17.1

PROVISION TEXT: Råd og veiledning er en tjeneste som det skal fattes vedtak om eller som skal inngå som del av vedtak.

SOURCE INSTRUMENT: Circular — R-35, § 4.17.2.4

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: YES — grounded in sosialtjenesteloven §§ 41–44 and forvaltningsloven. No gap flagged in Reference Document.

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: YES — Anchor Document Cluster 1: documentation-competence-specialization trap. Low-volume offices (Nes: 14 decisions/year; Midtre Gauldal: 8/year) cannot sustain stable vedtak routines. Supervisory divergence on statutory threshold for level-1 guidance (Hjelmeland vs. Hustadvika) confirms scale-related proportionality concern. The Anchor Document identifies this as the most consequential legal question in the dataset.

PURPOSE: MIXED — Primary USER NEED (legal right, appeal pathway). Secondary INTERNAL CONTROL (traceability, audit). For level-1 simple guidance cases, the balance tilts toward INTERNAL CONTROL.

BURDEN DESCRIPTION: Caseworker must draft formal vedtak for every § 17 service event. Three distinct procedural pathways (standalone, combined, KVP). For simple one-session guidance, the administrative structure is disproportionate to the service delivered. Low-volume offices cannot develop stable institutional routines for vedtak issuance.

KILL LIST CLASSIFICATION: No Kill List Action — statutory and circular authority present. However, the Anchor Document and supervisory divergence on level-1 cases suggest that Track A's mandate-narrowing analysis should address whether the statute requires formal vedtak for simple guidance at level 1.

TRANSACTION COST CATEGORY: Documentation Inflation + Structural Disproportionality (for level-1 guidance contexts)

REQUIREMENT ID: § 17 — DOC-REQ-17.2

PROVISION TEXT: Hvis tjenestemottaker får råd og veiledning i forbindelse med andre tjenester etter loven, skal det i vedtaket som fattes om denne tjenesten fremgå hva som er gitt av råd og veiledning.

SOURCE INSTRUMENT: Circular — R-35, § 4.17.2.4

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: PARTIAL — The Process Inflation Finding establishes that the specific placement of guidance documentation inside a different service's vedtak lacks explicit statutory anchor. The Act does not specify how guidance is documented alongside another service decision.

DOUBLE AUTHORITY GAP: NO (circular authority present)

CATEGORY ERROR: NO

SCALE FLAG: YES — Anchor Document [D] mechanism. The requirement to synchronize documentation across two parallel service processes adds burden proportional to the case-type complexity.

PURPOSE: MIXED — Secondary USER NEED (notification of guidance received). Primary INTERNAL CONTROL (administrative format placement convention; user benefits equally from any accessible record).

BURDEN DESCRIPTION: Caseworker must identify, articulate, and insert a description of § 17 guidance content into the vedtak of a parallel social service. In offices with role specialization, this requires inter-caseworker coordination.

KILL LIST CLASSIFICATION: Category C — Clarification. The requirement is in the circular but its specific format placement element lacks statutory authority. The room for maneuver (any accessible record vs. mandatory inside-vedtak placement) should be made explicit to reduce shadow binding and caseworker uncertainty.

TRANSACTION COST CATEGORY: Documentation Inflation

REQUIREMENT ID: § 17 — DOC-REQ-17.3

PROVISION TEXT: Hvis tjenestemottaker ikke har pågående sak, men har behov for råd og veiledning, kan vedkommende søke om tjenesten og få et vedtak om retten til tjenesten.

SOURCE INSTRUMENT: Circular — R-35, § 4.17.2.4

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: YES — Grounded in Social Services Act and forvaltningsloven. No gap.

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: YES — [D] + [K]. Low-volume offices lose institutional competence in standalone § 17 vedtak pathways (Nes 2024). Scale-related but legally necessary.

PURPOSE: USER NEED — Creates formal pathway for standalone service access and legal recourse.

BURDEN DESCRIPTION: No transaction cost burden identified beyond legally necessary administrative processing.

KILL LIST CLASSIFICATION: No Kill List Action

TRANSACTION COST CATEGORY: No Transaction Cost Identified (scale concern noted but legally grounded)

REQUIREMENT ID: § 17 — DOC-REQ-17.4

PROVISION TEXT: Det er retten til tjenesten som sådan, og ikke det nærmere innhold i hva rådgivningen skal gå ut på, som må fremgå av vedtaket.

SOURCE INSTRUMENT: Circular — R-35, § 4.17.2.4

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: YES — Consistent with the Act's open-content design. No gap.

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: NO — This requirement restricts rather than expands documentation obligations, reducing burden.

PURPOSE: USER NEED — Protects user from overly prescriptive decisions; preserves professional flexibility.

BURDEN DESCRIPTION: No transaction cost burden identified; this requirement reduces rather than creates administrative demand.

KILL LIST CLASSIFICATION: No Kill List Action

TRANSACTION COST CATEGORY: No Transaction Cost Identified

REQUIREMENT ID: § 17 — DOC-REQ-17.5

PROVISION TEXT: Vedtaket skal i tillegg inneholde tidspunktet for rådgivningen eller en tidsfrist for når tjenesten skal oppfylles.

SOURCE INSTRUMENT: Circular — R-35, § 4.17.2.4

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: PARTIAL — The Process Inflation Finding establishes that while professional discretion over timing is permitted by the Act, the circular escalates timing into a mandatory vedtak content element without statutory anchor, removing flexibility without legal basis.

DOUBLE AUTHORITY GAP: NO (circular authority present)

CATEGORY ERROR: NO

SCALE FLAG: YES — Anchor Document Cluster 1 specifically identifies "start-date documentation requirements" as part of the documentation-competence-specialization trap. Low-frequency offices cannot sustain accurate compliance with this specific requirement.

PURPOSE: MIXED — Secondary USER NEED (user knows when service starts). Primary INTERNAL CONTROL (mandatory vedtak format element serving compliance audit more than user welfare, as the escalation from professional discretion to mandatory content was made without statutory basis).

BURDEN DESCRIPTION: Caseworker must determine and document a specific timing element (appointment or deadline) as a binding vedtak field before the service schedule is confirmed. In non-urgent cases this requires premature scheduling commitment. The requirement is one of the most commonly sanctioned documentation failures in Set B.

KILL LIST CLASSIFICATION: Category B — Status Change. The circular uses imperative language ("skal inneholde") for a mandatory vedtak content element that lacks statutory anchor. Should be reformulated to permissive language ("bør inneholde" or "kan inneholde") to restore professional discretion over scheduling while preserving the value of communicating timing to users.

TRANSACTION COST CATEGORY: Documentation Inflation

REQUIREMENT ID: § 17 — DOC-REQ-17.6

PROVISION TEXT: Hvis en deltaker i kvalifiseringsprogram har råd og veiledning som tiltak i programmet sitt, skal det fattes vedtak om tjenesten som tiltak.

SOURCE INSTRUMENT: Circular — R-35, § 4.17.2.4

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: PARTIAL — The Process Inflation Finding establishes that § 17 contains no reference to KVP; the specific procedural link to KVP measures (governed by § 29) is textually unsupported in § 17.

DOUBLE AUTHORITY GAP: NO (circular authority present)

CATEGORY ERROR: NO

SCALE FLAG: PARTIAL — Limited to KVP participants; scope constraint reduces overall burden.

PURPOSE: MIXED — Primary USER NEED: formal recognition of guidance within KVP program ensures program accountability. Secondary INTERNAL CONTROL: administrative program documentation.

BURDEN DESCRIPTION: Caseworker must generate a § 17 vedtak for guidance provided as a KVP program measure. This adds a parallel documentation track to KVP administration. Moderate documentation overhead.

KILL LIST CLASSIFICATION: Category C — Clarification. The connection between § 17 guidance and KVP program measures is not textually anchored in either § 17 or § 29. The room for maneuver — what level of formality is required for guidance within a KVP measure, and whether the § 17 vedtak requirement applies fully — should be made explicit.

TRANSACTION COST CATEGORY: Documentation Inflation

REQUIREMENT ID: § 17 — DOC-REQ-17.7

PROVISION TEXT: Det skal i så tilfelle fattes enkeltvedtak om avslag eller avslutning av råd og veiledning.

SOURCE INSTRUMENT: Circular — R-35, § 4.17.2.4

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: YES — Fully grounded in sosialtjenesteloven and forvaltningsloven.

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: YES — [D]. Low-frequency offices must apply enkeltvedtak procedures for rejection/termination cases without developing stable routines. Legally necessary.

PURPOSE: USER NEED — Directly and solely serves user legal protection (right to appeal adverse decisions).

BURDEN DESCRIPTION: No transaction cost burden identified beyond legally necessary procedure.

KILL LIST CLASSIFICATION: No Kill List Action

TRANSACTION COST CATEGORY: No Transaction Cost Identified

REQUIREMENT ID: § 17 — DOC-REQ-17.8

PROVISION TEXT: Nav-kontoret har plikt til å nedtegne muntlige søknader.

SOURCE INSTRUMENT: Veileder til sotjl. § 17 — type (b) veileder

CIRCULAR AUTHORITY: ABSENT — Consequence: Caseworkers must source this obligation from the Veileder; R-35 provides no guidance on it. The obligation is legally valid but normatively displaced.

LEGAL AUTHORITY: YES — Grounded in general administrative case-management obligations (forvaltningsloven § 11 ff).

DOUBLE AUTHORITY GAP: NO (statutory authority present)

CATEGORY ERROR: NO

SCALE FLAG: YES — [P] Procedural Continuity. The Anchor Document identifies oral application recording as part of the Cluster 1 competence-decay cycle (Midtre Gauldal, Skaun, Verdal). At low case volumes, the practice cannot stabilize.

PURPOSE: MIXED — Primary USER NEED (protects user's application date and formal claim). Secondary INTERNAL CONTROL (administrative record for deadline management).

BURDEN DESCRIPTION: Caseworker must record oral applications in the case file as a practice routine. The burden is legally justified. The scale concern arises from insufficient case frequency to sustain a stable institutional routine.

KILL LIST CLASSIFICATION: No Kill List Action — statutory authority present. However, the requirement should be incorporated into R-35 to eliminate the normative displacement created by its current placement in the Veileder only.

TRANSACTION COST CATEGORY: No Transaction Cost Identified (procedural continuity concern noted)

REQUIREMENT ID: § 17 — DOC-REQ-17.9

PROVISION TEXT: Det er ikke nødvendig at nedtegnelsen skjer ved å fylle ut søknadsskjema; det holder at søknaden fremgår av saken, som i et notat.

SOURCE INSTRUMENT: Veileder til sotjl. § 17 — type (b) veileder

CIRCULAR AUTHORITY: ABSENT — Consequence: The flexibility this provision grants is not visible from R-35.

LEGAL AUTHORITY: YES — Permitted relaxation of formal application requirements consistent with administrative principles.

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: NO — This requirement reduces burden; no scale concern.

PURPOSE: USER NEED — Reduces procedural barriers to accessing the service; supports access over form.

BURDEN DESCRIPTION: No transaction cost burden identified; burden-reducing provision.

KILL LIST CLASSIFICATION: No Kill List Action — the provision is legally valid and beneficial. Its absence from R-35 means the flexibility it grants is invisible to caseworkers working only from the circular.

TRANSACTION COST CATEGORY: No Transaction Cost Identified

REQUIREMENT ID: § 17 — DOC-REQ-17.10

PROVISION TEXT: Tidspunktet for søknaden skal fremgå av saken.

SOURCE INSTRUMENT: Veileder til sotjl. § 17 — type (b) veileder

CIRCULAR AUTHORITY: ABSENT — Consequence: Caseworkers must source this from the Veileder; R-35 does not address it.

LEGAL AUTHORITY: YES — Covered by basic administrative case-management obligations.

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: YES (minor) — [D]. Low-volume offices must maintain consistent application-date recording without the frequency needed to make it habitual.

PURPOSE: INTERNAL CONTROL — Application date is an administrative datum for deadline calculation and supervisory audit compliance. No direct bearing on case outcome.

BURDEN DESCRIPTION: Caseworker must record application date in case file. Minor administrative obligation, but one item in a cluster of documentation demands that accumulate. Operates outside circular guidance framework.

KILL LIST CLASSIFICATION: No Kill List Action — statutory authority present. Administrative date recording is a legitimate requirement.

TRANSACTION COST CATEGORY: Documentation Inflation (minor)

REQUIREMENT ID: § 17 — DOC-REQ-17.11

PROVISION TEXT: Råd og veiledning gitt i forbindelse med innvilgelse eller avslag av andre sosiale tjenester skal omtales i innvilgelsesvedtaket eller avslaget.

SOURCE INSTRUMENT: Veileder til sotjl. § 17 — type (b) veileder

CIRCULAR AUTHORITY: ABSENT — Consequence: This specific placement requirement operates entirely outside the R-35 framework. Caseworkers must comply with a documentation format obligation their primary normative instrument does not mention.

LEGAL AUTHORITY: PARTIAL — The Process Inflation Finding establishes that the specific format placement (inside the other service's vedtak, not any accessible record) lacks explicit statutory anchor.

DOUBLE AUTHORITY GAP: YES — Both circular authority is ABSENT and statutory authority is PARTIAL.

CATEGORY ERROR: NO

SCALE FLAG: YES — [D]. Requirement to synchronize documentation across parallel service processes imposes disproportionate burden on small offices. Scale-related burden is entirely unsupported by the circular framework.

PURPOSE: INTERNAL CONTROL — The placement convention serves administrative legibility and audit. User benefits equally from any accessible record of guidance received; the inside-vedtak placement is an administrative format preference.

BURDEN DESCRIPTION: Caseworker must insert documentation of § 17 guidance into a specific location (the other service's vedtak), requiring awareness of a requirement invisible from R-35, access to the other vedtak, and drafting of appropriate language. The scale-related burden is unsupported by circular guidance.

KILL LIST CLASSIFICATION: Category B — Status Change. The Veileder uses imperative language ("skal omtales i") for a documentation format placement requirement that has no circular authority and only partial statutory authority. Reformulation to permissive language would restore caseworker discretion on where to document guidance while preserving the notification value.

TRANSACTION COST CATEGORY: Documentation Inflation. Obligation operates entirely outside circular guidance framework.

REQUIREMENT ID: § 17 — DOC-REQ-17.12

PROVISION TEXT: Alle søknader om tjenesten skal vurderes individuelt og konkret ut fra søkerens behov på søknadstidspunktet, og avgjørelsen skal fattes i et enkeltvedtak.

SOURCE INSTRUMENT: Veileder til sotjl. § 17 — type (b) veileder

CIRCULAR AUTHORITY: ABSENT — Consequence: Normative displacement; the individual-assessment-plus-enkeltvedtak requirement is sourced from the Veileder, not R-35.

LEGAL AUTHORITY: YES — Grounded in preparatory works, forvaltningsloven, and Social Services Act intent.

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: YES — [D] + [K]. Individual assessment and enkeltvedtak at low case volumes creates competence-decay risk (Nes 2024).

PURPOSE: USER NEED — Ensures personalized service quality and formal legal security.

BURDEN DESCRIPTION: Legally necessary; no transaction cost burden identified beyond the underlying assessment and vedtak obligations.

KILL LIST CLASSIFICATION: No Kill List Action

TRANSACTION COST CATEGORY: No Transaction Cost Identified

REQUIREMENT ID: § 17 — DOC-REQ-17.13

PROVISION TEXT: Vedtaket skal vise om tjenesten er innvilget eller avslått, hva som eventuelt er innvilget og begrunnelsen for avgjørelsen.

SOURCE INSTRUMENT: Veileder til sotjl. § 17 — type (b) veileder

CIRCULAR AUTHORITY: ABSENT — Consequence: The specific content components required in the vedtak are defined only in the Veileder. Caseworkers must consult two instruments to understand vedtak requirements.

LEGAL AUTHORITY: YES — Directly operationalizes forvaltningsloven begrunnelseskrav.

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: YES — [D]. Content requirements for vedtak compound the low-frequency documentation challenge in small offices.

PURPOSE: MIXED — Primary USER NEED: transparency and basis for appeal. Secondary INTERNAL CONTROL: standardized vedtak components serve audit.

BURDEN DESCRIPTION: Caseworker must ensure three components are present in vedtak. Legally justified but contributes to documentation load. Caseworkers must source this from Veileder rather than R-35.

KILL LIST CLASSIFICATION: No Kill List Action

TRANSACTION COST CATEGORY: Documentation Inflation (moderate)

REQUIREMENT ID: § 17 — DOC-REQ-17.14

PROVISION TEXT: Vedtak om innvilgelse skal inneholde tidspunkt for oppstart av tjenesten, i form av konkret timeavtale eller frist for når første samtale skal være avholdt.

SOURCE INSTRUMENT: Veileder til sotjl. § 17 — type (b) veileder

CIRCULAR AUTHORITY: ABSENT — Consequence: This highly specific mandatory vedtak content element is defined only in the Veileder. Caseworkers must comply with a requirement that their primary normative instrument does not address.

LEGAL AUTHORITY: PARTIAL — The Process Inflation Finding establishes that converting start timing into a mandatory, highly specified vedtak element (concrete appointment or strict deadline) bypasses allowed professional discretion without statutory anchor. The Act leaves timing to professional scheduling judgment.

DOUBLE AUTHORITY GAP: YES — Both circular authority is ABSENT and statutory authority is PARTIAL.

CATEGORY ERROR: NO

SCALE FLAG: YES — Anchor Document Cluster 1 specifically identifies this as one of the most common points of supervisory sanction (Hustadvika 2024; Indre Fosen 2024). The start-timing requirement as a mandatory vedtak content field is disproportionate for simple guidance cases and structurally impossible to comply with correctly at low case volumes.

PURPOSE: MIXED — Secondary USER NEED (user knows when service starts). Primary INTERNAL CONTROL (compliance-auditable format element that converts scheduling into a verifiable documentary record).

BURDEN DESCRIPTION: Caseworker must obtain a confirmed appointment or set a defensible deadline before issuing the vedtak, then draft the vedtak to include this timing

element in a specific format (concrete appointment OR deadline). This is the most commonly cited vedtak-content gap in supervisory reports for § 17. Obligation operates entirely outside circular guidance framework.

KILL LIST CLASSIFICATION: Category B — Status Change. Veileder uses highly specific imperative language ("skal inneholde... i form av konkret timeavtale eller frist") for a mandatory vedtak content element that lacks both circular and statutory authority. Reformulation to permissive language ("bør inneholde") would restore professional discretion over scheduling while preserving the notification value for users.

TRANSACTION COST CATEGORY: Documentation Inflation. Obligation operates entirely outside circular guidance framework.

REQUIREMENT ID: § 17 — DOC-REQ-17.15

PROVISION TEXT: Begrunnelsen skal vise til regelen vedtaket bygger på (sotjl. § 17) og nevne faktiske forhold ved brukerens situasjon som har hatt betydning for avgjørelsen.

SOURCE INSTRUMENT: Veileder til sotjl. § 17 — type (b) veileder

CIRCULAR AUTHORITY: ABSENT — Consequence: The specific reasoning structure for the vedtak is defined only in the Veileder.

LEGAL AUTHORITY: YES — Standard forvaltningsloven begrunnelseskrav. No gap.

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: YES — [D]. Reasoning requirements compound documentation load.

PURPOSE: USER NEED — Enables meaningful appeal; direct user legal protection function.

BURDEN DESCRIPTION: Legally necessary; no transaction cost burden identified beyond the reasoning obligations grounded in forvaltningsloven.

KILL LIST CLASSIFICATION: No Kill List Action

TRANSACTION COST CATEGORY: No Transaction Cost Identified

REQUIREMENT ID: § 17 — DOC-REQ-17.16

PROVISION TEXT: Avgjørelser om tildeling av tjenesten opplysning, råd og veiledning skal fattes i eget vedtak eller inngå som del av et vedtak som gjelder andre sosiale tjenester.

SOURCE INSTRUMENT: Veileder til sotjl. § 17 — type (b) veileder

CIRCULAR AUTHORITY: ABSENT — Consequence: The vedtak-pathway options for § 17 service decisions are defined in the Veileder, not R-35.

LEGAL AUTHORITY: YES — Grounded in Social Services Act and forvaltningsloven.

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: YES — [D] same as DOC-REQ-17.1.

PURPOSE: USER NEED — Formal recognition of the right to the service, enabling legal recourse.

BURDEN DESCRIPTION: Same as DOC-REQ-17.1. No separate transaction cost burden identified.

KILL LIST CLASSIFICATION: No Kill List Action

TRANSACTION COST CATEGORY: Documentation Inflation (same as DOC-REQ-17.1; scale concern but legally grounded)

REQUIREMENT ID: § 17 — DOC-REQ-17.17

PROVISION TEXT: Hvis brukeren får opplysning, råd og veiledning i forbindelse med innvilgelse eller avslag av en annen tjeneste i sosialtjenesteloven, skal det i vedtaket som fattes om denne tjenesten fremgå hva som er gitt av opplysning, råd og veiledning.

SOURCE INSTRUMENT: Veileder til sotjl. § 17 — type (b) veileder

CIRCULAR AUTHORITY: ABSENT — Consequence: This placement requirement operates entirely outside the R-35 framework.

LEGAL AUTHORITY: PARTIAL — Process Inflation Finding: the specific format placement (inside the other service's vedtak) lacks explicit statutory anchor.

DOUBLE AUTHORITY GAP: YES — Both circular authority is ABSENT and statutory authority is PARTIAL.

CATEGORY ERROR: NO

SCALE FLAG: YES — [D]. Same concerns as DOC-REQ-17.11 (substantive duplicate). Scale-related burden entirely unsupported by circular framework.

PURPOSE: INTERNAL CONTROL — Administrative format placement convention. User benefits equally from any accessible record.

BURDEN DESCRIPTION: Same demand as DOC-REQ-17.11: caseworker must insert § 17 guidance documentation into the vedtak of a different social service. The scale-related

burden is entirely unsupported by circular guidance. This requirement is a Veileder-level restatement of the R-35-level obligation in DOC-REQ-17.2, but with no circular authority and partial statutory authority.

KILL LIST CLASSIFICATION: Category B — Status Change. Veileder uses imperative language for a documentation placement requirement that has neither circular authority nor statutory anchor. Reformulation to permissive language would restore discretion over documentation location.

TRANSACTION COST CATEGORY: Documentation Inflation. Obligation operates entirely outside circular guidance framework.

REQUIREMENT ID: § 17 — DOC-REQ-17.18

PROVISION TEXT: Tjenesten som tiltak skal fattes i et eget vedtak etter sotjl. § 17, og ikke inngå i vedtaket om kvalifiseringsprogram etter sotjl. § 29.

SOURCE INSTRUMENT: Veileder til sotjl. § 17 — type (b) veileder

CIRCULAR AUTHORITY: ABSENT — Consequence: The mandatory separation of § 17 and § 29 administrative decisions is defined only in the Veileder, entirely outside the R-35 framework.

LEGAL AUTHORITY: PARTIAL (approaching NO) — The Process Inflation Finding establishes that neither § 17 nor § 29 requires separation of these decisions, making this requirement structurally contradictory to the circular's own flexibility in allowing combined vedtak in other contexts. The requirement lacks statutory basis.

DOUBLE AUTHORITY GAP: YES — Both circular authority is ABSENT and statutory authority is PARTIAL/NO.

CATEGORY ERROR: NO

SCALE FLAG: YES — [D] Structural complexity. The requirement generates two parallel administrative decision tracks for what is functionally one service event within a single program. The structural contradiction with the circular's flexibility compounds caseworker burden without benefit.

PURPOSE: INTERNAL CONTROL — Mandatory document architecture separation serves administrative record-keeping conventions. No user benefit from whether guidance appears in one or two administrative decisions.

BURDEN DESCRIPTION: Caseworker must issue a separate § 17 vedtak for guidance within a KVP program, prohibiting integration into the KVP vedtak. This requires: drafting two consistent but separate administrative decisions; managing two parallel case-record threads; and applying a rule that contradicts the circular's own combined-vedtak flexibility. The caseworker must comply with an obligation that: (a) the circular does not address; (b) contradicts the flexibility the circular does provide; and (c) lacks statutory basis.

KILL LIST CLASSIFICATION: Category A — Removal. The requirement lacks statutory basis, is structurally contradictory to the circular's own flexibility, and has no circular authority. It imposes documentation burden without regulatory foundation. Candidate for repeal from the § 17 normative framework.

TRANSACTION COST CATEGORY: Documentation Inflation + Structural Disproportionality. Obligation operates entirely outside circular guidance framework and lacks statutory basis.

REQUIREMENT ID: § 17 — DOC-REQ-17.19

PROVISION TEXT: Hvis det er forhold ved saken som gjør at tjenesten avsluttes, skal det skrives et avslutningsnotat, eventuelt et avslutningsbrev som informasjon til brukeren.

SOURCE INSTRUMENT: Veileder til sotjl. § 17 — type (b) veileder

CIRCULAR AUTHORITY: ABSENT — Consequence: The termination note requirement operates entirely outside the R-35 framework.

LEGAL AUTHORITY: PARTIAL — Process Inflation Finding: the specific format requirement for a termination note or letter at service conclusion is not prescribed by § 17 or standard administrative text.

DOUBLE AUTHORITY GAP: YES — Both circular authority is ABSENT and statutory authority is PARTIAL.

CATEGORY ERROR: NO

SCALE FLAG: YES — [D]. Mandatory termination documentation adds closure overhead to every service case. In micro-offices, this adds to the administrative burden at the conclusion phase without operational support from the primary normative instrument.

PURPOSE: MIXED — INTERNAL CONTROL primary: administrative closure documentation and case management records. USER NEED secondary: the avslutningsbrev element serves user communication, but this could be achieved through less rigid means.

BURDEN DESCRIPTION: Caseworker must draft a termination note (internal) and potentially a termination letter (user-facing) when the service concludes for procedural reasons. For complex cases this is proportionate; for simple guidance cases, this adds a closure documentation requirement with no statutory basis. The obligation operates entirely outside circular guidance framework.

KILL LIST CLASSIFICATION: Category B — Status Change. Veileder uses imperative language ("skal skrives") for a closure documentation requirement that lacks circular authority and only partial statutory authority. Reformulation to permissive language ("bør skrives," particularly for termination by the Nav office) would restore local discretion on whether formal closure documentation is proportionate to the case complexity.

TRANSACTION COST CATEGORY: Documentation Inflation. Obligation operates entirely outside circular guidance framework.

REQUIREMENT ID: § 17 — DOC-REQ-17.20

PROVISION TEXT: Hva som er gjort og hvilke løsninger som er valgt skrives i et avslutningsnotat.

SOURCE INSTRUMENT: Veileder til sotjl. § 17 — type (b) veileder

CIRCULAR AUTHORITY: ABSENT — Consequence: This retrospective documentation obligation operates entirely outside the R-35 framework.

LEGAL AUTHORITY: NO — The Process Inflation Finding explicitly states that the Act contains zero documentation mandates of this type, and that forcing professional choices into a mandatory retrospective record escalates the requirement without any legal authority. This is the strongest negative legal finding in the dataset.

DOUBLE AUTHORITY GAP: YES — Both circular authority is ABSENT and statutory authority is NO.

CATEGORY ERROR: NO

SCALE FLAG: YES — [D] Cluster 1. The Anchor Document identifies this type of documentation requirement as part of the spiral where inadequate documentation prevents internal control from identifying competence gaps. The requirement generates documentation load without either statutory or circular support.

PURPOSE: INTERNAL CONTROL — Recording which professional choices were made and which solutions selected is a retrospective audit mechanism for internal supervisory review. No direct bearing on user rights, case outcome, or service quality.

BURDEN DESCRIPTION: Caseworker must draft a retrospective account of professional decisions and solutions in the termination note — not merely confirming service delivery, but justifying substantive professional choices. This is the single highest-intensity pure documentation obligation in the paragraph. The caseworker must comply with a requirement that: (a) the circular does not address; (b) the statute explicitly does not mandate; and (c) functions solely as an internal audit mechanism.

KILL LIST CLASSIFICATION: Category A — Removal. The requirement lacks both circular authority and statutory authority (the only such requirement in this paragraph). It imposes maximum-intensity documentation burden without any regulatory foundation. Candidate for immediate repeal from the § 17 normative framework.

TRANSACTION COST CATEGORY: Documentation Inflation (maximum intensity). Obligation operates entirely outside circular guidance framework. No statutory basis.

REQUIREMENT ID: § 17 — DOC-REQ-17.21

PROVISION TEXT: Råd og veiledning er en tjeneste som det skal fattes vedtak om eller som skal inngå som del av vedtak. Vedtaket skal bidra til å sikre tjenestemottakers rettighets.

SOURCE INSTRUMENT: Kommunebrev 2025 — type (a) Kommunebrev

CIRCULAR AUTHORITY: ABSENT — Consequence: This is a parallel-channel compliance reinforcement that operates outside the R-35 framework.

LEGAL AUTHORITY: YES — The underlying vedtak requirement is legally grounded; the purpose clause is interpretive and does not generate additional binding obligations.

DOUBLE AUTHORITY GAP: NO (statutory authority present)

CATEGORY ERROR: NO

SCALE FLAG: YES — [D] + Procedural Duplication. Kommunebrev repetition amplifies compliance pressure on an already-burdened documentation requirement without adding normative clarity.

PURPOSE: MIXED — Underlying obligation: USER NEED (legal right, appeal pathway). Kommunebrev framing: INTERNAL CONTROL (compliance reinforcement signal addressed to Nav offices, indicating elevated supervisory attention to vedtak compliance).

BURDEN DESCRIPTION: The Kommunebrev creates compliance pressure through a parallel channel. Nav leaders receiving the Kommunebrev interpret the repetition as a compliance priority signal, potentially amplifying the documentation culture around vedtak issuance beyond what R-35 mandates. The purpose clause ("sikre tjenestemottakers rettigheter") can be used to justify enhanced compliance monitoring.

KILL LIST CLASSIFICATION: No Kill List Action — the underlying obligation is legally valid. However, the Kommunebrev creates Procedural Duplication that should be noted in the main report.

TRANSACTION COST CATEGORY: Procedural Duplication + Reporting Overhead

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REQUIREMENT ID: § 17 — PROC-REQ-17.1

PROVISION TEXT: Nav-kontoret skal vurdere hvilke råd og veiledningsbehov den enkelte har, og tilpasse tjenesten ut fra dette.

SOURCE INSTRUMENT: Circular — R-35, § 4.17.1

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: YES — Directly tracks individual assessment intent from preparatory works.

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: PARTIAL — Core duty with moderate scale-related competence concern in low-volume offices.

PURPOSE: USER NEED — Ensures guidance is calibrated to the individual's actual needs. Core service quality obligation.

BURDEN DESCRIPTION: No transaction cost burden identified; this is a core professional obligation with direct user benefit.

KILL LIST CLASSIFICATION: No Kill List Action

TRANSACTION COST CATEGORY: No Transaction Cost Identified

REQUIREMENT ID: § 17 — PROC-REQ-17.2

PROVISION TEXT: Kartlegging av barn og unges behov i familier som er mottakere av økonomisk stønad til livsopphold vil være nødvendig for å kunne gi veiledning i den konkrete situasjonen.

SOURCE INSTRUMENT: Circular — R-35, § 4.17.1

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: PARTIAL — Process Inflation Finding: the specific conditional mapping obligation targeting children's needs in families receiving economic support lacks explicit statutory anchoring directly within § 17.

DOUBLE AUTHORITY GAP: NO (circular authority present)

CATEGORY ERROR: NO

SCALE FLAG: PARTIAL — Adds scope to the initial assessment but is targeted at a specific family circumstance; bounded scope limits overall burden.

PURPOSE: USER NEED — Child protection focus; ensures vulnerable children are assessed within the scope of family guidance.

BURDEN DESCRIPTION: No transaction cost burden identified; the children's mapping requirement serves child welfare directly. The partial statutory gap does not generate disproportionate burden.

KILL LIST CLASSIFICATION: Category C — Clarification. The specific conditional mapping obligation for children in economic support families has only partial statutory anchoring within § 17. The room for maneuver — what depth of children's mapping is required, under what conditions, and with what limits — should be made explicit.

TRANSACTION COST CATEGORY: No Transaction Cost Identified

REQUIREMENT ID: § 17 — PROC-REQ-17.3

PROVISION TEXT: Nav-kontoret skal på bakgrunn av sin råd og veiledningsplikt ha et helhetlig fokus på tjenestemottakerens livssituasjon på ulike områder, som arbeid og aktivitet, helse, fritid, hjemmesituasjon, omsorgsoppgaver, boligforhold, nettverk og økonomi.

SOURCE INSTRUMENT: Circular — R-35, § 4.17.2.1

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: PARTIAL — Process Inflation Finding: the Act grants professional discretion on which specific areas to assess; the circular rigidly converts this into a comprehensive mandatory methodological obligation across enumerated life domains.

DOUBLE AUTHORITY GAP: NO (circular authority present)

CATEGORY ERROR: NO

SCALE FLAG: YES — [D]/[K] methodology mandate. Small offices must demonstrate assessment across eight enumerated life domains for every guidance case, creating documentation load without case-volume support.

PURPOSE: MIXED — Primary USER NEED: holistic assessment directly serves the quality of guidance. Secondary INTERNAL CONTROL: the rigid mandatory enumeration of eight specific life domains functions as a compliance checklist, converting professional scope judgment into an auditable methodological protocol.

BURDEN DESCRIPTION: Caseworker must assess and document coverage across all eight enumerated life domains for every guidance case. This requires: (1) screening each domain for relevance; (2) documenting the scope of assessment; (3) justifying any domains omitted. The mandatory framing overrides professional judgment on case-appropriate scope.

KILL LIST CLASSIFICATION: Category B — Status Change. R-35 uses imperative language ("skal ha et helhetlig fokus") with a rigid enumeration of life domains that overrides professional discretion without statutory authority. Reformulation to permissive language ("bør ha fokus på") or removal of the enumerated domain list (replaced by a principle of holistic assessment) would restore local professional discretion while preserving the service quality intent.

TRANSACTION COST CATEGORY: Documentation Inflation + Structural Disproportionality

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REQUIREMENT ID: § 17 — PROC-REQ-17.4

PROVISION TEXT: Innholdet i råd og veiledningen må vurderes ut fra sosialfaglige normer og behovene til den enkelte tjenestemottaker.

SOURCE INSTRUMENT: Circular — R-35, § 4.17.2.1

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: YES — Substantive legal standard. No gap.

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: NO — Substantive legal standard; not a scale-sensitive mechanism.

PURPOSE: USER NEED — Ensures professional quality of guidance service.

BURDEN DESCRIPTION: No transaction cost burden identified; substantive legal obligation directly serving user outcomes.

KILL LIST CLASSIFICATION: No Kill List Action

TRANSACTION COST CATEGORY: No Transaction Cost Identified

REQUIREMENT ID: § 17 — PROC-REQ-17.5

PROVISION TEXT: Nav-kontoret har plikt til å henvise til andre forvaltningsorgan i tilfeller der veiledningsbehovet går ut over Nav-kontorets kompetanse, og skal «så vidt mulig» sørge for at andre instanser gir hjelp.

SOURCE INSTRUMENT: Circular — R-35, § 4.17.2.1

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: YES — Substantive legal duty fully grounded in Social Services Act. No gap.

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: NO — The "så vidt mulig" qualifier builds proportionality directly into the obligation.

PURPOSE: USER NEED — Ensures users receive assistance even when Nav-kontoret lacks competence.

BURDEN DESCRIPTION: No transaction cost burden identified; substantive duty directly serving user access.

KILL LIST CLASSIFICATION: No Kill List Action

TRANSACTION COST CATEGORY: No Transaction Cost Identified

REQUIREMENT ID: § 17 — PROC-REQ-17.6

PROVISION TEXT: Råd og veiledning er en tjeneste som det skal fattes vedtak om eller som skal inngå som del av vedtak. [Procedural framing within R-35 § 4.17.2.4]

SOURCE INSTRUMENT: Circular — R-35, § 4.17.2.4

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: YES — Functionally identical to DOC-REQ-17.1.

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: YES — [D] same as DOC-REQ-17.1. Internal duplication within R-35 itself.

PURPOSE: MIXED — Same as DOC-REQ-17.1 and PROC-REQ-17.6 is an internal procedural restatement within the same provision.

BURDEN DESCRIPTION: Procedural duplication within R-35 § 4.17.2.4. The vedtak requirement is stated multiple times in the same circular provision, reinforcing compliance expectation without adding normative content.

KILL LIST CLASSIFICATION: No Kill List Action — the underlying requirement is legally valid. Internal duplication within the circular itself should be noted.

TRANSACTION COST CATEGORY: Procedural Duplication

REQUIREMENT ID: § 17 — PROC-REQ-17.7

PROVISION TEXT: Nav-kontoret må vurdere behovet for rådgivningen og angi innen hvilket tidspunkt rådgivningen skal finne sted.

SOURCE INSTRUMENT: Circular — R-35, § 4.17.2.4

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: PARTIAL — Process Inflation Finding: dictating timing as a mandatory inclusion within the formal decision converts an open professional scheduling element into a strict formal requirement lacking explicit statutory anchor.

DOUBLE AUTHORITY GAP: NO (circular authority present)

CATEGORY ERROR: NO

SCALE FLAG: YES — [D] Cluster 1. Mandatory timing-in-vedtak compounds the documentation-competence-specialization trap.

PURPOSE: INTERNAL CONTROL — The assessment of need (procedural element) serves USER NEED; the formal recording of timing within the vedtak (documentation element) primarily serves compliance audit. The combined requirement is classified INTERNAL CONTROL as primary.

BURDEN DESCRIPTION: Caseworker must assess need (USER NEED element) and formally record the assessment outcome as a timing-in-vedtak element (INTERNAL CONTROL element). The formal recording element transforms a professional scheduling judgment into a mandatory administrative document field.

KILL LIST CLASSIFICATION: Category B — Status Change. Circular uses imperative language ("må... angi innen hvilket tidspunkt") for a formal timing record element that lacks statutory anchor. Reformulation to permissive language would restore professional scheduling discretion while preserving the need-assessment obligation.

TRANSACTION COST CATEGORY: Documentation Inflation

REQUIREMENT ID: § 17 — PROC-REQ-17.8

PROVISION TEXT: Nav-kontoret skal etter eget tiltak vurdere tjenestemottakers behov for veiledning.

SOURCE INSTRUMENT: Circular — R-35, § 4.17.2.6

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: YES — Grounded in forvaltningsloven § 11 and preparatory works.

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: PARTIAL — Proactive assessment duty adds to workload but is core to the service purpose.

PURPOSE: USER NEED — Ensures users who do not know their rights or do not ask receive service.

BURDEN DESCRIPTION: No transaction cost burden identified; proactive assessment duty directly serves user access.

KILL LIST CLASSIFICATION: No Kill List Action

TRANSACTION COST CATEGORY: No Transaction Cost Identified

REQUIREMENT ID: § 17 — PROC-REQ-17.9

PROVISION TEXT: Når Nav-kontoret skal avklare tjenestemottakers behov for økonomisk rådgivning, er det nødvendig å kartlegge vedkommendes faktiske inntekter, utgifter, eiendeler og gjeld.

SOURCE INSTRUMENT: Circular — R-35, § 4.17.2.7

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: PARTIAL — Process Inflation Finding: the circular converts the open normative standard on relevant financial information into a fixed, mandatory four-element checklist (income, expenses, assets, debt) unsupported by the text of the Act.

DOUBLE AUTHORITY GAP: NO (circular authority present)

CATEGORY ERROR: NO

SCALE FLAG: YES — [S] + [K]. Anchor Document Cluster 1: "The circular converts the open normative standard over what constitutes relevant financial information into a fixed, mandatory four-element checklist." Small offices processing fewer than 15 economic counseling cases per year cannot maintain the competence to correctly apply the full protocol.

PURPOSE: MIXED — Primary USER NEED: comprehensive financial mapping serves guidance quality. Secondary INTERNAL CONTROL: the mandatory four-element structure (rather than professional judgment on what to map) serves audit standardization over individual case responsiveness.

BURDEN DESCRIPTION: Caseworker must map four specific elements for every economic counseling case — obtaining information and documentation for all four points regardless of case-specific relevance. The rigid checklist replaces professional discretion on appropriate mapping scope. At low case volumes, caseworkers cannot maintain the competence needed to apply the protocol correctly.

KILL LIST CLASSIFICATION: Category B — Status Change. R-35 uses imperative language ("er det nødvendig å kartlegge") for a fixed four-element checklist that lacks statutory authority. Reformulation to permissive guidance ("det vil vanligvis være relevant å kartlegge") would restore professional discretion on mapping scope while preserving the comprehensive mapping intent.

TRANSACTION COST CATEGORY: Documentation Inflation + Structural Disproportionality

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REQUIREMENT ID: § 17 — PROC-REQ-17.10

PROVISION TEXT: Ut fra det som kommer frem under kartleggingen, må Nav-kontoret vurdere på hvilket nivå rådgivningen skal gis.

SOURCE INSTRUMENT: Circular — R-35, § 4.17.2.7

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: YES — Level determination based on mapping aligns with standard professional open-judgment elements. No gap.

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: PARTIAL — Professional judgment step; moderate scale concern in terms of competence maintenance.

PURPOSE: USER NEED — Ensures the appropriate depth and intensity of counseling for each user's needs.

BURDEN DESCRIPTION: No transaction cost burden identified; professional judgment step with direct user benefit.

KILL LIST CLASSIFICATION: No Kill List Action

TRANSACTION COST CATEGORY: No Transaction Cost Identified

REQUIREMENT ID: § 17 — PROC-REQ-17.11

PROVISION TEXT: Der det foreligger alvorlige gjeldsproblemer, må Nav-kontoret informere om gjeldsordningen og bistå skyldneren så langt det er mulig med å komme frem til en utenrettslig gjeldsordning med sine fordringshavere.

SOURCE INSTRUMENT: Circular — R-35, § 4.17.2.9

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: PARTIAL — Process Inflation Finding: the substantive duty derives primarily from gjeldsordningsloven (a separate statute), and the textual connection to § 17 of sosialtjenesteloven is ambiguous. The Anchor Document's cross-reference section itself cites "Gjeldsordningsloven § 1-5 kommunens plikt til å bistå."

DOUBLE AUTHORITY GAP: NO (circular authority present)

CATEGORY ERROR: NO (but cross-domain note applies — the primary statutory basis is gjeldsordningsloven, not sosialtjenesteloven; this is an operationally legitimate cross-domain duty, not a mislabeled requirement).

SCALE FLAG: YES — [S] Anchor Document: Løten (2025) — specialist had not processed a single gjeldsordning case since taking the role in September 2024. The combination of rare case frequency [K] and high specialist knowledge requirements [S] creates structural impossibility for small offices to maintain this competence.

PURPOSE: USER NEED — Ensuring users with severe debt know their statutory options and receive assistance is a direct user welfare obligation.

BURDEN DESCRIPTION: No transaction cost burden identified in terms of the user-facing obligation. However, the specialist-level competence required to perform gjeldsordning assistance is volume-sensitive: small offices processing this case type too rarely cannot maintain operative knowledge. This is a structural capacity concern rather than a documentation burden.

KILL LIST CLASSIFICATION: Category C — Clarification. The relationship between the § 17 obligation and gjeldsordningsloven should be made explicit to reduce normative uncertainty. The circular should clarify whether § 17 independently grounds this duty or whether it operates by cross-reference to gjeldsordningsloven § 1-5, and what the practical implications are for small offices lacking gjeldsordning competence.

TRANSACTION COST CATEGORY: Structural Disproportionality (competence maintenance, not documentation)

REQUIREMENT ID: § 17 — PROC-REQ-17.12

PROVISION TEXT: Råd og veiledning er en tjeneste som det skal fattes vedtak om eller som skal inngå som del av vedtak. [Kommunebrev 2025 repetition]

SOURCE INSTRUMENT: Kommunebrev 2025 — type (a) Kommunebrev

CIRCULAR AUTHORITY: ABSENT — Consequence: Parallel-channel compliance reinforcement outside R-35 framework.

LEGAL AUTHORITY: YES — The underlying vedtak requirement is legally grounded.

DOUBLE AUTHORITY GAP: NO (statutory authority present)

CATEGORY ERROR: NO

SCALE FLAG: YES — [D] Procedural Duplication. Same concerns as DOC-REQ-17.21.

PURPOSE: MIXED — Underlying obligation: USER NEED. Kommunebrev framing: INTERNAL CONTROL (compliance reinforcement signal).

BURDEN DESCRIPTION: Procedural duplication of vedtak requirement in a Kommunebrev. Amplifies compliance pressure without adding normative content. Operates outside circular guidance framework.

KILL LIST CLASSIFICATION: No Kill List Action — underlying obligation is valid. Procedural duplication noted.

TRANSACTION COST CATEGORY: Procedural Duplication

REQUIREMENT ID: § 17 — PROC-REQ-17.13

PROVISION TEXT: Dersom en mindreårig søker om tjenesten opplysning, råd og veiledning må Nav-kontoret innhente samtykke fra den eller de med foreldreansvaret før det søkes om tjenesten.

SOURCE INSTRUMENT: Veileder sotjl. § 17 — type (b) veileder

CIRCULAR AUTHORITY: ABSENT — Consequence: The parental consent requirement for minors is defined only in the Veileder; R-35 does not address it.

LEGAL AUTHORITY: PARTIAL — Process Inflation Finding: while legal capacity principles require parental consent, enforcing a strict sequential procedure (consent must precede application) directly through § 17 lacks clear textual necessity in the Act.

DOUBLE AUTHORITY GAP: YES — Both circular authority is ABSENT and statutory authority is PARTIAL.

CATEGORY ERROR: NO

SCALE FLAG: PARTIAL — Specific to minor applicants; bounded scope limits overall burden.

PURPOSE: MIXED — Primary USER NEED: protects minor's legal capacity rights. Secondary INTERNAL CONTROL: the mandatory sequential procedure (consent before application, rather than consent as part of case processing) adds an administrative preparatory step without statutory necessity for that exact ordering.

BURDEN DESCRIPTION: Caseworker must identify minor applicants, locate and contact foreldreansvar holder(s), obtain and document consent before beginning case processing. The sequential requirement creates a defined pre-application phase. Obligation operates entirely outside circular guidance framework.

KILL LIST CLASSIFICATION: Category B — Status Change. Veileder uses imperative language for a sequential procedural requirement that lacks circular authority and only partial statutory authority. Reformulation to permissive guidance on consent sequencing, or clarification that consent can be obtained during case processing rather than strictly before, would reduce administrative rigidity while protecting the user's legal capacity interest.

TRANSACTION COST CATEGORY: Documentation Inflation. Obligation operates entirely outside circular guidance framework.

REQUIREMENT ID: § 17 — PROC-REQ-17.14

PROVISION TEXT: I behandlingen av en søknad må Nav-kontoret avklare om det er noe som haster og må løses umiddelbart.

SOURCE INSTRUMENT: Veileder sotjl. § 17 — type (b) veileder

CIRCULAR AUTHORITY: ABSENT — Consequence: The mandatory urgency triage step is defined only in the Veileder.

LEGAL AUTHORITY: PARTIAL — Process Inflation Finding: a specific mandatory internal triage step for urgency relies on general principles but has no explicit authorization in § 17.

DOUBLE AUTHORITY GAP: YES — Both circular authority is ABSENT and statutory authority is PARTIAL.

CATEGORY ERROR: NO

SCALE FLAG: PARTIAL — The triage step is operationally manageable; moderate burden.

PURPOSE: USER NEED — Urgency triage directly serves user access to timely service in crisis situations.

BURDEN DESCRIPTION: No transaction cost burden identified; urgency triage directly serves users. The double authority gap does not generate disproportionate burden given the USER NEED classification.

KILL LIST CLASSIFICATION: No Kill List Action in terms of the functional obligation. However, the double authority gap suggests that reformulation into the R-35 framework would be preferable to leaving this user-protective obligation visible only in the Veileder.

TRANSACTION COST CATEGORY: No Transaction Cost Identified

REQUIREMENT ID: § 17 — PROC-REQ-17.15

PROVISION TEXT: Alle søknader om tjenesten skal vurderes individuelt og konkret ut fra søkerens behov på søknadstidspunktet, og avgjørelsen skal fattes i et enkeltvedtak.

SOURCE INSTRUMENT: Veileder sotjl. § 17 — type (b) veileder

CIRCULAR AUTHORITY: ABSENT — Consequence: Individual assessment and enkeltvedtak requirement for § 17 sourced from Veileder only.

LEGAL AUTHORITY: YES — Fully grounded in preparatory works, forvaltningsloven, and Social Services Act intent.

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: YES — [D] + [K] same structural concerns as DOC-REQ-17.12.

PURPOSE: USER NEED — Individual assessment and enkeltvedtak are user protection mechanisms.

BURDEN DESCRIPTION: Legally necessary; no transaction cost burden identified beyond underlying assessment obligations.

KILL LIST CLASSIFICATION: No Kill List Action

TRANSACTION COST CATEGORY: No Transaction Cost Identified

REQUIREMENT ID: § 17 — PROC-REQ-17.16

PROVISION TEXT: Det må innledningsvis avklares om saken dreier seg om forhold som faller inn under økonomisk rådgivning som kan/bør behandles av kommunal rådgivningstjeneste.

SOURCE INSTRUMENT: Veileder øk. rådgivning — type (b) veileder (economic counseling sub-domain guidance)

CIRCULAR AUTHORITY: ABSENT — Consequence: The mandatory initial case scoping step is defined only in the economic counseling Veileder, entirely outside the R-35 framework.

LEGAL AUTHORITY: PARTIAL — Process Inflation Finding: inserting a formal initial case scoping prerequisite is not anchored in § 17.

DOUBLE AUTHORITY GAP: YES — Both circular authority is ABSENT and statutory authority is PARTIAL.

CATEGORY ERROR: NO

SCALE FLAG: PARTIAL — Administrative routing step; moderate burden individually.

PURPOSE: INTERNAL CONTROL — Initial case classification to determine service type routing. The user receives the appropriate service regardless of how the intake classification is labeled administratively.

BURDEN DESCRIPTION: Caseworker must execute an initial classification step to determine whether the case qualifies as "economic counseling" before proceeding. This routing question creates an administrative pre-assessment phase. Operates entirely outside circular guidance framework.

KILL LIST CLASSIFICATION: Category B — Status Change. Veileder øk. rådgivning uses imperative language ("må innledningsvis avklares") for a case-scoping requirement lacking both circular authority and statutory anchor. Reformulation to guidance on how to recognize

economic counseling cases, rather than a mandatory scoping prerequisite, would reduce administrative rigidity.

TRANSACTION COST CATEGORY: Documentation Inflation + Reporting Overhead. Obligation operates entirely outside circular guidance framework.

REQUIREMENT ID: § 17 — PROC-REQ-17.17

PROVISION TEXT: Dersom rådgiveren skal innhente dokumentasjon, må bruker gi rådgiveren fullmakt til dette.

SOURCE INSTRUMENT: Veileder øk. rådgivning — type (b) veileder

CIRCULAR AUTHORITY: ABSENT — Consequence: The power-of-attorney documentation requirement operates entirely outside the R-35 framework.

LEGAL AUTHORITY: PARTIAL — Process Inflation Finding: the strict formalization of fullmakt consent derives from privacy/personvern law (separate from sosialtjenesteloven), presenting textual unclarity when listed as a § 17 procedural rule.

DOUBLE AUTHORITY GAP: YES — Both circular authority is ABSENT and statutory authority is PARTIAL.

CATEGORY ERROR: YES — The requirement derives from privacy/personvern law (personopplysningsloven / GDPR framework), not from sosialtjenesteloven § 17. Listing it as a § 17 procedural rule constitutes a category error: the legal basis is in a different statutory domain, and its presence in § 17 normative instruments misattributes the obligation's source.

SCALE FLAG: PARTIAL — Documentation step; moderate individual burden.

PURPOSE: MIXED — USER NEED in its home domain (privacy law): informed consent and data protection are user rights. INTERNAL CONTROL in the social services context: the administrative documentation of the fullmakt as a § 17 procedural compliance step creates documentation overhead derived from the wrong legal domain.

BURDEN DESCRIPTION: Caseworker must obtain and document a formal fullmakt from the user before gathering third-party financial documents. This creates a defined consent-documentation phase in case processing. The obligation derives from privacy law, not § 17, and operates entirely outside the circular guidance framework. Caseworkers must comply with a privacy-law requirement embedded in § 17 normative instruments without R-35 providing any framework for it.

KILL LIST CLASSIFICATION: Category A — Removal. The requirement belongs to a different legal domain (privacy/personvern law) and should not appear in § 17 social services normative instruments. Its presence constitutes a category error. The underlying privacy-law obligation remains valid and operative through its own statutory framework; removing it from § 17 normative instruments corrects the misattribution without eliminating the user protection.

TRANSACTION COST CATEGORY: Documentation Inflation. Obligation operates entirely outside circular guidance framework. Category error — derives from privacy law.

REQUIREMENT ID: § 17 — PROC-REQ-17.18

PROVISION TEXT: Det er også viktig å kartlegge den økonomiske situasjonen hos samboer/ektefelle, selv om denne normalt ikke er ansvarlig for brukerens gjeld.

SOURCE INSTRUMENT: Veileder øk. rådgivning — type (b) veileder

CIRCULAR AUTHORITY: ABSENT — Consequence: This mapping recommendation is defined only in the economic counseling Veileder.

LEGAL AUTHORITY: YES — Structured as a professional mapping recommendation within caseworker discretion. No gap. The Process Inflation Finding explicitly notes this operates within the worker's open discretion mapping tools.

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: PARTIAL — Professional recommendation; not mandatory; low scale concern.

PURPOSE: USER NEED — Comprehensive household financial mapping serves the quality of economic counseling outcomes.

BURDEN DESCRIPTION: No transaction cost burden identified; this is a professional recommendation, not a mandatory compliance requirement.

KILL LIST CLASSIFICATION: No Kill List Action

TRANSACTION COST CATEGORY: No Transaction Cost Identified

CLOSING COMPARATIVE NOTE

Quantitative Summary

Metric	Count
Total requirements identified from Process Inflation Findings	39
Requirements visible from circular (R-35) alone	18
Requirements invisible from circular alone	21 (54%)

Double authority gaps	10
Category errors (wrong legal domain)	1 (PROC-REQ-17.17: privacy law)
Cross-domain category notes (gjeldsordningsloven)	1 (PROC-REQ-17.11)

Kill List Breakdown

Category	Count	Requirements
Category A — Removal	3	DOC-REQ-17.18 (mandatory KVP/§17 decision separation, no statutory basis); DOC-REQ-17.20 (retrospective professional-choices record, explicitly no statutory authority); PROC-REQ-17.17 (fullmakt as §17 requirement, category error — privacy law)
Category B — Status Change	11	DOC-REQ-17.5; DOC-REQ-17.11; DOC-REQ-17.14; DOC-REQ-17.17; DOC-REQ-17.19; PROC-REQ-17.3; PROC-REQ-17.7; PROC-REQ-17.9; PROC-REQ-17.13; PROC-REQ-17.16; (and DOC-REQ-17.11 is overlapping with 17.17)
Category C — Clarification	4	DOC-REQ-17.2; DOC-REQ-17.6; PROC-REQ-17.2; PROC-REQ-17.11
No Kill List Action	21	All remaining requirements with sufficient authority and proportionate burden

Transaction Cost Categories by Frequency

Category	Count	Primary Examples
Documentation Inflation	22	DOC-REQ-17.2, 17.5, 17.10, 17.11, 17.13, 17.14, 17.17, 17.18, 17.19, 17.20; PROC-REQ-17.3, 17.7, 17.9, 17.13, 17.16, 17.17
Procedural Duplication	5	DOC-REQ-17.21; PROC-REQ-17.6, 17.12; internal R-35 duplications
Structural Disproportionality	4	DOC-REQ-17.1 (level-1), 17.18; PROC-REQ-17.3, 17.9
Reporting Overhead	2	DOC-REQ-17.21; PROC-REQ-17.16
Combined Burden	3	DOC-REQ-17.1 (Documentation + Structural); DOC-REQ-17.18 (Documentation + Structural); PROC-REQ-17.9 (Documentation + Structural)

No Transaction Cost Identified	17	All USER NEED-only requirements

Principal Findings for Main Report and Kill List Deliverables

The most significant structural finding is the 54-percent invisibility rate: more than half the regulatory load operative on caseworkers in § 17 derives from veileders and Kommunebrev that are invisible from R-35. An analyst or caseworker working only from the circular would miss 21 requirements, including all the termination note obligations (DOC-REQ-17.19, 17.20), all the specific vedtak content requirements (DOC-REQ-17.11, 17.14, 17.17), and the KVP decision-separation mandate (DOC-REQ-17.18).

The Kill List Category A items are analytically unambiguous. DOC-REQ-17.20 is the only requirement in the paragraph for which the statute has been determined to provide explicitly no authority; it generates maximum-intensity documentation burden with zero legal basis and should be repealed immediately. DOC-REQ-17.18 is structurally contradictory to the circular's own flexibility and has no statutory basis. PROC-REQ-17.17 is from the wrong legal domain.

The Kill List Category B cluster (11 requirements) represents the largest reform opportunity. These requirements share a common structure: they use imperative language ("skal," "må") to convert professional judgment into mandatory compliance elements — particularly for timing records in vedtak, documentation placement in other services' records, and assessment checklists. Reformulation to permissive language would restore local discretion across this entire cluster without removing the legitimate service quality intent.

The dominant transaction cost mechanism is Documentation Inflation, appearing in 22 requirements. This aligns precisely with the Anchor Document's finding that [D] Documentation Apparatus is the dominant empirical mechanism by a wide margin in Set B supervision reports. The normative analysis and the empirical evidence converge: caseworkers in small offices deliver the service effectively but fail systematically to translate delivery into the formal administrative record structure — not because of negligence, but because the documentation apparatus is structurally disproportionate to case volumes.

The Anchor Document intersection is sharpest at Cluster 1 (documentation-competence-specialization trap), which maps to DOC-REQ-17.1 / 17.5 / 17.14 / PROC-REQ-17.7 / 17.9 as a combined burden cluster. Track A's mandate-narrowing analysis should prioritize the statutory threshold for vedtak at level-1 guidance, where supervisory divergence (Hjelmeland vs. Hustadvika; Årdal 2025) itself constitutes evidence of legal uncertainty. If level-1 guidance does not require formal vedtak under the statute, the majority of Cluster 1 sanctions in Set B constitute overreach beyond the statutory mandate.

End of Sludge Audit — § 17 Opplysning, råd og veiledning 39 requirements analyzed. Draft for manual legal verification phase.

SLUDGE AUDIT — § 18 STØNAD TIL LIVSOPPHOLD

Full Structured Analysis per Analytical Framework

PRELIMINARY METHODOLOGICAL NOTE

Requirement count comparison:

The Process Inflation Findings (Reference Document) identify **18 requirements** applicable to §18. A direct reading of the circular paragraph (Context Document, Rundskriv 35 §18, sections 4.18.1–4.18.2.50) yields clear textual presence for **8 requirements**, partial textual presence for **1 requirement**, and **no textual presence for 9 requirements**.

This means that **50 percent of the operative normative load imposed on caseworkers under §18 is invisible if the circular is used as the primary analytical lens.** The circular gives the impression of a discretionary, user-oriented framework; the sub-legal normative layer revealed by the Process Inflation Findings transforms that framework into a detailed documentation and procedural compliance architecture.

Requirements with no textual presence in the circular and their source instruments:

Requirement	Source Instrument	Type
DOC-REQ-18.3	*Barnets beste — veileder 20032024.pdf*	(b) veileder
DOC-REQ-18.4	*Barnets beste — veileder 20032024.pdf*	(b) veileder
DOC-REQ-18.5	*Barnets beste — veileder 20032024.pdf*	(b) veileder
DOC-REQ-18.6	*Veileder økonomisk stønad 2022 (oppdatert juni 2024)*	(b) veileder
DOC-REQ-18.7	*Veileder til sosialtjenesteloven § 17*	(b) veileder
DOC-REQ-18.8	*Veileder for Nav-kontoret ved vurdering av lovlig opphold for EØS-borgere juni 2025*	(b) veileder
PROC-REQ-18.8	*Veileder økonomisk stønad 2022*	(b) veileder
PROC-REQ-18.9	*Veileder økonomisk stønad 2022*	(b) veileder

PROC-REQ-18.11	*Kommunebrev 2025*	(a) Kommunebrev

All nine requirements absent from the circular derive from sub-legal instruments — eight from veiledere and one from a Kommunebrev. None have a direct anchor in the circular that governs day-to-day casework under §18. This source mapping is carried forward into Step 2.

STEP 1 — IDENTIFICATION OF ALL REQUIREMENTS

Requirement §18-1 *Exact obligation:* Hensynene som ligger til grunn for vurderingen av hva som er et forsvarlig livsopphold for den enkelte skal begrunnes konkret og individuelt. *Source instrument:* Rundskriv 35 §18, seksjon 4.18.1.1 (circular) *Explicit or implicit:* Explicit *Circular presence:* YES — directly stated in section 4.18.1.1

Requirement §18-2 *Exact obligation:* Avgjørelser om økonomisk stønad er enkeltvedtak. Nav-kontoret må følge de krav til saksbehandling som følger av denne loven, forvaltningsloven og uskrevne normer om god forvaltningsskikk. *Source instrument:* Rundskriv 35 §18, seksjon 4.18.1.7 (circular) *Explicit or implicit:* Explicit *Circular presence:* YES — directly stated in section 4.18.1.7

Requirement §18-3 *Exact obligation:* Dersom vi velger et resultat som innebærer at barnets beste ikke får gjennomslag, må dette begrunnes særskilt og skriftlig for å sikre etterprøvbarhet og barnets rettssikkerhet. *Source instrument:* Barnets beste — veileder 20032024.pdf (veileder) *Explicit or implicit:* Explicit *Circular presence:* NO — entirely absent from the circular

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Requirement §18-4 *Exact obligation:* For at andre skal kunne se hvilke vurderinger som er gjort og ha mulighet for å etterprøve vurderingene, må barnets beste-vurderingene dokumenteres. *Source instrument:* Barnets beste — veileder 20032024.pdf (veileder) *Explicit or implicit:* Explicit *Circular presence:* NO — entirely absent from the circular

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Requirement §18-5 *Exact obligation:* Det som skrives om barnet i saken bør være nøytralt beskrivende og begrense seg til det som er strengt nødvendig for å vise at vi har tatt tilstrekkelig hensyn til barnets beste. *Source instrument:* Barnets beste — veileder 20032024.pdf (veileder) *Explicit or implicit:* Explicit *Circular presence:* NO — entirely absent from the circular

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Requirement §18-6 *Exact obligation:* Egenerklæring fra søkeren kan også være muntlig, og skrives ned i journalnotat av NAV-kontoret. *Source instrument:* Veileder økonomisk stønad 2022 (oppdatert juni 2024) (veileder) *Explicit or implicit:* Explicit (permissive in form but operationally generates a systematic journaling obligation for all verbal declarations) *Circular presence:* NO — the general obligation to gather information is present in the circular, but the specific journal-note mechanism for verbal self-declarations is not

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Requirement §18-7 *Exact obligation:* Råd og veiledning gitt i forbindelse med innvilgelse eller avslag av andre sosiale tjenester skal omtales i innvilgelsesvedtaket eller avslaget. *Source instrument:* Veileder til sosialtjenesteloven §17 (veileder), applied to §18 *Explicit or implicit:* Explicit *Circular presence:* NO — absent from the §18 circular; derives from a §17 veileder applied cross-provision

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Requirement §18-8 *Exact obligation:* Nav-kontoret tar et selvstendig ansvar for at saken er tilstrekkelig opplyst og at oppholdsstatus er dokumentert i saker der et av inngangskriteriene for tjenester er lovlig opphold i riket. *Source instrument:* Veileder for Nav-kontoret ved vurdering av lovlig opphold for EØS-borgere juni 2025 (veileder) *Explicit or implicit:* Explicit *Circular presence:* NO — the residence condition for §18 is referenced in the circular but the specific independent documentation obligation derives exclusively from the EØS veileder

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Requirement §18-9 *Exact obligation:* Hovedprinsippet for behandling av søknad om økonomisk stønad er at det skal foretas konkrete og individuelle vurderinger av hjelpebehov, stønadsbeløp og stønadsform. *Source instrument:* Rundskriv 35 §18, seksjon 4.18 (circular) *Explicit or implicit:* Explicit *Circular presence:* YES — stated prominently and repeatedly in the circular

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Requirement §18-10 *Exact obligation:* Nav-kontoret skal foreta en vurdering av tjenestemottakers helhetlige situasjon, og det skal tas hensyn til vedkommendes inntekter og inntektsmuligheter, nødvendige utgifter til livsopphold og personlige forhold. *Source instrument:* Rundskriv 35 §18 (circular) *Explicit or implicit:* Explicit *Circular presence:* YES — directly stated in the circular

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Requirement §18-11 *Exact obligation:* Nav-kontoret skal utrede hjelpebehovet i samarbeid med vedkommende. *Source instrument:* Rundskriv 35 §18 (circular) *Explicit or implicit:* Explicit *Circular presence:* YES — stated directly in the circular at multiple points

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Requirement §18-12 *Exact obligation:* Søknaden må vurderes raskt i en nødssituasjon, ofte samme dag som den er mottatt, og hvilke opplysninger som er nødvendige må begrenses til den konkrete situasjonen. *Source instrument:* Rundskriv 35 §18 (circular) *Explicit or implicit:* Explicit *Circular presence:* YES — stated in section 4.18.1.7

Requirement §18-13 *Exact obligation:* Hvis tjenestemottaker har barn, skal det tas særlige hensyn til deres behov i alle vurderinger som foretas. *Source instrument:* Rundskriv 35 §18 (circular) *Explicit or implicit:* Explicit — classified as a SUBSTANTIVE LEGAL OBLIGATION in the Process Inflation Findings *Circular presence:* YES — stated directly and repeatedly in the circular

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Requirement §18-14 *Exact obligation:* Nav-kontoret foretar en grundig kartlegging av tjenestemottakers helhetlige situasjon, og innhenter de opplysninger som er nødvendige i saken. *Source instrument:* Rundskriv 35 §18 (circular) *Explicit or implicit:* Explicit *Circular presence:* YES — stated in the circular; however, the documentation specifications attached to this obligation derive from the veileder layer

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Requirement §18-15 *Exact obligation:* NAV-kontoret bør innledningsvis i kartleggingen søke å avklare hvor lenge brukeren vil ha behov for hjelp fra NAV. *Source instrument:* Veileder økonomisk stønad 2022 (veileder) *Explicit or implicit:* Explicit (using "bør" — recommendatory but operationally generates a sequencing obligation at intake) *Circular presence:* NO — not addressed in the circular

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Requirement §18-16 *Exact obligation:* NAV-kontoret må gjøre en konkret og individuell vurdering av hvordan opplysningene skal dokumenteres. *Source instrument:* Veileder økonomisk stønad 2022 (veileder) *Explicit or implicit:* Explicit (using "må" — imperative) *Circular presence:* NO — not addressed in the circular

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Requirement §18-17 *Exact obligation:* NAV-kontoret må kartlegge hvor store faktiske utgifter enkeltpersoner har. *Source instrument:* Veileder økonomisk stønad 2022 (veileder) *Explicit or implicit:* Explicit *Circular presence:* PARTIAL — expense assessment is clearly implied in the circular's treatment of §18 but the specific mapping obligation as a discrete procedural step derives from the veileder

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Requirement §18-18 *Exact obligation:* Det er viktig at Nav-kontoret konkret og individuelt vurderer hvilke aktiviteter som er hensiktsmessige. *Source instrument:* Kommunebrev 2025 (Kommunebrev) *Explicit or implicit:* Explicit — classified as SUBSTANTIVE LEGAL

OBLIGATION in the Process Inflation Findings *Circular presence:* NO — not addressed in the §18 circular

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STEP 2 — LEGAL AUTHORITY CHECK

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§18-1 *Direction 1 — Circular authority:* YES. Section 4.18.1.1 directly states the obligation. *Direction 2 — Statutory authority:* YES. The requirement for concrete individual justification is grounded in fvl. §§24–25 (duty to state reasons) and is inherent in the open normative standard of §18 itself. *Double authority gap:* NO *Category error:* NO

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§18-2 *Direction 1 — Circular authority:* YES. Section 4.18.1.7. *Direction 2 — Statutory authority:* YES. Directly grounded in forvaltningsloven §2(b) and restates mandatory procedural law. Process Inflation Findings: "creating no new requirements." *Double authority gap:* NO *Category error:* NO

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§18-3 *Direction 1 — Circular authority:* NO. The requirement exists solely in the Barnets beste veileder. First-order authority gap. *Direction 2 — Statutory authority:* PARTIAL. The Process Inflation Findings note that §18 "contains no express authorization for a mandatory specific written justification requirement when the child's best interests are overridden; the basis, if any, lies in external sources (UN Convention/Constitution)." The normative anchor — Grunnloven §104 and Barnekonvensjonen — is valid but does not derive from §18, and constitutional sources do not authorize imperative specification in a veileder without circular mediation. *Double authority gap:* YES — circular authority ABSENT; statutory authority under §18 is PARTIAL only *Category error:* NO — Barnekonvensjonen and Grunnloven §104 are not a different "legal domain" in the sense of being outside the social services framework; they are hierarchically superior sources that inform it

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§18-4 *Direction 1 — Circular authority:* NO. Absent from the circular. First-order authority gap. *Direction 2 — Statutory authority:* PARTIAL. Process Inflation Findings: "the basis lies in external frameworks and documentation principles rather than §18's text." The review/audit function language ("for at andre skal kunne se") in the veileder further distances this from user-protection rationale. *Double authority gap:* YES *Category error:* NO

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§18-5 *Direction 1 — Circular authority:* NO. Absent from the circular. First-order authority gap. *Direction 2 — Statutory authority:* PARTIAL. Process Inflation Findings: "plausible authorization routes exist indirectly via external data protection and administrative

standards." The specific content restriction (neutrally descriptive, strictly necessary) has no direct statutory anchor in §18. *Double authority gap:* YES *Category error:* NO

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§18-6 *Direction 1 — Circular authority:* NO. The circular requires adequate information gathering but does not specify the journal-note mechanism for verbal declarations. First-order authority gap. *Direction 2 — Statutory authority:* PARTIAL. Consistent with fvl. §17's general investigation duty, but the specific journal-note obligation as applied in practice goes beyond the permissive framing of the veileder statement. Process Inflation Findings: "consistent with fvl. §17's general investigation duty." *Double authority gap:* YES — circular authority ABSENT; statutory authority PARTIAL (the permissive statement creates a functional journaling mandate without express statutory anchor) *Category error:* NO

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§18-7 *Direction 1 — Circular authority:* NO. The §18 circular does not address this requirement. It derives from the §17 veileder applied cross-provision. First-order authority gap. *Direction 2 — Statutory authority:* PARTIAL. Process Inflation Findings: "authority for this specific requirement derives arguably from §17 and fvl. §§24–25 rather than §18's text." This is a cross-provision attribution: the obligation may have some basis in §17 but is being applied to §18 decisions without a clear §18 foundation. *Double authority gap:* YES *Category error:* NO (§17 and §18 are both within STL, so this is a cross-provision misattribution rather than a different legal domain)

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§18-8 *Direction 1 — Circular authority:* NO. The circular acknowledges that lawful residence is a general condition (referencing §2) but does not specify an independent documentation obligation for residence status. First-order authority gap. *Direction 2 — Statutory authority:* PARTIAL. The residence criterion derives from §2, not §18 itself. The specific independent documentation obligation has no express basis in §18. Process Inflation Findings: "§18 does not itself specify lawful residence as a condition or authorize a specific documentation requirement for it." Anchor Document flags this as a latent volume driver of "potentially very high severity" with mechanism [K]. *Double authority gap:* YES *Category error:* NO

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§18-9 *Direction 1 — Circular authority:* YES. Stated centrally and repeatedly in the circular. *Direction 2 — Statutory authority:* YES. Directly implied by the open normative standard "forsvarlig livsopphold" in §18. Process Inflation Findings: "directly implied by the open normative standard." *Double authority gap:* NO *Category error:* NO

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§18-10 *Direction 1 — Circular authority:* YES. Directly stated in the circular. *Direction 2 — Statutory authority:* YES. Described in Process Inflation Findings as an "exact restatement of Sivilombudet's authoritative interpretation of §18." *Double authority gap:* NO *Category error:* NO

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§18-11 *Direction 1 — Circular authority:* YES. Stated directly in the circular. *Direction 2 — Statutory authority:* YES. Grounded in §18 read with fvl. §17. Process Inflation Findings: "reflects the standard of adequate investigation and principle of party participation." *Double authority gap:* NO *Category error:* NO

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§18-12 *Direction 1 — Circular authority:* YES. Section 4.18.1.7. *Direction 2 — Statutory authority:* YES. The general principle of rapid emergency assessment is grounded in §18. The "often same day" formulation is qualified in the Process Inflation Findings as "practical guidance rather than a strict mandate." *Double authority gap:* NO *Category error:* NO

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§18-13 *Direction 1 — Circular authority:* YES. Stated directly in the circular and referenced throughout §4.18. *Direction 2 — Statutory authority:* YES. Substantive weighting obligation supported by §18 and reinforced by Grunnloven §104 and Barnekonvensjonen. *Double authority gap:* NO *Category error:* NO

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§18-14 *Direction 1 — Circular authority:* YES. The thorough mapping obligation is stated in the circular. *Direction 2 — Statutory authority:* YES. Directly reflects the duty to investigate adequately under fvl. §17. Process Inflation Findings: "directly reflects the duty to investigate sufficiently before making a decision." *Note:* The documentation specifications attached to this obligation in practice derive from the veileder layer; the substantive obligation has circular and statutory authority, but the specific documentary execution requirements do not. *Double authority gap:* NO (for the substantive obligation as stated in the circular) *Category error:* NO

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§18-15 *Direction 1 — Circular authority:* NO. Not addressed in the circular. First-order authority gap. *Direction 2 — Statutory authority:* PARTIAL. Process Inflation Findings: "a reasonable methodological recommendation consistent with individualized assessment requirements and self-sufficiency goals." However, it has no express statutory anchor as a mandatory intake step. *Double authority gap:* YES *Category error:* NO

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§18-16 *Direction 1 — Circular authority:* NO. Not addressed in the circular. First-order authority gap. *Direction 2 — Statutory authority:* PARTIAL. Process Inflation Findings: "the investigation duty and the individualized assessment requirement inherent in §18 collectively support requiring individualized assessment of documentation methods." However, mandating a discrete meta-procedural step of assessing how to document information goes beyond any statutory anchor. *Double authority gap:* YES *Category error:* NO

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§18-17 *Direction 1 — Circular authority:* PARTIAL. The circular requires expense assessment generally but the specific mapping mandate as a discrete procedural step derives from the veileder. *Direction 2 — Statutory authority:* YES. Process Inflation Findings: "logically necessary as a factual input to assess the open normative standard of 'forsvarlig livsopphold.'" *Double authority gap:* NO (the partial circular presence and full statutory authority together prevent double gap) *Category error:* NO

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§18-18 *Direction 1 — Circular authority:* NO. The §18 circular does not address activity assessment as part of §18 processing. First-order authority gap. The obligation derives from a Kommunebrev applied to §18 without circular mediation. *Direction 2 — Statutory authority:* PARTIAL. The self-sufficiency goal in §18 provides indirect support. However, formal activity condition assessment belongs structurally to §20a (vilkår om aktivitet), not §18. The Kommunebrev application to §18 is therefore an attribution gap within STL. *Double authority gap:* YES *Category error:* NO (both §18 and §20a are within STL; this is a cross-provision misattribution, not a different legal domain)

STEP 3 — SCALE AND PROPORTIONALITY CHECK

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§18-1: Scale flag: NO. The obligation to justify subsistence assessments concretely and individually is classified as scale-neutral. No Anchor Document finding flags this requirement.

§18-2: Scale flag: NO. The enkeltvedtak obligation is a general procedural baseline applicable uniformly. No volume-sensitivity identified.

§18-3: Scale flag: YES. Anchor Document, Cluster 3 (Child-Perspective Documentation Cluster): the requirement to produce additional written justification when children's best interests are overridden is part of the documentation apparatus [D] that "presupposes a specialization that the scale does not support." Anchor Document finding: caseworkers "verbally know what they should do but fail to document it" — confirmed in more than 15 municipalities. This requirement is invisible from the circular, meaning any scale-related burden it imposes is entirely unsupported by the circular framework.

§18-4: Scale flag: YES. Same cluster as §18-3. Anchor Document confirms that the documentation pipeline for children's assessments creates simultaneous [D] and [K] failures in small offices. The requirement to document child assessments in a reviewable form presupposes procedural fluency that cannot be achieved without sufficient case volume. As this requirement has no circular authority, the scale burden operates entirely outside the circular framework.

§18-5: Scale flag: PARTIAL. Part of the child-perspective documentation cluster. The self-editing and restraint obligation (writing neutrally and limiting content) is not

independently identified as a volume driver, but it adds to the cumulative [D] burden in small offices. Circular authority is absent, so any burden falls outside circular guidance.

§18-6: Scale flag: NO. The verbal self-declaration journaling requirement is not independently flagged as a volume driver in the Anchor Document. However, it contributes to the overall [D] documentation apparatus burden.

§18-7: Scale flag: PARTIAL. The obligation to mention §17 advice in §18 decision letters is part of the broader [D] documentation apparatus identified as the empirically dominant volume driver across more than 50 supervision findings. The Anchor Document notes: "writing separate journal notes and separate formal decisions, rather than consolidating information into the final vedtak." This requirement adds a cross-provision documentation obligation without circular authority in the §18 framework.

§18-8: Scale flag: YES. This corresponds directly to Requirement A-2 in the Anchor Document: "EØS residence assessment — Mechanism [K]." The Anchor Document explicitly flags this as "a latent volume driver of potentially high severity." The substantive finding: "the vast majority of small municipalities will encounter these cases so rarely that competence cannot be sustained even as a latent capacity." The absence of circular authority means the scale burden is entirely unsupported by the primary normative instrument.

§18-9: Scale flag: PARTIAL. Anchor Document section 1c: "municipalities default to standard rates precisely because they lack the repeated practice to make individualized calculations confidently." The Anchor Document flags a "possible misclassification for manual review" — the formal obligation may be scale-neutral but empirical compliance is volume-sensitive.

§18-10: Scale flag: PARTIAL. Same finding as §18-9. Holistic assessment of the overall situation relies on the same discretionary judgment capacity that the Anchor Document shows degrades in low-volume offices.

§18-11: Scale flag: NO. Collaborative investigation is a procedural baseline. No specific volume driver finding applies.

§18-12: Scale flag: NO. Emergency same-day processing is scale-neutral in principle. No volume driver finding applies.

§18-13: Scale flag: YES. Anchor Document, Cluster 3: the special consideration for children obligation is one of the three identified domains in the Child-Perspective Documentation Cluster. The [K] mechanism is confirmed — caseworkers who encounter child-welfare assessments infrequently cannot maintain the substantive competence to execute the assessment and produce required documentation. Confirmed across 15+ municipalities. Circular authority is present for this requirement.

§18-14: Scale flag: PARTIAL. The thorough mapping obligation itself is scale-neutral in principle. However, the documentation specifications layered onto it from veiledere contribute to the [D] documentation apparatus that is the dominant volume driver across 55 supervision findings. The Anchor Document's core finding: "caseworkers knew more about the users' situations than the journals reflected" — confirmed in 11 named municipalities and structurally characteristic of small offices.

§18-15: Scale flag: NO. Duration clarification at intake is individually modest. No specific volume driver finding applies.

§18-16: Scale flag: YES. The meta-procedural requirement to assess how information should be documented is part of the [D] documentation apparatus that is the dominant volume driver. In offices of 5–15 people, cumulative documentation obligations fall on the NAV leader who "is simultaneously the primary caseworker, the decision approver, the system administrator, the author of ROS analyses, and the convener of professional meetings" (Anchor Document, Cluster 2). This requirement adds a reflexive documentation layer without circular authority, meaning the burden falls outside the circular framework entirely.

§18-17: Scale flag: PARTIAL. Expense mapping is necessary and generally circular-grounded, but as a specified procedural step it contributes to cumulative [D] burden. The Anchor Document's general finding on documentation apparatus applies.

§18-18: Scale flag: YES. The activity assessment obligation from Kommunebrev 2025 forms part of the broader compliance architecture that the Anchor Document identifies as creating pressure toward specialization. Applied to §18 without circular authority, the concrete and individual activity assessment requirement adds a complex discretionary judgment demand on generalist caseworkers. The Anchor Document's finding on the debt counseling compliance stack (Cluster 1) is structurally analogous: "even if a municipality addresses competence... it remains exposed to [P] and [D] failures because the procedural and documentation obligations apply to all caseworkers." No circular authority means the scale burden is unsupported by the primary normative instrument.

STEP 4 — PURPOSE CLASSIFICATION

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§18-1: [USER NEED] The concrete and individual justification of what constitutes adequate subsistence for the specific person directly determines the legal quality and reviewability of the user's case. The language of section 4.18.1.1 — "skal begrunnes konkret og individuelt" — is framed entirely around the user's legal security and the correctness of the outcome, not around system accountability.

§18-2: [USER NEED] The enkeltvedtak framework confers substantive procedural protections on the user: right of appeal, right to reasons, right to party participation. These protections serve the user's legal security directly. The source instrument frames this as an obligation running toward the user.

§18-3: [MIXED] The requirement to provide specific written justification when a child's best interests are overridden serves both the child's legal security (user need: ensuring the override is deliberate and legally defensible) and the system's audit and review function (internal control: "for å sikre etterprøvbarhet" — the audit/review rationale is explicitly stated as the primary driver). Primary: internal control (auditability). Secondary: user need (child's

legal protection). The source instrument is a veileder where the review-function framing predominates.

§18-4: [INTERNAL CONTROL] The documentation requirement is justified entirely in terms of review and auditability: "for at andre skal kunne se hvilke vurderinger som er gjort og ha mulighet for å etterprøve vurderingene." The obligation to document runs toward the supervisory and review system, not toward the user. The assessment itself may serve user need, but the documentation of it serves the internal control apparatus.

§18-5: [INTERNAL CONTROL] The instruction on how to write about children — neutrally descriptive, limited to what is strictly necessary — serves documentation standards and data protection compliance within the administrative system. It does not affect the substantive outcome of the user's case. The source instrument's framing is directed at case-file management, not at the quality of the benefit determination.

§18-6: [INTERNAL CONTROL] The requirement to write verbal self-declarations into journal notes serves the system's evidentiary audit trail. The user's application proceeds whether or not the verbal declaration is transcribed; the transcription is for the case file's completeness and the system's reviewability. The user benefit from this is indirect at most.

§18-7: [INTERNAL CONTROL] Mentioning §17 advice in §18 decision letters serves the completeness and traceability of the administrative record. A user who has received advice already has the benefit of that advice regardless of whether it is mentioned in the subsequent decision letter. The obligation runs toward the system's audit and cross-provision tracking needs.

§18-8: [MIXED] Independent documentation of residence status serves both the correct legal determination of eligibility (user need: ensuring EØS citizens are assessed under the correct legal framework) and the system's supervisory compliance needs (internal control: creating a documented evidentiary trail). Primary: internal control (the specific independence and documentation obligation goes beyond what substantive assessment requires and appears calibrated for supervisory review). Secondary: user need (legal correctness of the eligibility assessment). The source instrument's language — "selvstendig ansvar for at ... oppholdsstatus er dokumentert" — prioritises documentation accountability over substantive assessment quality.

§18-9: [USER NEED] Concrete and individual assessment of the need for assistance is the core substantive obligation of §18. It directly determines whether the user receives the correct benefit and in the correct amount. No internal control function is identifiable at the primary level.

§18-10: [USER NEED] Holistic assessment of the overall situation ensures the user's benefit is correctly calibrated to their actual circumstances. The obligation runs directly toward the quality and correctness of the user's case outcome.

§18-11: [USER NEED] Collaborative investigation ensures the user's own perspective is integrated into the assessment. This serves the fairness, accuracy, and legal security of the case directly.

§18-12: [USER NEED] Rapid emergency processing serves the user's immediate, acute need. The "often same day" guidance is oriented toward protecting the user in a crisis situation, not toward system management.

§18-13: [USER NEED] The substantive weighting obligation — special consideration for children's needs in all assessments — directly protects children's interests and welfare. This is classified as a SUBSTANTIVE LEGAL OBLIGATION in the Process Inflation Findings. No internal control dimension.

§18-14: [MIXED] Thorough mapping of the holistic situation primarily serves the quality and completeness of the user's case assessment (user need, primary). The documentation specifics layered onto this obligation — which transform the caseworker's knowledge into a formal archival record — serve the system's supervisory and review function (internal control, secondary). The circular formulation focuses on the substantive investigation; the documentation specifications attached in the veileder layer shift emphasis toward the record.

§18-15: [INTERNAL CONTROL] The sequencing obligation to clarify expected duration at the outset of mapping serves case management efficiency and planning within the administrative system. The user's benefit is not affected by when duration is assessed. This is a methodological process standard with no direct bearing on the user's case outcome.

§18-16: [INTERNAL CONTROL] The meta-procedural requirement to assess how information should be documented serves the system's documentation management function. It adds a reflexive layer to the caseworker's process that has no bearing on the substantive quality of the benefit determination. The obligation runs entirely toward the administrative record-keeping apparatus.

§18-17: [USER NEED] Mapping actual expenses is logically necessary to calculate the correct benefit amount. This serves the user's case outcome directly. The obligation is substantive, not documentary.

§18-18: [MIXED] The individual assessment of appropriate activities has a direct bearing on the conditions placed on the user's benefit (user impact, primary). However, the framing in the Kommunebrev — requiring concrete and individual documentation of this assessment — creates a documentation obligation that serves the system's reporting and accountability needs (internal control, secondary). Primary: user need (the substantive activity assessment shapes the conditions of assistance). Secondary: internal control (the documentation of the assessment serves the Kommunebrev's accountability framework).

STEP 5 — TRANSACTION COST CHARACTERIZATION

(Requirements classified [USER NEED] have no transaction cost burden identified and are stated as such.)

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§18-1 [USER NEED]: No transaction cost burden identified. The obligation to justify assessments concretely and individually is the substantive core of §18 practice and does not impose costs beyond those inherent in lawful case processing.

§18-2 [USER NEED]: No transaction cost burden identified. The enkeltvedtak obligation restates existing mandatory procedural law.

§18-3 [MIXED]: When a caseworker's assessment leads to a decision where the child's best interests do not prevail, they must produce a specific additional written justification text — separate from the general reasons for the decision — articulating why the override is justified. This requires not merely factual description but legally framed reasoning about competing interests. In practice this means a distinct additional documentation step in every such case. The caseworker must identify the moment of override, articulate the competing interest that prevailed, and document the legal basis for the override. This obligation operates entirely outside the circular framework: the primary normative instrument governing the caseworker's work provides no guidance on how to fulfil it, what level of detail is required, or when it is triggered.

§18-4 [INTERNAL CONTROL]: The caseworker must ensure that every child's best interests assessment exists as a written, reviewable record — not merely that the assessment occurs. In small offices where caseworkers maintain active, direct knowledge of their users' family situations, this creates a systematic obligation to convert personal professional knowledge into formal text for each case involving children. The documentation is produced for the supervisory and review system ("for at andre skal kunne se"), not for the user. The Anchor Document's core finding — "caseworkers knew more about the users' situations than the journals reflected" — describes precisely this conversion failure in 11 municipalities. The burden falls on caseworkers without any circular guidance on format, trigger, or depth.

§18-5 [INTERNAL CONTROL]: Caseworkers must apply a content filter to what they write about children: self-editing for neutrality and proportionality. This creates a quality-check step on case-file entries involving children. In practice, the caseworker must review and revise documentation about children against a standard of neutral description and strict necessity. No circular guidance exists for this obligation. The obligation could interact with the child-perspective documentation obligations (§18-3, §18-4) in contradictory ways: write enough to demonstrate consideration for the child, but not more than strictly necessary.

§18-6 [INTERNAL CONTROL]: Every verbal self-declaration by an applicant must be transcribed to a journal note by the NAV office. In offices that rely substantially on direct, conversational client interaction — which the Anchor Document confirms is characteristic of small offices — this creates continuous parallel documentation demand during or after each client contact. The caseworker must decide in real time whether a verbal statement constitutes a "declaration," transcribe it accurately, and file it appropriately. No circular framework governs this process. The transaction cost is proportional to the volume of verbal interaction: offices serving clients through direct personal contact will carry a heavier relative burden than those operating through written channels.

§18-7 [INTERNAL CONTROL]: For every §18 decision in which §17 advice has been provided, the caseworker must cross-reference the service delivery record, identify the

advice given, and include explicit mention of it in the §18 decision letter. This requires coordination between the §17 service record and the §18 decision-writing process — a cross-provision administrative step with no guidance in the §18 circular. In offices where §17 and §18 are handled by the same caseworker as part of integrated client contact, this creates a documentary integration obligation that serves the system's traceability needs, not the user's substantive interests. The caseworker complies with an obligation that the primary normative instrument governing their §18 work does not address.

§18-8 [MIXED]: For every case involving an EØS citizen, the caseworker must independently investigate and document the applicant's residence status. This requires: identifying the applicable residence basis under EØS immigration rules; gathering and evaluating evidence; making a legal assessment of whether the residence condition is met; and producing a documented record that satisfies the "independently responsible" standard of the EØS veileder. This presupposes competence in EØS immigration directives — a specialized legal knowledge that the Anchor Document identifies as a [K] mechanism: impossible to maintain without a regular flow of such cases. Small municipalities will encounter EØS cases so rarely that this competence cannot be sustained. The obligation falls entirely outside the circular framework. The transaction cost is thus both a direct casework burden and a structural competence burden that cannot be addressed within a single office context.

§18-9 [USER NEED]: No transaction cost burden identified.

§18-10 [USER NEED]: No transaction cost burden identified.

§18-11 [USER NEED]: No transaction cost burden identified.

§18-12 [USER NEED]: No transaction cost burden identified.

§18-13 [USER NEED]: No transaction cost burden identified. The special consideration obligation is substantive; while it has documentation consequences captured in §18-3 and §18-4, the obligation itself as stated in the circular generates no internal control burden.

§18-14 [MIXED]: The substantive mapping obligation (user need component) generates no distinct transaction cost beyond what is inherent in adequate case assessment. However, the documentation specifics layered onto this obligation from the veileder — which require not merely that the mapping occurs but that a formal, archivable written record of the holistic situation exists — impose a conversion burden: transforming relational and conversational knowledge into a documented formal record. The Anchor Document confirms this is the structurally dominant failure mode in small offices. The caseworker must produce a kartlegging document that is reviewable by supervisors, not merely conduct the investigation. While the circular provides authority for the substantive obligation, the documentation specifics that generate the transaction cost derive from the veileder layer and therefore fall partially outside the circular framework.

§18-15 [INTERNAL CONTROL]: At the outset of every assessment, the caseworker must address and record the expected duration of the user's need for assistance. This adds a prospective forecasting step to the intake process. The caseworker must form and document a judgment about the likely length of dependency before the substantive assessment is

complete — a sequencing specification that serves case management planning rather than the immediate quality of the assessment. No circular authority exists for this step. Caseworkers must comply with a sequencing obligation that the primary normative instrument governing their intake work does not address.

§18-16 [INTERNAL CONTROL]: The caseworker must make and record a meta-decision about how each piece of gathered information should be documented — that is, they must document the documentation decision itself. This creates a reflexive procedural layer added to every assessment. For a caseworker handling multiple assessments, this obligation requires a secondary analytical process applied to the documentation apparatus rather than to the substance of the case. There is no circular guidance on what this assessment should contain, how detailed it should be, or when it is required. The transaction cost is entirely without a circular anchor: the caseworker complies with a meta-documentation obligation that the primary normative instrument governing their work does not acknowledge.

§18-17 [USER NEED]: No transaction cost burden identified. Mapping actual expenses is substantively necessary for the benefit calculation.

§18-18 [MIXED]: The caseworker must conduct a concrete and individual assessment of which activities are appropriate for the user and document this assessment. This involves both: (a) a substantive judgment about the user's situation and appropriate activities (user need component, for which no circular guidance exists in the §18 framework); and (b) the documentation of that judgment in a form that demonstrates compliance with the Kommunebrev obligation (internal control component). The transaction cost compounds a substantive assessment demand with a documentation demand, both operating without circular authority under §18. The proper forum for activity condition assessment is the §20a framework, which has its own procedural structure. The Kommunebrev's application of this obligation to §18 means caseworkers must apply a compliance framework that the §18 circular does not address and that may conflict with the procedural logic of the §20a framework where it properly belongs.

STEP 6 — CATALOG ENTRIES

REQUIREMENT ID: §18-1 **PROVISION TEXT:** The basis for assessing adequate subsistence must be justified concretely and individually in writing. **SOURCE INSTRUMENT:** Circular — Rundskriv 35 §18, seksjon 4.18.1.1 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — grounded in fvl. §§24–25 and inherent in the open normative standard of §18 **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. The obligation to justify assessments concretely is substantively necessary for the correctness of the user's case and is grounded in applicable law. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §18-2 **PROVISION TEXT:** Economic assistance decisions must be treated as individual administrative decisions (enkeltvedtak); the office must follow case-processing requirements in the Social Services Act, forvaltningsloven, and unwritten standards of good administrative practice. **SOURCE INSTRUMENT:** Circular — Rundskriv 35 §18, seksjon 4.18.1.7 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — directly grounded in forvaltningsloven §2(b); restates existing mandatory procedural law **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. This is a restatement of binding procedural law applicable to all administrative decisions. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §18-3 **PROVISION TEXT:** If the decision results in the child's best interests not prevailing, this must be specifically and explicitly justified in writing to ensure reviewability and the child's legal security. **SOURCE INSTRUMENT:** Veileder — *Barnets beste — veileder 20032024.pdf* **CIRCULAR AUTHORITY:** ABSENT — this obligation does not appear in the §18 circular. Caseworkers must comply with a requirement that the primary normative instrument governing their work does not address. Consequence: the obligation operates as a shadow-binding compliance requirement without circular mediation. **LEGAL AUTHORITY:** PARTIAL — §18 contains no express authorization for this specific documentation requirement. The partial basis lies in Grunnloven §104 and Barnekonvensjonen, which are hierarchically superior but do not authorize imperative specification in a veileder without circular mediation. Finding: Process Inflation Findings, KRAV 3 av 18. **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT; statutory authority under §18 PARTIAL **CATEGORY ERROR:** NO **SCALE FLAG:** YES — Anchor Document, Cluster 3 (Child-Perspective Documentation Cluster): documentation requirements for children's best interests assessments are flagged as volume-sensitive [D]+[K], confirmed in 15+ municipalities. The unsupported circular status means this scale burden operates entirely without regulatory foundation. **PURPOSE:** MIXED — Primary: internal control (auditability/reviewability is the stated driver). Secondary: user need (child's legal protection) **BURDEN DESCRIPTION:** Caseworkers must produce a specific additional written justification text when a decision overrides a child's best interests, requiring legally framed reasoning about competing interests beyond the general decision rationale. This obligation operates entirely outside the circular framework. In small offices where child-perspective competence is already volume-sensitive, adding a specific legal reasoning requirement without circular guidance exacerbates the documentation burden unsupported by the primary normative instrument. **KILL LIST CLASSIFICATION:** Category B — Status Change. The veileder uses imperative language ("må begrunnes særskilt og skriftlig") without binding authority under §18. The obligation should be reformulated to permissive language ("bør") to restore local discretion on the form and depth of justification, while preserving the substantive obligation to consider children's best interests. **TRANSACTION COST CATEGORY:** Documentation Inflation; Structural Disproportionality (absent circular guidance for scale-sensitive obligation)

REQUIREMENT ID: §18-4 **PROVISION TEXT:** Child's best interests assessments must be documented so that others can see which assessments were made and have the opportunity to review them. **SOURCE INSTRUMENT:** Veileder — *Barnets beste — veileder 20032024.pdf* **CIRCULAR AUTHORITY:** ABSENT — this obligation does not appear in the §18 circular. Consequence: as above for §18-3. **LEGAL AUTHORITY:** PARTIAL — §18 contains no provision requiring documentation of children's best interests assessments. The basis lies in external documentation principles and Barnekonvensjonen, not in §18's text. Finding: Process Inflation Findings, KRAV 4 av 18. **DOUBLE AUTHORITY GAP:** YES **CATEGORY ERROR:** NO **SCALE FLAG:** YES — Anchor Document, Cluster 3: the documentation pipeline for children's assessments creates simultaneous [D] and [K] failures. The scale burden is unsupported by the circular framework. **PURPOSE:** INTERNAL CONTROL — the stated purpose is review by others ("for at andre skal kunne se"). The obligation runs toward the supervisory system, not toward the user. **BURDEN DESCRIPTION:** Caseworkers must convert their child's best interests assessments — which in small offices are often based on direct, relational knowledge of the family — into formal, reviewable written records for every case. The Anchor Document confirms this conversion burden is the dominant source of supervision sanctions: "caseworkers knew more about the users' situations than the journals reflected." The obligation operates without circular guidance on format, depth, or trigger conditions. **KILL LIST CLASSIFICATION:** Category B — Status Change. The veileder uses imperative language ("må barnets beste-vurderingene dokumenteres") without binding authority under §18. Reformulation to permissive language is appropriate to restore professional discretion on documentation method and depth. **TRANSACTION COST CATEGORY:** Documentation Inflation; Structural Disproportionality

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REQUIREMENT ID: §18-5 **PROVISION TEXT:** Written information about the child in the case file should be neutrally descriptive and limited to what is strictly necessary to demonstrate that the child's best interests have been adequately considered. **SOURCE INSTRUMENT:** Veileder — *Barnets beste — veileder 20032024.pdf* **CIRCULAR AUTHORITY:** ABSENT — not addressed in the §18 circular. **LEGAL AUTHORITY:** PARTIAL — the instruction on case-file content for children has no express basis in §18. Indirect routes via data protection standards exist but do not constitute a §18 authority. Finding: Process Inflation Findings, KRAV 5 av 18. **DOUBLE AUTHORITY GAP:** YES **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — contributes to the cumulative [D] burden of the child-perspective documentation cluster. The scale burden operates outside the circular framework. **PURPOSE:** INTERNAL CONTROL — this is a documentation management standard directed at case-file quality and data protection compliance within the administrative system. **BURDEN DESCRIPTION:** Caseworkers must apply a content filter to case-file entries about children: reviewing for neutrality and proportionality. This creates a self-editing step that operates potentially in tension with the documentation requirements in §18-3 and §18-4 (write enough to demonstrate consideration, but not more than strictly necessary). The obligation provides no guidance on how to resolve that tension. No circular framework governs this step. **KILL LIST CLASSIFICATION:** Category C — Clarification. The veileder uses "bør" (should) — already permissive in form — but generates shadow binding in practice. The room for maneuver needs to be made explicit: caseworkers should understand that this is a best-practice recommendation, not a mandatory standard, and that

professional judgment on documentation depth is preserved. **TRANSACTION COST CATEGORY:** Documentation Inflation

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REQUIREMENT ID: §18-6 **PROVISION TEXT:** Self-declarations from the applicant may be given verbally and written down in a journal note by the NAV office. **SOURCE INSTRUMENT:** Veileder — *Veileder økonomisk stønad 2022 (oppdatert juni 2024)* **CIRCULAR AUTHORITY:** ABSENT — the general obligation to gather information is in the circular, but the specific journal-note mechanism for verbal declarations is not. **LEGAL AUTHORITY:** PARTIAL — consistent with fvl. §17's general investigation duty, but the specific journaling obligation generated in practice exceeds the permissive formulation of the veileder statement. Finding: Process Inflation Findings, KRAV 6 av 18. **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT; the statutory basis for the specific journaling obligation as a functional mandate is PARTIAL **CATEGORY ERROR:** NO **SCALE FLAG:** NO — not independently flagged as a volume driver, but contributes to cumulative [D] apparatus burden **PURPOSE:** INTERNAL CONTROL — transcription of verbal declarations serves the system's evidentiary and audit-trail needs. The user's application proceeds regardless of whether verbal statements are transcribed. **BURDEN DESCRIPTION:** In offices relying substantially on direct client contact, every verbal declaration must be transcribed to a journal note. The caseworker must determine what constitutes a declaration, transcribe it accurately, and file it appropriately during or after each client interaction. The volume of this obligation is proportional to the volume of verbal interaction. No circular framework governs the trigger conditions, required detail, or filing format. **KILL LIST CLASSIFICATION:** Category C — Clarification. The veileder uses "kan" (may) — explicitly permissive in form. The room for maneuver needs to be made explicit to prevent shadow binding: the veileder states one acceptable evidentiary method, not the only permissible method, and the choice of documentation form is a professional judgment matter. **TRANSACTION COST CATEGORY:** Documentation Inflation

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REQUIREMENT ID: §18-7 **PROVISION TEXT:** Advice and guidance given in connection with granting or denying other social services must be mentioned in the decision letter (innvilgelsesvedtaket eller avslaget). **SOURCE INSTRUMENT:** Veileder — *Veileder til sosialtjenesteloven §17*, applied to §18 **CIRCULAR AUTHORITY:** ABSENT — this requirement does not appear in the §18 circular. It derives from a §17 veileder applied cross-provision. Consequence: caseworkers face a content specification for §18 decision letters that the §18 circular does not address. **LEGAL AUTHORITY:** PARTIAL — §18 contains no provision requiring mention of §17 services in §18 decision letters. Partial authority may derive from §17 and fvl. §§24–25, but these do not constitute §18 authority. Finding: Process Inflation Findings, KRAV 7 av 18. **DOUBLE AUTHORITY GAP:** YES **CATEGORY ERROR:** NO (§17 and §18 are both within STL; this is a cross-provision attribution, not a different legal domain) **SCALE FLAG:** PARTIAL — part of the broader [D] documentation apparatus; Anchor Document flags this pattern as the empirically dominant failure mode **PURPOSE:** INTERNAL CONTROL — ensuring §17 advice is mentioned in §18 decisions serves administrative traceability and cross-provision record completeness, not the user's substantive outcome **BURDEN DESCRIPTION:** For every §18 decision in which §17

advice was provided, the caseworker must cross-reference service records, identify what advice was given, and incorporate explicit mention in the decision letter. This creates a cross-provision documentation integration step that has no guidance in the §18 circular. The caseworker complies with a decision-letter specification that the primary normative instrument governing their §18 work does not address. **KILL LIST CLASSIFICATION:** Category B — Status Change. The veileder uses "skal omtales" — imperative language without §18 binding authority. The obligation should be reformulated to permissive language to restore professional discretion on the content and structure of decision letters under §18. **TRANSACTION COST CATEGORY:** Documentation Inflation; Reporting Overhead

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REQUIREMENT ID: §18-8 **PROVISION TEXT:** The NAV office must independently ensure that the case is sufficiently investigated and that residence status is documented in cases where lawful residence in Norway is an entry criterion for services. **SOURCE INSTRUMENT:** Veileder — *Veileder for Nav-kontoret ved vurdering av lovlig opphold for EØS-borgere juni 2025* **CIRCULAR AUTHORITY:** ABSENT — the §18 circular references lawful residence as a general condition but does not specify an independent documentation obligation. Consequence: caseworkers face a specialist legal investigation obligation without circular guidance. **LEGAL AUTHORITY:** PARTIAL — the residence condition derives from §2, not §18 itself. The specific independent documentation obligation has no express basis in §18. Finding: Process Inflation Findings, KRAV 8 av 18. **DOUBLE AUTHORITY GAP:** YES **CATEGORY ERROR:** NO **SCALE FLAG:** YES — Anchor Document, Requirement A-2 (EØS residence assessment, Mechanism [K]): explicitly flagged as a latent volume driver of "potentially very high severity." Small municipalities encounter EØS cases so rarely that competence cannot be sustained, yet the obligation is stated in mandatory terms. The absence of circular authority means the scale burden operates entirely without regulatory foundation. **PURPOSE:** MIXED — Primary: internal control (the independent responsibility and documentation emphasis serves supervisory accountability). Secondary: user need (correct legal assessment of eligibility) **BURDEN DESCRIPTION:** For every case involving an EØS citizen, the caseworker must investigate residence status independently, assess the applicable EØS immigration basis, gather supporting evidence, and produce a documented record demonstrating compliance. This requires specialist competence in EØS immigration directives that cannot be sustained without a regular flow of such cases. The Anchor Document confirms this as a [K] mechanism: competence degrades in low-volume environments, and the structural response (intermunicipal specialist access) does not address the documentation obligation which falls on all caseworkers. The obligation operates entirely outside the circular framework. **KILL LIST CLASSIFICATION:** Category C — Clarification. The substantive obligation to assess residence has a legal basis (§2). The documentation specification and independence requirement in the veileder needs clarification of scope: what level of investigation discharges the obligation in typical cases, what alternatives exist (including referral to specialist capacity), and whether simplified documentary standards apply for straightforward cases. **TRANSACTION COST CATEGORY:** Documentation Inflation; Structural Disproportionality

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REQUIREMENT ID: §18-9 **PROVISION TEXT:** The main principle for processing applications for economic assistance is that concrete and individual assessments must be conducted of the need for assistance, the amount of assistance, and the form of assistance. **SOURCE INSTRUMENT:** Circular — Rundskriv 35 §18, seksjon 4.18 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — directly implied by the open normative standard of §18 and confirmed by authoritative interpretations **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — Anchor Document section 1c: "municipalities default to standard rates precisely because they lack the repeated practice to make individualized calculations confidently." Empirical compliance is volume-sensitive even though the formal obligation is scale-neutral. Flag for manual verification per Anchor Document. **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. This is the core substantive obligation of §18. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §18-10 **PROVISION TEXT:** The NAV office must conduct an assessment of the service recipient's overall situation, taking account of income and income opportunities, necessary expenses, and personal circumstances. **SOURCE INSTRUMENT:** Circular — Rundskriv 35 §18 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — authoritative interpretation of §18 confirmed by Sivilombudet **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — same finding as §18-9; practical discretionary assessment capacity is volume-sensitive in small offices (Anchor Document, section 1c) **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §18-11 **PROVISION TEXT:** The NAV office must investigate the need for assistance in collaboration with the person concerned. **SOURCE INSTRUMENT:** Circular — Rundskriv 35 §18 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — grounded in §18 read with fvl. §17; reflects standard of adequate investigation and party participation **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §18-12 **PROVISION TEXT:** In an emergency situation, the application must be assessed quickly — often the same day it is received — and the information required must be limited to what is relevant to the specific situation. **SOURCE INSTRUMENT:** Circular — Rundskriv 35 §18, seksjon 4.18.1.7 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — the general principle of rapid emergency assessment is grounded in §18. The "often same day" formulation is practical guidance (Process Inflation Findings: "rather than a strict mandate") **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN**

DESCRIPTION: No transaction cost burden identified. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §18-13 **PROVISION TEXT:** If the service recipient has children, special consideration must be given to their needs in all assessments that are conducted. **SOURCE INSTRUMENT:** Circular — Rundskriv 35 §18 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — substantive weighting obligation grounded in §18, Grunnloven §104, and Barnekonvensjonen. Classified as SUBSTANTIVE LEGAL OBLIGATION in Process Inflation Findings. **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** YES — Anchor Document, Cluster 3 (Child-Perspective Documentation Cluster): the obligation to give special consideration to children's needs is confirmed as a volume-sensitive domain with [K] and [S] mechanisms, documented in 15+ municipalities. Note: the scale impact attaches primarily to the documentation obligations layered onto this substantive requirement (§18-3, §18-4) rather than to the substantive obligation itself. **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. The substantive weighting obligation directly protects children's interests. The scale-related compliance burden attaches to the documentation specifications in §18-3 and §18-4, not to this substantive obligation. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §18-14 **PROVISION TEXT:** The NAV office must conduct a thorough mapping of the service recipient's overall situation and gather the information necessary in the case. **SOURCE INSTRUMENT:** Circular — Rundskriv 35 §18 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — directly reflects the adequate investigation duty under fvl. §17 **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — the substantive mapping obligation is scale-neutral. However, the documentation specifications layered onto it from veiledere — requiring not merely that mapping occurs but that a reviewable formal record is produced — contribute to the [D] documentation apparatus that is the empirically dominant volume driver (55+ findings in Anchor Document). The circular provides authority for the substantive obligation; the documentation specifics generating the transaction cost derive from the veileder layer. **PURPOSE:** MIXED — Primary: user need (thorough investigation ensures the correct benefit). Secondary: internal control (the documentation specifications transform the investigation into an archivable record for supervisory review) **BURDEN DESCRIPTION:** The substantive mapping obligation generates no transaction cost beyond what lawful case assessment requires. The documentation specifications attached in the veileder layer impose a conversion burden: transforming relational knowledge into a formal kartlegging document reviewable by supervisors. The Anchor Document's core finding confirms this is the dominant failure mode: "caseworkers knew more about the users' situations than the journals reflected." The documentation specifications fall partially outside the circular framework and should be separately addressed. **KILL LIST CLASSIFICATION:** Category C — Clarification. The substantive mapping obligation has full authority. The room for maneuver on documentation form and depth — which is currently being interpreted by supervisors as requiring formal written kartlegging records in all cases — needs to be made

explicit to reduce shadow binding from the veileder layer. Clarification should confirm that the professional judgment of a caseworker who demonstrably knows the user's situation discharges the substantive obligation even absent formal written records. **TRANSACTION COST CATEGORY:** Documentation Inflation (for documentation specifics from veileder layer)

REQUIREMENT ID: §18-15 **PROVISION TEXT:** The NAV office should initially in the mapping process seek to clarify how long the user will need assistance from NAV. **SOURCE INSTRUMENT:** Veileder — *Veileder økonomisk stønad 2022* **CIRCULAR AUTHORITY:** ABSENT — not addressed in the §18 circular. Caseworkers must comply with a sequencing specification that the primary normative instrument governing their intake work does not address. **LEGAL AUTHORITY:** PARTIAL — consistent with self-sufficiency goals in §18 but stated in the veileder as a methodological recommendation without express statutory anchor as a mandatory intake step. Finding: Process Inflation Findings, KRAV 15 av 18. **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT; statutory authority PARTIAL **CATEGORY ERROR:** NO **SCALE FLAG:** NO — not independently flagged as a volume driver. Individually modest but adds to cumulative procedural burden. **PURPOSE:** INTERNAL CONTROL — clarifying expected duration at intake serves case management planning and administrative efficiency within the system, not the user's immediate substantive assessment. **BURDEN DESCRIPTION:** At the outset of every assessment, caseworkers must address and record the expected duration of need — a prospective forecasting step added to the intake process before the substantive assessment is complete. This requires a judgment the caseworker may not yet be able to make reliably. The obligation has no circular authority: caseworkers comply with a sequencing specification that the primary normative instrument governing their intake work does not address. **KILL LIST CLASSIFICATION:** Category C — Clarification. The veileder already uses "bør" (should) — permissive in form. The room for maneuver needs to be made explicit: this is a recommended sequencing approach, not a mandatory intake step, and the timing and method of duration assessment is a professional judgment matter within the overall individualized assessment. **TRANSACTION COST CATEGORY:** Procedural Duplication (adds sequencing step without legal basis)

REQUIREMENT ID: §18-16 **PROVISION TEXT:** The NAV office must make a concrete and individual assessment of how the gathered information should be documented. **SOURCE INSTRUMENT:** Veileder — *Veileder økonomisk stønad 2022* **CIRCULAR AUTHORITY:** ABSENT — not addressed in the §18 circular. Caseworkers must comply with a meta-documentation obligation that the primary normative instrument governing their work does not acknowledge. **LEGAL AUTHORITY:** PARTIAL — the investigation duty and individualized assessment in §18 support requiring individualized assessments, but mandating a discrete meta-procedural step of assessing how to document information exceeds any identifiable statutory anchor. Finding: Process Inflation Findings, KRAV 16 av 18. **DOUBLE AUTHORITY GAP:** YES **CATEGORY ERROR:** NO **SCALE FLAG:** YES — part of the [D] documentation apparatus that is the empirically dominant volume driver. In small offices, cumulative documentation obligations fall disproportionately on the NAV leader

(Anchor Document, Cluster 2). This meta-documentation layer adds to that cumulative burden without circular authority, meaning it falls entirely outside the regulatory foundation the circular provides. **PURPOSE:** INTERNAL CONTROL — requiring assessment of documentation methodology serves the system's record-keeping and supervisory compliance needs. It does not affect the substantive quality of the benefit determination. **BURDEN DESCRIPTION:** For each case, caseworkers must make and record a meta-decision about how gathered information should be documented — a reflexive procedural layer applied to the documentation apparatus rather than to the substance of the case. The requirement is circular in structure (it requires documentation of a documentation decision) and generates administrative overhead with no benefit to the user. There is no circular guidance on trigger conditions, required detail, or format. Caseworkers comply with an obligation that the primary normative instrument governing their work does not address. **KILL LIST CLASSIFICATION:** Category B — Status Change. The veileder uses "må gjøre" — imperative language without binding authority under §18. This meta-documentation obligation should be reformulated to permissive language or removed from the normative framework entirely, restoring professional judgment on documentation methodology. **TRANSACTION COST CATEGORY:** Documentation Inflation; Combined Burden (adds to cumulative documentation apparatus)

REQUIREMENT ID: §18-17 **PROVISION TEXT:** The NAV office must map out the actual expenses that the individual has. **SOURCE INSTRUMENT:** Veileder — *Veileder økonomisk stønad 2022* **CIRCULAR AUTHORITY:** PARTIAL — expense assessment is clearly implied in the circular's substantive framework for §18; the specific mapping obligation as a discrete procedural step derives from the veileder **LEGAL AUTHORITY:** YES — logically necessary as a factual input to assess the open normative standard of "forsvarlig livsopphold" for individual cases. Finding: Process Inflation Findings, KRAV 17 av 18. **DOUBLE AUTHORITY GAP:** NO — partial circular authority combined with full statutory authority prevents double gap **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — contributes to cumulative [D] documentation apparatus burden; individually modest **PURPOSE:** USER NEED — mapping actual expenses is necessary to calculate the correct benefit amount **BURDEN DESCRIPTION:** No transaction cost burden identified. Expense mapping is substantively necessary and legally grounded. The veileder specification adds no materially new obligation beyond what is inherent in individualized §18 assessment. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §18-18 **PROVISION TEXT:** It is important that the NAV office concretely and individually assesses which activities are appropriate. **SOURCE INSTRUMENT:** Kommunebrev 2025 (Kommunebrev), applied to §18 **CIRCULAR AUTHORITY:** ABSENT — the §18 circular does not address activity assessment as part of §18 processing. Caseworkers face a complex substantive obligation without circular mediation or guidance. Consequence: the obligation operates as a compliance requirement imposed by a Kommunebrev without any framework provided by the primary normative instrument. **LEGAL AUTHORITY:** PARTIAL — the self-sufficiency goal in §18 provides indirect support.

However, formal activity condition assessment belongs structurally to §20a (vilkår om aktivitet) rather than §18; the Kommunebrev application to §18 represents a cross-provision attribution gap within STL. Finding: Process Inflation Findings, KRAV 18 av 18 (classified SUBSTANTIVE LEGAL OBLIGATION in that analysis). **DOUBLE AUTHORITY GAP:** YES — circular authority ABSENT; statutory authority under §18 PARTIAL (with structural misattribution to §20a) **CATEGORY ERROR:** NO — §18 and §20a are both within STL; this is a cross-provision misattribution, not a different legal domain **SCALE FLAG:** YES — the concrete and individual assessment obligation applied to §18 through a Kommunebrev creates a complex discretionary judgment demand on generalist caseworkers without volume support. The Anchor Document's Cluster 1 (Debt Counseling Compliance Stack) is structurally analogous: obligations applied cumulatively without volume support generate simultaneous [K], [P], and [D] failures. Any scale burden imposed by this Kommunebrev obligation falls entirely outside the regulatory foundation the circular provides. **PURPOSE:** MIXED — Primary: user need (the substantive activity assessment shapes the conditions of assistance and directly affects the user). Secondary: internal control (the Kommunebrev framing and source creates a reporting and accountability documentation demand) **BURDEN DESCRIPTION:** Caseworkers must conduct and document a concrete individual assessment of appropriate activities as part of §18 processing. This requires both a substantive judgment about the user's situation and a documented record demonstrating compliance with the Kommunebrev. The proper procedural framework for activity conditions is §20a, which has its own structure; applying the obligation to §18 through a Kommunebrev means caseworkers must discharge an activity assessment obligation without the procedural framework that §20a would provide. No circular authority exists under §18 for this obligation. The caseworker complies with a requirement that the primary normative instrument governing their §18 work does not address and that may conflict with the structural logic of the §20a framework. **KILL LIST CLASSIFICATION:** Category B — Status Change. The Kommunebrev uses normatively charged language ("er det viktig at") that, while not technically imperative, generates shadow-binding compliance pressure without §18 circular authority. The obligation should be reformulated to clarify that activity assessment in the §18 context is a permissive professional tool (consistent with self-sufficiency goals), not a procedural requirement, and that formal activity condition setting belongs to the §20a framework. **TRANSACTION COST CATEGORY:** Combined Burden (substantive assessment demand + documentation demand without circular authority)

CLOSING COMPARATIVE NOTE

Analytical synthesis for main report and Kill List deliverables

Requirements identified starting from the Process Inflation Findings: 18

Requirements visible starting from the circular alone: 8 fully visible (§18-1, §18-2, §18-9, §18-10, §18-11, §18-12, §18-13, §18-14); 1 partially visible (§18-17). Total clearly visible: 8. Not visible: 9 (§18-3, §18-4, §18-5, §18-6, §18-7, §18-8, §18-15, §18-16, §18-18).

The circular, used alone, reveals 44 percent of the operative normative load. A practitioner or analyst relying on the circular as their primary reference would be unaware of more than half the compliance obligations that caseworkers face in practice under §18.

Double authority gaps: 8 requirements present double authority gaps (§18-3, §18-4, §18-5, §18-6, §18-7, §18-8, §18-15, §18-16, §18-18 — noting §18-18 has double gap, and §18-6 is borderline; conservatively: 8 confirmed). Every double authority gap involves a sub-legal instrument — seven derive from veiledere, one from a Kommunebrev. None have their own circular anchor.

Category errors: 0. No requirement in this §18 analysis derives from a legal domain outside the Social Services Act. The cross-provision misattribution of PROC-REQ-18.11/§18-18 (properly belonging to §20a rather than §18) is an internal STL attribution gap rather than a cross-domain category error by the methodology's definition.

Kill List breakdown:

Category	Count	Requirements
Category A — Removal	0	—
Category B — Status Change	5	§18-3, §18-4, §18-7, §18-16, §18-18
Category C — Clarification	5	§18-5, §18-6, §18-8, §18-14, §18-15
No Kill List Action	8	§18-1, §18-2, §18-9, §18-10, §18-11, §18-12, §18-13, §18-17

Structural observation on Kill List composition: The absence of Category A items is analytically significant. It reflects the fact that §18 requirements, unlike those in domains more closely entangled with labor law or HMS frameworks, remain within the social services legal architecture even when they lack §18-specific authority. The Kill List is dominated by Category B (imperative language in non-binding sub-legal instruments) and Category C (permissive language creating shadow binding or unclear room for maneuver). This profile indicates that the primary intervention needed is normative register correction — not removal of substantively valid obligations, but recalibration of the binding force attributed to guidance instruments.

Transaction cost categories by frequency:

Category	Frequency (approximate)
Documentation Inflation	8 occurrences
Structural Disproportionality	3 occurrences

Combined Burden	2 occurrences
Reporting Overhead	1 occurrence
Procedural Duplication	1 occurrence
No Transaction Cost Identified	8 requirements

Documentation Inflation is the primary transaction cost category by a wide margin — appearing in every Kill List item. This is fully consistent with the Anchor Document's finding that [D] (Documentation Apparatus) is the empirically dominant volume driver across the supervision record, appearing in approximately 55 findings. The §18 sludge audit confirms that this dominance is structurally produced: documentation obligations pile up in the sub-legal normative layer precisely because they are invisible from the circular, operate without circular mediation, and therefore generate compliance burden without regulatory foundation.

The three Structural Disproportionality flags (§18-3, §18-4, §18-8) are analytically significant because they identify obligations where the circular authority gap compounds the scale impact: not only is the obligation unsupported by the circular framework, but it also presupposes organizational capacity or case-volume thresholds that small municipalities cannot independently meet. These three requirements are the strongest candidates for priority action in the Kill List process, as they impose the greatest burden without the greatest legal justification.

SLUDGE AUDIT — § 19 STØNAD I SÆRLIGE TILFELLER

Full Analytical Output — Steps 1–6 with Preliminary and Closing Notes

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PRELIMINARY METHODOLOGICAL NOTE

Quantitative comparison: The Process Inflation Findings enumerate **15 requirements** for § 19. Starting from the circular paragraph alone (§§ 4.19.1 through 4.19.1.4 of R-35), an analyst would identify **5 requirements**. This yields a **3:1 visibility ratio** — two-thirds of the normative burden imposed on this paragraph is structurally invisible from the circular. This asymmetry is the core justification for using the Process Inflation Findings as the primary reference document rather than the circular.

Requirements visible from the circular (5): Req 1, Req 2, Req 3, Req 4, Req 5 — all located in §§ 4.19.1–4.19.1.4 of R-35.

Requirements with no textual presence in the circular (10):

Requirement	Source Instrument	Instrument Type
Req 6	Kommunebrev 2025	(a) Kommunebrev
Req 7	Veileder om økonomisk stønad etter sosialtjenesteloven	(b) Veileder
Req 8	Veileder om økonomisk stønad etter sosialtjenesteloven	(b) Veileder
Req 9	Veileder om økonomisk stønad etter sosialtjenesteloven 2022	(b) Veileder
Req 10	Veileder om økonomisk stønad etter sosialtjenesteloven 2022	(b) Veileder
Req 11	Barnets beste — veileder	(b) Veileder (specialized child welfare guidance)
Req 12	Barnets beste — veileder	(b) Veileder (specialized child welfare guidance)

Req 13	Veileder til sosialtjenesteloven § 17	(b) Veileder (cross-section, imported from § 17 domain)
Req 14	Veileder til sosialtjenesteloven § 17	(b) Veileder (cross-section, imported from § 17 domain)
Req 15	Veileder for Nav-kontoret ved vurdering av lovlig opphold for EØS-borgere	(b) Veileder (specialized EEA/immigration guidance)

Of the 10 invisible requirements: 1 derives from a Kommunebrev; 9 derive from veileders — of which 2 are specialized child welfare guidance, 2 are cross-section intake guidance imported from the § 17 domain, and 1 is specialized EEA residence guidance belonging to a distinct legal domain. None derive from standard documents (c), guidance attached to standards (d), or other sub-legal instruments.

This source profile carries forward into Step 2: the invisibility is not random — it reflects a layered accumulation of obligations from guidance instruments that operate at a sub-circular level, many of which add content requirements that § 19's permissive text does not contain.

STEP 1 — IDENTIFICATION OF ALL REQUIREMENTS

#	Obligation (as expressed in Process Inflation Findings)	Source Instrument	Explicit / Implicit	Visible from Circular
Req 1	Aid under § 19 shall contribute to realizing the law's objectives for the individual, after a concrete and individual assessment	R-35, § 4.19.1	Explicit	YES
Req 2	If aid under § 18 is denied, it shall be assessed whether aid under § 19 can be granted	R-35, § 4.19.1	Explicit	YES
Req 3	In assessing whether § 19 aid shall be granted, account shall be taken of whether the recipient's life situation has become, or is at risk of becoming, so difficult that they cannot move forward without help	R-35, § 4.19.1	Explicit	YES
Req 4	The recipient's needs must be assessed from the current situation, and economic assistance can be granted until other	R-35, § 4.19.1.3	Explicit	YES

	self-sufficiency options become available			
Req 5	The NAV office must follow the case processing requirements of this law, the Public Administration Act, and unwritten norms of good administrative practice	R-35, § 4.19.1.4	Explicit	YES
Req 6	The NAV office should assess whether long-term economic support recipients may have a need for aid for special purposes under § 19	Kommunebrev 2025	Explicit	NO
Req 7	It shall always be assessed whether aid can be granted under this provision	Veileder om økonomisk stønad etter sosialtjenesteloven	Explicit	NO
Req 8	The NAV office should consider granting aid under § 19 when the user is in a difficult life situation	Veileder om økonomisk stønad etter sosialtjenesteloven	Explicit (soft: bør)	NO
Req 9	Information must exist in the case file documenting whether the applicant requires help	Veileder om økonomisk stønad etter sosialtjenesteloven 2022	Explicit	NO
Req 10	The NAV office must conduct a concrete and individual assessment of how case information shall be documented	Veileder om økonomisk stønad etter sosialtjenesteloven 2022	Explicit	NO
Req 11	If a decision outcome means the child's best interests do not prevail, this must be specifically and separately justified in writing to ensure auditability and the child's legal security	Barnets beste — veileder	Explicit	NO
Req 12	Assessments of the child's best interests must be documented so that others can see what assessments were made and verify them	Barnets beste — veileder	Explicit	NO
Req 13	The NAV office has a duty to record oral applications in writing	Veileder til sosialtjenesteloven § 17	Explicit	NO

Req 14	The date of application (time of written submission or when need was reported) must appear in the case file	Veileder til sosialtjenesteloven § 17	Explicit	NO
Req 15	EEA citizens must document lawful residence, or permanent right of residence, at the time of application for social services	Veileder for Nav-kontoret ved vurdering av lovlig opphold for EØS-borgere	Explicit	NO

STEP 2 — LEGAL AUTHORITY CHECK

Req 1

- *Circular authority:* YES — expressly stated at § 4.19.1.
- *Statutory authority:* YES — concrete and individual assessment is the operational core of § 19's "kan" power and is implied by the open normative standard itself.
- *Double authority gap:* NO.
- *Category error:* NO.

Req 2

- *Circular authority:* YES — § 4.19.1 states "Hvis stønad til livsopphold avslås, skal det vurderes om stønad i særlig tilfeller kan innvilges."
- *Statutory authority:* PARTIAL. Finding PROC-REQ 19.2 identifies a legal gap: § 19 establishes a purely permissive power ("kan") with no mandatory procedural duty to consider that power upon a § 18 refusal. The circular's use of "skal det vurderes" converts the legislature's whether-discretion into an obligatory procedural track. The statutory anchor for the substantive power exists; the procedural obligation to always activate it does not.
- *Double authority gap:* NO (circular authority is present). However, the circular itself exceeds statutory authority in mandatory framing — a within-circular authority inflation.
- *Category error:* NO.

Req 3

- *Circular authority:* YES — § 4.19.1 directly states the life-situation threshold.
- *Statutory authority:* YES — "trenger det for å kunne overvinne eller tilpasse seg en vanskelig livssituasjon" in § 19 directly supports this substantive factor.
- *Double authority gap:* NO.
- *Category error:* NO.

Req 4

- *Circular authority:* YES — § 4.19.1.3 contains this temporal framing.

- *Statutory authority:* PARTIAL. Finding PROC-REQ 19.4 identifies that § 19 ("trenger det") provides no explicit instruction on temporal framing of need assessment, and that the circular eliminates the authority's freedom to weigh unutilized future resources. The substantive condition exists; the specific temporal framing that brackets future self-sufficiency does not.
- *Double authority gap:* NO (circular authority present). However, like Req 2, the circular elaboration exceeds what the statute specifies — a within-circular authority inflation.
- *Category error:* NO.

Req 5

- *Circular authority:* YES — § 4.19.1.4 restates these obligations.
- *Statutory authority:* YES — this is a restatement of independent legal obligations with clear anchors in sosialtjenesteloven, forvaltningsloven, and general administrative law. Process Inflation finding for PROC-REQ 19.5 confirms: no gap, HAS_HJEMMEL.
- *Double authority gap:* NO.
- *Category error:* NO.

Req 6

- *Circular authority:* NO — the Kommunebrev 2025 is a separate instrument, not the circular. The circular contains no proactive review obligation for long-term recipients.
- *Statutory authority:* PARTIAL — § 19 does not distinguish recipient categories or create a proactive review duty. The soft "bør" language in the Kommunebrev avoids direct overriding of discretion, but the instruction has no statutory anchor for the proactive review framing.
- *Double authority gap:* YES — circular authority absent; statutory authority partial. The burden of proactive portfolio review this imposes operates entirely outside the circular framework.
- *Category error:* NO.

Req 7

- *Circular authority:* NO — this requirement derives from the Veileder, not the circular. The circular does not contain a universal "always assess" obligation.
- *Statutory authority:* NO. Finding PROC-REQ 19.7 identifies that § 19 establishes a purely permissive power ("kan") with no mandatory assessment duty; the veileder converts this into an obligatory procedural track, overriding case-by-case discretion.
- *Double authority gap:* YES — circular authority absent; statutory authority absent. This is a clear double authority gap. A caseworker complying with this requirement is fulfilling an obligation that neither the circular nor the statute supports in its mandatory form.
- *Category error:* NO.

Req 8

- *Circular authority:* NO — derives from the Veileder, not the circular.

- *Statutory authority:* YES — Process Inflation finding for PROC-REQ 19.8 confirms HAS_HJEMMEL; the recommendation is grounded in § 19's own statutory language and does not override the municipality's whether-discretion. The soft "bør" framing preserves local discretion.
- *Double authority gap:* NO — despite absent circular authority, the statutory anchor is present and the soft framing avoids authority inflation.
- *Category error:* NO.

Req 9

- *Circular authority:* NO — derives from Veileder om økonomisk stønad 2022, not the circular.
- *Statutory authority:* YES — Process Inflation finding for DOC-REQ 4.19.1.1 confirms HAS_HJEMMEL; this is a logical procedural corollary of the statutory condition "trenger det" and aligns with the general investigation duty in forvaltningsloven § 17 without overriding open evidence-discretion.
- *Double authority gap:* NO — despite absent circular authority, the statutory anchor is present and independently grounded.
- *Category error:* NO.

Req 10

- *Circular authority:* NO — derives from Veileder om økonomisk stønad 2022, not the circular.
- *Statutory authority:* NO — Process Inflation finding for DOC-REQ 4.19.1.2 identifies that § 19 contains no provision on documentation methodology, and that general administrative law does not explicitly mandate an individual assessment of how documentation is structured. The meta-documentation obligation is an addition without statutory support.
- *Double authority gap:* YES — circular authority absent; statutory authority absent. A caseworker complying with this requirement is performing an administrative task that neither the circular nor the statute supports.
- *Category error:* NO — the requirement belongs to the social services administrative domain but exceeds its legal foundations.

Req 11

- *Circular authority:* NO — derives from Barnets beste — veileder, not the circular. § 19 in the circular contains no reference to children or child-specific documentation requirements.
- *Statutory authority:* PARTIAL — Process Inflation finding for DOC-REQ 4.19.1.3 identifies that § 19 leaves the form and content of decisions open and contains no specific reference to children. The barnets beste principle derives from the UN Convention on the Rights of the Child as interpreted through Norwegian administrative law, not from § 19 itself. The principle has independent legal standing; the specific written justification requirement as a form-obligation is added by the veileder without statutory anchor in § 19.

- *Double authority gap:* YES — circular authority absent; statutory authority partial. The specific written justification form-obligation operates outside both the circular and § 19.
- *Category error:* PARTIAL — the barnets beste principle derives from international child welfare law (CRC) and is imported into social services cases through interpretive practice. While not a full category error (the principle is now recognized across Norwegian administrative law), the specific documentation obligation it generates in relation to § 19 is extrinsic to the social services framework.

Req 12

- *Circular authority:* NO — derives from Barnets beste — veileder.
- *Statutory authority:* PARTIAL — Process Inflation finding for DOC-REQ 4.19.1.4 identifies that § 19's permissive text lacks any requirement to conduct or document a specific child welfare assessment. The documentation obligation is an extrinsic content requirement added by the veileder.
- *Double authority gap:* YES — circular authority absent; statutory authority partial.
- *Category error:* PARTIAL — same reasoning as Req 11. The derivation from CRC/barnets beste doctrine is extrinsic to § 19 but not a full category error in the Norwegian administrative law context.

Req 13

- *Circular authority:* NO — derives from Veileder til sosialtjenesteloven § 17, cross-applied to § 19 context.
- *Statutory authority:* YES — Process Inflation finding for DOC-REQ 4.19.1.5 confirms HAS_HJEMMEL; this is a universally applicable intake obligation rooted independently in sosialtjenesteloven § 17 and general administrative principles. Its absence from the § 19 circular does not create a gap because its statutory basis is independent.
- *Double authority gap:* NO.
- *Category error:* NO — but note that this requirement is imported from the § 17 veileder into the § 19 framework, which creates a question of whether its domestic statutory anchor is § 17 or a more general administrative law principle.

Req 14

- *Circular authority:* NO — derives from Veileder til sosialtjenesteloven § 17.
- *Statutory authority:* YES — Process Inflation finding for DOC-REQ 4.19.1.6 confirms HAS_HJEMMEL; this is a universal administrative record-keeping rule with clear independent statutory basis.
- *Double authority gap:* NO.
- *Category error:* NO.

Req 15

- *Circular authority:* NO — derives from Veileder for Nav-kontoret ved vurdering av lovlig opphold for EØS-borgere.

- *Statutory authority:* NO in relation to § 19. Process Inflation finding for DOC-REQ 4.19.1.7 identifies that § 19 imposes no nationality- or residence-based evidentiary burden for access; the circular converts the open factual gateway into a mandatory fixed documentation criterion for a defined population. The operative legal framework for the residence documentation requirement derives from EEA free movement law and Norwegian immigration law, not sosialtjenesteloven.
- *Double authority gap:* YES — circular authority absent; statutory authority absent in relation to § 19.
- *Category error:* YES — the requirement belongs to EEA/immigration law, not the social services framework. Its application as a gatekeeping mechanism for access to § 19 constitutes a category error: an obligation from a different legal domain is operating as an access condition to a social services provision.

STEP 3 — SCALE AND PROPORTIONALITY CHECK

Req 1

- *Scale flag:* NO — Volume Driver Findings classify the § 19 discretionary assessment as scale-neutral (Set A). The requirement reflects basic social work competence applicable regardless of office size.
- *Note:* The Volume Driver memo flags an Alstahaug finding suggesting that very small offices with low encounter frequency may struggle to maintain individualized reasoning in practice. However, the memo explicitly characterizes this as a thin, potentially acute finding and preserves the scale-neutral classification. No scale flag applied at this stage.

Req 2

- *Scale flag:* PARTIAL — The sequential two-stage assessment obligation (§ 18 denial → § 19 assessment) is not separately flagged as scale-sensitive in the Volume Driver Findings, but it is structurally connected to the Alstahaug finding (§ 19 discretionary reasoning, mechanisms [S]+[K]). Small offices with generalist workforces and low case volumes may lack practice frequency to conduct genuinely individualized § 19 assessments after every § 18 denial. The Volume Driver memo notes this as an uncertainty requiring verification. Combined with the finding that this requirement lacks statutory authority in its mandatory form (Step 2), any scale-related burden it imposes is doubly unsupported.
- *Anchor source:* Volume Driver Findings, Section 1a (§ 19 Requirement 1 discussion, Alstahaug finding) and Section 4, Tier Uncertain (§ 19 discretionary reasoning, S+K mechanisms).

Req 3

- *Scale flag:* NO — substantive legal standard applicable regardless of office size.

Req 4

- *Scale flag:* NO — Volume Driver Findings classify this as scale-neutral. However, the obligation to document that future income possibilities have been explicitly bracketed from the assessment does generate incremental documentation overhead (see Step 5).

Req 5

- *Scale flag:* NO — general case processing compliance is not scale-sensitive.

Req 6

- *Scale flag:* YES — the proactive review of all long-term recipients constitutes a portfolio-level administrative task. The Volume Driver Findings' [D] Documentation Apparatus mechanism (approximately 42% of all Set B findings) and [C] Coordination Infrastructure mechanism apply here: proactive portfolio review presupposes organizational capacity — time for systematic file review, a caseworker with bandwidth for non-case-triggered assessment work — that small offices operating at generalist capacity limits do not have. This requirement lacks circular authority (Step 2), meaning the scale-related burden it imposes is entirely unsupported by the circular framework.
- *Anchor source:* Volume Driver Findings, Section 2 (mechanism frequency, [D] dominance) and Section 3, Cluster 3 (Internal Control Infrastructure Stack — portfolio review requirements presupposing organizational differentiation small offices lack).

Req 7

- *Scale flag:* YES — the universal "always assess" obligation imposes a documentation obligation across every economic support case, not only upon § 18 denials. This is structurally connected to the [D] Documentation Apparatus and [P] Procedural Continuity mechanisms identified as dominant across the dataset. For small offices with generalist staff and high caseloads, a universal assessment obligation generates cumulative documentation overhead with every single case. This requirement lacks circular authority and statutory authority (Step 2), meaning the scale-related burden is entirely without regulatory foundation.
- *Anchor source:* Volume Driver Findings, Section 2 ([D] Documentation Apparatus, ~65 findings, ~42% of all set B findings; [P] Procedural Continuity, ~28 findings, ~18%); Section 3, Cluster 1 (§ 17 Documentation and Formalization Stack — parallels for universal procedural obligations).

Req 8

- *Scale flag:* NO — soft "bør" language avoids generating rigid compliance obligations, and the requirement has a statutory anchor. No scale pressure beyond normal case work.

Req 9

- *Scale flag:* NO — basic documentation of need is an inherent part of any valid assessment and imposes no disproportionate burden.

Req 10

- *Scale flag:* YES — a mandatory meta-assessment of documentation methodology is a structural overhead obligation that presupposes caseworkers have time and capacity for reflective administrative self-documentation alongside the substantive case assessment. Volume Driver Findings' [D] mechanism covers this type of administrative overhead. This requirement lacks both circular and statutory authority (Step 2), meaning the scale-related burden is entirely unsupported by the regulatory framework.
- *Anchor source:* Volume Driver Findings, Section 2 ([D] Documentation Apparatus as dominant mechanism); Section 5, Track A flags (sub-legal instruments adding documentation obligations not required by the statute).

Req 11

- *Scale flag:* PARTIAL — specific elevated written justification for child-interest overrule cases generates incremental documentation burden, especially in small generalist offices where caseworkers are unlikely to have specialized child welfare documentation skills. Volume Driver Findings, Section 4, Driver 5 ("Systematic child-perspective documentation," mechanisms [D]+[S], Tier 3) explicitly flags this category as generating compliance friction in small generalist offices. This requirement lacks circular authority and has only partial statutory authority in relation to § 19 (Step 2).
- *Anchor source:* Volume Driver Findings, Section 4, Driver 5 ("Systematic child-perspective documentation," confirmed in approximately 25 reports).

Req 12

- *Scale flag:* PARTIAL — same analytical basis as Req 11. Volume Driver Findings, Driver 5 applies. Documentation of barnets beste in every case involving children is a systematic documentation obligation that small generalist offices find difficult to embed without specialist support.
- *Anchor source:* Volume Driver Findings, Section 4, Driver 5.

Req 13

- *Scale flag:* NO — recording oral applications is an individual-case intake task with no disproportionate structural demands.

Req 14

- *Scale flag:* NO — recording application date is a minimal administrative act with no structural scale implications.

Req 15

- *Scale flag:* YES — EEA residence verification imposes a specialized legal gatekeeping task requiring knowledge of EU free movement law that generalist frontline workers in small NAV offices are structurally unlikely to possess. This creates a [S] Specialization bottleneck: when an EEA citizen presents at a small NAV

office, the caseworker must apply a legal framework (EEA free movement, EU Directive 2004/38) that is not their primary competence domain and which they may encounter too rarely to maintain reliable practice. This requirement lacks circular and statutory authority in relation to § 19 and constitutes a category error (Step 2); the scale-related burden it imposes is entirely without regulatory foundation in the social services framework.

- *Anchor source:* Volume Driver Findings, Section 2 ([S] Specialization, ~16 findings, ~10%); Section 3, Cluster 2 (Specialization and Competence Bottleneck — applicable by structural analogy to specialized legal knowledge requirements arising too rarely to sustain competence in small offices).

STEP 4 — PURPOSE CLASSIFICATION

Req 1 — **[USER NEED]** The concrete and individual assessment directly determines what aid the user receives and in what form. The language "bidra til å øke muligheten for å realisere lovens målsettinger for den enkelte" is user-outcome language. No internal control function is served by this requirement.

Req 2 — **[MIXED]** (primary: USER NEED; secondary: INTERNAL CONTROL) The sequential assessment step serves the user by creating a procedural safety net — ensuring that no § 18 denial closes the door on § 19 aid without consideration. However, the mandatory framing ("shall be assessed") also serves administrative auditability: it creates a visible, reviewable trace in the file showing that the § 19 gateway was not bypassed. The user protection function is primary; the audit function is secondary. The Process Inflation finding PROC-REQ 19.2 identifies the legal gap in converting the permissive into the obligatory.

Req 3 — **[USER NEED]** The life-situation threshold directly identifies the substantive condition that triggers eligibility. "Om tjenestemottakers livssituasjon er blitt, eller står i fare for å bli, så vanskelig" is pure eligibility-assessment language. No internal control function is served independently by this standard.

Req 4 — **[MIXED]** (primary: USER NEED; secondary: INTERNAL CONTROL) Assessing needs from the current situation protects the user from denial based on theoretical future self-sufficiency. However, the specific temporal framing — which eliminates the caseworker's discretion to weigh unutilized future resources — also constrains the authority's how-discretion in a way that facilitates consistent, auditable outcomes. The user protection element is primary; the consistency/auditability element is secondary. Process Inflation finding PROC-REQ 19.4 identifies the statutory gap in the mandatory temporal framing.

Req 5 — **[USER NEED]** Compliance with statutory case processing requirements, the Public Administration Act, and good administrative practice directly protects the user's procedural rights, access to appeal, and entitlement to a reasoned decision. This is a user-protective procedural obligation with no independent internal control function beyond what the law already mandates.

Req 6 — **[MIXED]** (primary: INTERNAL CONTROL; secondary: USER NEED) The proactive review of long-term recipients creates an administrative oversight obligation — the office must conduct a systematic portfolio-level review. The Kommunebrev 2025 instructs the office to perform a category-specific audit of its own caseload. The user benefit (identifying unmet § 19 needs) is real but secondary; the primary driver is an administrative oversight instruction directed at the office's internal caseload management. The language "bør... vurdere om personer som mottar" is a management-directed instruction, not a service-delivery standard.

Req 7 — **[INTERNAL CONTROL]** The universal "shall always be assessed" obligation in the Veileder creates a procedural audit trail requirement for every case — the caseworker must be able to demonstrate in the file that § 19 was actively considered, not merely that it was permissibly left unconsidered. This serves audit and supervisory review functions. It has no direct bearing on the user's case outcome: a case in which § 19 was not formally assessed can reach the same substantive result as one in which it was, as long as the underlying facts do not justify § 19 aid. The user benefit is fully captured by Req 3 (substantive threshold) and Req 2 (sequential trigger); the additional universal assessment obligation adds purely administrative overhead without changing case outcomes. Justified by language "skal alltid vurderes" — imperative and universal, serving documentability rather than the user.

Req 8 — **[USER NEED]** The soft recommendation to consider § 19 when a user is in a difficult life situation is an expression of the substantive purpose of the provision, restating § 19's own normative content in guidance form. The "bør" framing preserves discretion; the content is user-outcome oriented. Process Inflation finding PROC-REQ 19.8 confirms HAS_HJEMMEL with no override of discretion.

Req 9 — **[MIXED]** (primary: USER NEED; secondary: INTERNAL CONTROL) Documenting whether the applicant requires help is the evidentiary foundation for a lawful decision — it protects the user's right to a factually grounded assessment and enables a meaningful appeal. This is primary. The secondary function is auditability: the documentation also allows supervisors and appeals bodies to review whether the factual basis was adequate. Both functions are served simultaneously, and neither can clearly be called secondary without distortion.

Req 10 — **[INTERNAL CONTROL]** The meta-assessment of how documentation should be structured generates a layer of administrative self-reflection that serves no direct function in determining what the user receives. The user benefits from accurate documentation (Req 9), not from a separate documented exercise in deciding how that documentation should be organized. The language "NAV-kontoret må gjøre en konkret og individuell vurdering av hvordan opplysningene skal dokumenteres" is entirely directed at the office's internal process management — serving audit consistency, supervisory review, and quality control rather than the case outcome.

Req 11 — **[MIXED]** (primary: USER NEED — child's legal security; secondary: INTERNAL CONTROL — auditability) The specific written justification when a child's best interests are overruled serves the child's legal security by creating a reviewable record for appeal and klage. This is the stated primary purpose: "for å sikre etterprøvbarhet og barnets

rettssikkerhet." The etterprøvbarhet (auditability) function is explicitly stated as secondary — the justification exists to enable review. In this case the user (the child) and the internal control function are co-stated in the instrument language, but the child's legal protection is primary.

Req 12 — **[MIXED]** (primary: INTERNAL CONTROL; secondary: USER NEED) The documentation of barnets beste considerations "so that others can see what assessments were made and verify them" is framed in the language of oversight and auditability: "For at andre skal kunne se hvilke vurderinger som er gjort og ha mulighet for å etterprøve." The primary addressee is the reviewing body (statsforvalter, supervisor, appeals officer), not the user. The user benefit — that the assessment was actually conducted — is captured by the substantive requirement; the documentation adds an independent auditability layer. Internal control function is primary.

Req 13 — **[USER NEED]** The duty to record oral applications directly protects the user's access to the process: an unrecorded application can disappear without trace, denying the user a processing deadline, a reasoned decision, and a right to appeal. This is a user-access protection obligation.

Req 14 — **[MIXED]** (primary: USER NEED — appeal timelines; secondary: INTERNAL CONTROL — administrative record-keeping) Recording the application date is necessary for calculating statutory processing deadlines (forvaltningsloven § 11a) and the user's appeal timelines — directly protecting the user's procedural rights. However, the date record also serves internal administrative tracking and supervision purposes. The user-protective function is primary because the date's legal significance (deadline calculation) is binding and directly affects the user's substantive rights.

Req 15 — **[INTERNAL CONTROL]** (in relation to social services users) As classified in relation to social services users: the EEA residence documentation requirement functions as an access gatekeeping mechanism — it screens who can enter the assessment process — serving the administrative system's immigration compliance function. The obligation derives from EEA law, not from the user's need for assistance. For the social services user, the requirement creates a documentary barrier to accessing aid that has no basis in the logic of § 19. In the context of its home domain (EEA/immigration law), it serves a different legal purpose; classified against its social services function, it is an internal control instrument that serves the state's eligibility screening function, not the user's need for help.

STEP 5 — TRANSACTION COST CHARACTERIZATION

Req 1 — **[USER NEED]**: No transaction cost burden identified. The concrete and individual assessment is the substantive core of the case decision; it serves the user directly and imposes no additional administrative overhead beyond the casework itself.

Req 2 — **[MIXED]**: The two-stage sequential obligation demands that a caseworker, upon drafting any § 18 denial, immediately and formally consider whether § 19 aid is available. In practical terms: the caseworker must (a) identify that a § 18 denial triggers a § 19 duty, (b)

conduct a documented separate assessment of § 19 eligibility, and (c) produce a case note or decision rationale demonstrating that the assessment occurred, even where no § 19 conditions are present. This doubles the documentation load on every denial decision. For a small office processing, for example, 40–80 denials annually, the cumulative burden is substantial. This requirement has circular authority, so the transaction cost is within the normative framework — but the circular's mandatory framing exceeds its statutory authority and therefore generates procedural overhead without statutory warrant.

Req 4 — **[MIXED]**: The caseworker must explicitly document that the need assessment was framed from the current situation, bracketing future income possibilities. This creates an evidentiary obligation to show not only what the assessment concluded but how it was temporally framed — a documentation task that goes beyond recording the substantive outcome. In offices with limited time per case, this additional framing obligation consumes time for no user-outcome benefit beyond what the substantive assessment already achieves.

Req 6 — **[MIXED] / primary INTERNAL CONTROL**: The NAV office (at leadership level) must conduct a proactive portfolio review of all long-term recipients to identify potential § 19 needs. In concrete administrative terms: the manager or designated caseworker must (a) extract or identify the full list of long-term recipients, (b) review each file for indicators suggesting § 19-eligible needs, (c) record the result of this review, and (d) initiate contact or assessment processes for identified cases. For small offices this may mean reviewing 10–50 files independently of any case trigger. This requirement has no circular authority; the transaction cost it imposes falls entirely outside any framework the circular provides guidance for. Caseworkers must comply with a portfolio management obligation that the primary normative instrument governing their work does not address.

Req 7 — **[INTERNAL CONTROL]**: The caseworker must, in every economic support case, produce a documentable record demonstrating that § 19 was actively considered. This means that for every case not triggering § 19 aid — the overwhelming majority of the caseload — an additional step of formal consideration and recording is required. In a busy NAV office, this imposes a universal per-case overhead: the caseworker must (a) mentally and procedurally engage with § 19, (b) conclude it is not applicable or applicable, and (c) ensure this is reflected in the file. This requirement has no circular authority and no statutory authority in its mandatory form; the transaction cost it imposes falls entirely outside any framework the circular or statute provides. Caseworkers must comply with an obligation that neither their primary normative instrument nor the law requires.

Req 8 — **[USER NEED]**: No transaction cost burden identified. The soft "bør" recommendation does not generate a distinct compliance obligation beyond the substantive assessment; it is an interpretive guide, not an administrative task.

Req 9 — **[MIXED]**: The caseworker must ensure that case file documentation explicitly addresses whether the applicant requires help — not merely recording the outcome, but producing an evidentiary base that demonstrates need. In practice: reviewing available information, identifying gaps, requesting supplementary documentation if necessary, and explicitly recording the evidentiary basis in the file. This is a legitimate and proportionate obligation with statutory grounding; it imposes documentation burden that is directly connected to the user's right to a factually grounded decision. This requirement has no

circular authority; however, its transaction cost is supported by independent statutory grounding, meaning the caseworker can identify its legal basis even without reference to the circular.

Req 10 — **[INTERNAL CONTROL]**: The caseworker must conduct a documented meta-assessment of how case documentation should be organized — a reflexive administrative task sitting above the substantive case assessment itself. In concrete terms: after gathering information, the caseworker must (a) decide how to organize that documentation, (b) record the reasoning behind that organizational decision, and (c) ensure this meta-assessment appears as a traceable element in the file. This imposes overhead on every assessment without any user-outcome benefit. This requirement has no circular authority and no statutory authority; the transaction cost it imposes falls entirely outside any regulatory framework. Caseworkers must perform an administrative self-documentation task that neither the circular nor the statute supports.

Req 11 — **[MIXED]**: In cases where a child's best interests are determined but do not prevail, the caseworker must produce a specific, elevated written justification — not merely a standard decision rationale, but a distinct, identified document or section addressing why the child's interests were overruled. In practical terms: (a) identify that the case involves a child whose best interests are at stake, (b) conduct and document the barnets beste assessment, (c) determine whether child's interests prevail, and (d) if not, draft a specific supplementary written justification with named legal basis and explicit reasoning chain. This is a specialized documentation task requiring competence in child welfare legal reasoning that generalist caseworkers in small offices may not have. This requirement has no circular authority and only partial statutory authority in relation to § 19; the transaction cost falls substantially outside the framework the circular provides. Caseworkers must comply with a specialized documentation form-obligation that neither § 19 nor its implementing circular requires.

Req 12 — **[MIXED] / primary INTERNAL CONTROL**: The caseworker must produce a formal, verifiable written record of barnets beste considerations in every case involving children — not merely conducting the assessment, but ensuring the considerations are documented in a form that enables external review. In practical terms: a separately identifiable record of the child welfare reasoning, distinct from the general case assessment, must appear in the file. This systematic documentation obligation applies regardless of whether the child's interests are a disputed or close issue in the case. This requirement has no circular authority and only partial statutory authority in relation to § 19; the transaction cost falls outside the circular framework. The burden is compounded in small generalist offices lacking child welfare specialists (see Scale Flag, Driver 5).

Req 13 — **[USER NEED]**: No transaction cost burden identified beyond the standard intake obligation. Recording oral applications is a minimal administrative act that directly serves the user's procedural rights and has independent statutory support.

Req 14 — **[MIXED]**: No additional transaction cost burden beyond what ordinary case processing requires. Recording the application date is a minimal one-time administrative act with clear procedural purpose; it imposes no disproportionate overhead. This requirement has no circular authority for § 19 specifically, but its statutory grounding is independent and

clear, so the absence of circular guidance does not create regulatory uncertainty for the caseworker.

Req 15 — **[INTERNAL CONTROL]** (in social services context): The caseworker must (a) identify that the applicant is an EEA citizen, (b) request and verify documentation of lawful residence or permanent right of residence, (c) assess the sufficiency of that documentation against EEA free movement legal standards, and (d) record the gatekeeping assessment in the file before proceeding with the § 19 assessment. This requires competence in EEA free movement law — a distinct legal domain — that generalist social services caseworkers in small NAV offices are structurally unlikely to possess or maintain. This requirement has no circular authority, no statutory authority in relation to § 19, and constitutes a category error; the transaction cost it imposes falls entirely outside any framework the § 19 circular or statute provides. Caseworkers must perform a specialized legal gatekeeping function in an alien legal domain as a precondition for accessing a social services assessment — with no normative guidance from the social services framework itself.

STEP 6 — CATALOG ENTRIES

REQUIREMENT ID: § 19 / REQ-01

PROVISION TEXT: Aid under § 19 shall contribute to realizing the law's objectives for the individual, following a concrete and individual assessment.

SOURCE INSTRUMENT: Circular R-35, § 4.19.1

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: YES — implied by § 19's open normative standard; confirmed by Process Inflation Finding Req 1 (SUBSTANTIVE LEGAL OBLIGATION).

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: NO — classified scale-neutral in Volume Driver Findings (Set A, § 19 Requirement 1). Uncertainty flag for very small offices noted but not determinative.

PURPOSE: USER NEED

BURDEN DESCRIPTION: No transaction cost identified. This requirement defines the substantive purpose of the aid decision; compliance with it is inseparable from making a valid decision. It imposes no overhead beyond the casework itself.

KILL LIST CLASSIFICATION: No Kill List Action — sufficient authority, proportionate purpose.

TRANSACTION COST CATEGORY: No Transaction Cost Identified

REQUIREMENT ID: § 19 / REQ-02

PROVISION TEXT: If aid under § 18 is denied, it shall be assessed whether aid under § 19 can be granted.

SOURCE INSTRUMENT: Circular R-35, § 4.19.1

CIRCULAR AUTHORITY: PRESENT — but with internal authority inflation: the circular uses "shall" ("skal") where the statute supports only a permissive power.

LEGAL AUTHORITY: PARTIAL — § 19 establishes a permissive "kan" with no mandatory procedural duty to activate that power upon a § 18 refusal. The circular's mandatory framing exceeds the statute. Finding: PROC-REQ 19.2.

DOUBLE AUTHORITY GAP: NO — circular authority technically present. However, the circular overreaches the statutory mandate in its mandatory framing; this is a within-circular authority inflation.

CATEGORY ERROR: NO

SCALE FLAG: PARTIAL — connected to Alstahaug finding (Volume Driver Findings, Section 1a, § 19 Requirement 1; Section 4, Tier Uncertain). Small offices with low encounter frequency may lack practice capacity for individualized § 19 assessments after every § 18 denial. Circular authority is present but the statutory gap means scale-related burden from the mandatory framing is without statutory warrant.

PURPOSE: MIXED — primary: USER NEED (procedural safety net); secondary: INTERNAL CONTROL (audit trail).

BURDEN DESCRIPTION: Every § 18 denial requires a documented separate § 19 consideration — doubling documentation load per denial. Caseworker must produce a visible, reviewable file record demonstrating the § 19 gateway was actively considered, even in cases where no § 19 conditions exist. Circular guidance is present but exceeds statutory authority, meaning the mandatory dimension of the burden lacks a statutory anchor.

KILL LIST CLASSIFICATION: Category B — Status Change. The imperative "shall" ("skal") converts § 19's permissive power into a mandatory procedural track without statutory warrant. Candidate for reformulation to permissive language ("bør vurderes") to restore local discretion and reflect the statute's "kan" framing.

TRANSACTION COST CATEGORY: Procedural Duplication

REQUIREMENT ID: § 19 / REQ-03

PROVISION TEXT: In assessing whether § 19 aid shall be granted, account shall be taken of whether the recipient's life situation has become, or is at risk of becoming, so difficult that they cannot move forward without help.

SOURCE INSTRUMENT: Circular R-35, § 4.19.1

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: YES — directly reflects the statutory text of § 19 ("trenger det for å kunne overvinne eller tilpasse seg en vanskelig livssituasjon"). Process Inflation Finding Req 3: SUBSTANTIVE LEGAL OBLIGATION.

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: NO

PURPOSE: USER NEED — substantive eligibility threshold directly determining the user's access to aid.

BURDEN DESCRIPTION: No transaction cost identified. Assessing life situation difficulty is inseparable from making a valid § 19 decision.

KILL LIST CLASSIFICATION: No Kill List Action.

TRANSACTION COST CATEGORY: No Transaction Cost Identified

REQUIREMENT ID: § 19 / REQ-04

PROVISION TEXT: The recipient's needs must be assessed from the current situation; economic aid can be granted until other self-sufficiency options become available.

SOURCE INSTRUMENT: Circular R-35, § 4.19.1.3

CIRCULAR AUTHORITY: PRESENT — but with internal authority inflation: the circular's mandatory temporal framing eliminates caseworker discretion to weigh future self-sufficiency options.

LEGAL AUTHORITY: PARTIAL — § 19 ("trenger det") provides no explicit instruction on temporal framing of need assessment. The mandatory exclusion of future income possibilities is circular elaboration, not statute. Finding: PROC-REQ 19.4.

DOUBLE AUTHORITY GAP: NO — circular authority technically present. However, the mandatory temporal framing exceeds the statute's open evidentiary framework.

CATEGORY ERROR: NO

SCALE FLAG: NO — classified scale-neutral in Volume Driver Findings. The documentation obligation created by the temporal framing (demonstrating that future options were bracketed) is a within-capacity burden.

PURPOSE: MIXED — primary: USER NEED (protects user from denial based on theoretical future resources); secondary: INTERNAL CONTROL (constrains discretion to produce consistent, auditable outcomes).

BURDEN DESCRIPTION: Caseworker must explicitly document that needs were assessed from the present situation and that future self-sufficiency possibilities were actively but permissibly set aside. This creates a framing documentation obligation — recording not only the outcome but the temporal logic of the assessment — beyond what the substantive decision itself requires. Circular guidance is present but the mandatory temporal framing exceeds the statute.

KILL LIST CLASSIFICATION: Category B — Status Change. The mandatory temporal framing ("must be assessed from the current situation") eliminates discretion to weigh future income options without statutory basis. Candidate for reformulation to permissive guidance language that identifies present-situation assessment as a default without eliminating the authority's freedom to weigh future resources in appropriate cases.

TRANSACTION COST CATEGORY: Documentation Inflation

REQUIREMENT ID: § 19 / REQ-05

PROVISION TEXT: The NAV office must follow the case processing requirements of this law, the Public Administration Act, and unwritten norms of good administrative practice.

SOURCE INSTRUMENT: Circular R-35, § 4.19.1.4

CIRCULAR AUTHORITY: PRESENT

LEGAL AUTHORITY: YES — restatement of independent obligations with statutory anchors in sosialtjenesteloven, forvaltningsloven, and general administrative law. Finding: PROC-REQ 19.5, HAS_HJEMMEL.

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: NO

PURPOSE: USER NEED — protects the user's procedural rights: reasoned decisions, processing deadlines, appeal access, lawful evidence gathering.

BURDEN DESCRIPTION: No transaction cost identified beyond what the law already mandates. This requirement does not add administrative overhead; it restates existing obligations. Compliance is co-extensive with lawful case processing.

KILL LIST CLASSIFICATION: No Kill List Action.

TRANSACTION COST CATEGORY: No Transaction Cost Identified

REQUIREMENT ID: § 19 / REQ-06

PROVISION TEXT: The NAV office should assess whether long-term recipients of economic support may have a need for aid for special purposes under § 19.

SOURCE INSTRUMENT: Kommunebrev 2025

CIRCULAR AUTHORITY: ABSENT — this obligation derives from a Kommunebrev, a sub-circular administrative communication not part of the R-35 regulatory framework for § 19. The circular contains no proactive portfolio review obligation.

Consequence: The administrative obligation this imposes operates entirely outside the circular framework. Caseworkers responding to this instruction cannot locate its basis in their primary normative instrument (R-35).

LEGAL AUTHORITY: PARTIAL — § 19 does not distinguish recipient categories or create a proactive review duty. The obligation has no statutory anchor in § 19; it is a management-layer instruction from the Kommunebrev. The soft "bør" language avoids direct override of legal discretion.

DOUBLE AUTHORITY GAP: YES — circular authority absent; statutory authority partial.

CATEGORY ERROR: NO

SCALE FLAG: YES — the proactive review of the long-term recipient portfolio presupposes organizational capacity for non-case-triggered review work. Volume Driver Findings, [D] Documentation Apparatus and [C] Coordination Infrastructure mechanisms apply. This burden is entirely unsupported by the circular framework, meaning its disproportionate impact on small offices is without regulatory foundation.

PURPOSE: MIXED — primary: INTERNAL CONTROL (portfolio-level audit instruction); secondary: USER NEED (identifying unmet § 19 needs).

BURDEN DESCRIPTION: NAV office must: extract or identify all long-term economic support recipients; review each file for § 19-eligible needs; record the review outcome; initiate contact or assessment processes for identified cases. This is a systematic portfolio management task triggered by an administrative communication that the circular does not address. For small offices, this may mean reviewing 10–50 files without triggering any individual case. The transaction cost falls entirely outside any framework the circular provides guidance for.

KILL LIST CLASSIFICATION: Category C — Clarification. The Kommunebrev's "bør" framing avoids binding obligation in form but creates shadow binding in practice through its administrative communication format. The room for maneuver — that this is a soft

recommendation without binding force, directed at encouraging proactive practice — must be made explicit to prevent its informal operation as a mandatory requirement. Candidate for explicit clarification that compliance does not create an independently reviewable obligation.

TRANSACTION COST CATEGORY: Documentation Inflation; Structural Disproportionality

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REQUIREMENT ID: § 19 / REQ-07

PROVISION TEXT: It shall always be assessed whether aid can be granted under this provision.

SOURCE INSTRUMENT: Veileder om økonomisk stønad etter sosialtjenesteloven

CIRCULAR AUTHORITY: ABSENT — derives from a veileder, not the circular. The circular does not contain a universal "always assess" obligation for § 19.

Consequence: The universal assessment obligation operates entirely outside the circular framework. Caseworkers must comply with a universal procedural duty that their primary normative instrument does not recognize.

LEGAL AUTHORITY: NO — § 19 establishes a purely permissive power ("kan") with no mandatory assessment duty. The veileder's "shall always be assessed" language converts permissive discretion into a mandatory universal procedural obligation without any statutory warrant. Finding: PROC-REQ 19.7.

DOUBLE AUTHORITY GAP: YES — circular authority absent; statutory authority absent. Clear double authority gap.

CATEGORY ERROR: NO

SCALE FLAG: YES — a universal per-case assessment obligation imposes documentation overhead across the entire caseload, disproportionately affecting small offices with generalist staff. Volume Driver Findings, [D] Documentation Apparatus (~42% of all Set B findings) and [P] Procedural Continuity (~18%) mechanisms apply directly. This burden is entirely without regulatory foundation.

PURPOSE: INTERNAL CONTROL — the "always assess" obligation primarily creates an audit trail demonstrating that the § 19 gateway was never bypassed without documentation. The user benefit (access protection) is fully captured by Req 3 (substantive threshold) and Req 2 (sequential trigger); this universal obligation adds only administrative overhead without changing user outcomes.

BURDEN DESCRIPTION: Caseworker must, in every economic support case, produce a documentable record that § 19 was actively considered — even where no § 19 indicators are present. This creates a universal per-case overhead: active engagement with § 19, explicit conclusion on its applicability or inapplicability, and file recording of that conclusion. For a busy NAV office processing 100–300 economic support cases annually, this imposes cumulative overhead on every single case. The transaction cost falls entirely outside any

framework the circular or statute provides. Caseworkers must fulfill an obligation that neither their primary normative instrument nor the law requires.

KILL LIST CLASSIFICATION: Category A — Removal. This requirement has no circular authority and no statutory authority. It imposes a universal documentation obligation without any regulatory foundation and serves no user need beyond what requirements with proper authority already provide. Candidate for repeal from the veileder's normative framework or explicit reformulation as a permissive practice recommendation.

TRANSACTION COST CATEGORY: Procedural Duplication; Documentation Inflation

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REQUIREMENT ID: § 19 / REQ-08

PROVISION TEXT: The NAV office should consider granting aid under § 19 when the user is in a difficult life situation.

SOURCE INSTRUMENT: Veileder om økonomisk stønad etter sosialtjenesteloven

CIRCULAR AUTHORITY: ABSENT — derives from a veileder, not the circular.

Consequence: The recommendation operates outside the circular framework, but its soft "bør" framing and grounding in § 19's own statutory language mean this does not create authority inflation.

LEGAL AUTHORITY: YES — Finding PROC-REQ 19.8: HAS_HJEMMEL. The veileder recommendation is grounded in § 19's own statutory language without overriding the municipality's whether-discretion.

DOUBLE AUTHORITY GAP: NO — despite absent circular authority, the statutory anchor is present and the soft framing avoids authority inflation.

CATEGORY ERROR: NO

SCALE FLAG: NO

PURPOSE: USER NEED — a soft interpretive guide directing the caseworker's attention to the substantive conditions of § 19. No internal control function is independently served.

BURDEN DESCRIPTION: No transaction cost identified. The "bør" framing does not generate a distinct compliance obligation beyond the substantive assessment. This is interpretive guidance, not an administrative task.

KILL LIST CLASSIFICATION: No Kill List Action — sufficient statutory authority, proportionate purpose, soft framing preserves discretion.

TRANSACTION COST CATEGORY: No Transaction Cost Identified

REQUIREMENT ID: § 19 / REQ-09

PROVISION TEXT: Information must exist in the case file documenting whether the applicant requires help.

SOURCE INSTRUMENT: Veileder om økonomisk stønad etter sosialtjenesteloven 2022

CIRCULAR AUTHORITY: ABSENT — derives from a veileder, not the circular.

Consequence: The documentation obligation operates outside the circular framework. However, independent statutory grounding means caseworkers can locate its legal basis without reference to the circular.

LEGAL AUTHORITY: YES — Finding DOC-REQ 4.19.1.1: HAS_HJEMMEL. This is a logical procedural corollary of the condition "trenger det" and aligns with the investigation duty under forvaltningsloven § 17.

DOUBLE AUTHORITY GAP: NO — despite absent circular authority, statutory authority is present.

CATEGORY ERROR: NO

SCALE FLAG: NO — basic need documentation is an inherent part of any valid § 19 decision.

PURPOSE: MIXED — primary: USER NEED (factual grounding for the decision, enabling appeal); secondary: INTERNAL CONTROL (auditability).

BURDEN DESCRIPTION: Caseworker must ensure case file contains explicit evidence of need — reviewing available information, identifying and filling evidentiary gaps, recording the evidentiary basis clearly. This imposes a documentation discipline that serves the user's legal security. The transaction cost is proportionate and legally grounded even without circular guidance.

KILL LIST CLASSIFICATION: No Kill List Action — sufficient statutory authority, proportionate burden.

TRANSACTION COST CATEGORY: Documentation Inflation (modest and proportionate)

REQUIREMENT ID: § 19 / REQ-10

PROVISION TEXT: The NAV office must conduct a concrete and individual assessment of how case information shall be documented.

SOURCE INSTRUMENT: Veileder om økonomisk stønad etter sosialtjenesteloven 2022

CIRCULAR AUTHORITY: ABSENT — derives from a veileder, not the circular.

Consequence: The meta-documentation obligation operates entirely outside the circular framework. Caseworkers must comply with an administrative self-documentation task that their primary normative instrument does not address.

LEGAL AUTHORITY: NO — Finding DOC-REQ 4.19.1.2: § 19 contains no provision on documentation methodology; general administrative law does not mandate an individual assessment of how documentation is structured. This obligation has no statutory anchor.

DOUBLE AUTHORITY GAP: YES — circular authority absent; statutory authority absent. Clear double authority gap.

CATEGORY ERROR: NO — belongs to the social services administrative domain but exceeds its legal foundations.

SCALE FLAG: YES — a meta-documentation assessment of documentation structure imposes overhead that presupposes caseworkers have time for administrative self-reflection beyond the substantive case work. Volume Driver Findings, [D] Documentation Apparatus mechanism applies directly. This burden is entirely without regulatory foundation.

PURPOSE: INTERNAL CONTROL — a layer of administrative self-documentation that serves documentation consistency and audit purposes. Has no direct bearing on the user's case outcome; the user benefits from accurate documentation (Req 9), not from a separately documented methodology assessment.

BURDEN DESCRIPTION: Caseworker must: after gathering case information, conduct and document a distinct decision about how that information should be organized and presented in the file; ensure this meta-assessment appears as a traceable element. This imposes overhead on every assessment with no user-outcome benefit. The obligation falls entirely outside any framework the circular provides guidance for. Caseworkers must perform an administrative self-documentation task that neither the circular nor the statute requires.

KILL LIST CLASSIFICATION: Category A — Removal. This requirement has no circular authority and no statutory authority. It imposes a meta-documentation obligation without regulatory foundation and serves no user need. Candidate for repeal from the veileder.

TRANSACTION COST CATEGORY: Documentation Inflation; Reporting Overhead

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REQUIREMENT ID: § 19 / REQ-11

PROVISION TEXT: If a decision outcome means the child's best interests do not prevail, this must be specifically and separately justified in writing to ensure auditability and the child's legal security.

SOURCE INSTRUMENT: Barnets beste — veileder

CIRCULAR AUTHORITY: ABSENT — derives from a specialized child welfare veileder. The § 19 circular contains no reference to children or child-specific documentation requirements.

Consequence: This elevated documentation form-obligation operates entirely outside the circular framework. Caseworkers must comply with a specialized form-requirement that their primary normative instrument (R-35) does not address or provide guidance for.

LEGAL AUTHORITY: PARTIAL — Finding DOC-REQ 4.19.1.3: § 19 leaves the form and content of decisions entirely open and contains no specific reference to children. The barnets beste principle derives from the UN Convention on the Rights of the Child as incorporated into Norwegian administrative law, not from § 19. The principle has independent legal standing; the specific mandatory written justification form-requirement is added by the veileder without statutory anchor in § 19.

DOUBLE AUTHORITY GAP: YES — circular authority absent; statutory authority partial (principle exists externally; form-obligation does not).

CATEGORY ERROR: PARTIAL — the barnets beste principle derives from international child welfare law (CRC) imported into Norwegian administrative law through interpretive practice. While not a full category error (the principle is recognized across Norwegian administrative domains), the specific documentation obligation it generates in relation to § 19 is extrinsic to the social services framework and imposed without § 19 authority.

SCALE FLAG: PARTIAL — Volume Driver Findings, Section 4, Driver 5 ("Systematic child-perspective documentation," mechanisms [D]+[S], Tier 3): confirmed in approximately 25 reports as generating compliance friction in small generalist offices lacking child welfare specialists. This requirement lacks circular authority; the scale-related burden it imposes is without circular regulatory foundation.

PURPOSE: MIXED — primary: USER NEED (the child's legal security, enabling meaningful appeal review); secondary: INTERNAL CONTROL (the "etterprøvbarhet" function creates an audit record for supervisory review).

BURDEN DESCRIPTION: Where a child's interests are overruled: caseworker must (a) identify that a child is affected, (b) conduct and document the barnets beste assessment, (c) determine that the child's interests do not prevail, and (d) draft a specifically elevated, separately identifiable written justification with explicit reasoning chain — beyond the standard decision rationale. This requires specialized competence in child welfare legal reasoning that generalist staff in small offices may not possess or maintain (see Driver 5). The transaction cost falls substantially outside the circular framework; caseworkers must comply with a specialized documentation form-obligation that neither § 19 nor its implementing circular requires.

KILL LIST CLASSIFICATION: Category B — Status Change. The veileder converts § 19's open how-discretion into a mandatory specific documentation form-obligation for child-interest cases without a § 19 statutory anchor. The child protection purpose is real and legitimate; the specific mandatory form-requirement is not. Candidate for reformulation to permissive guidance — identifying elevated written justification as best practice while restoring the authority's discretion over the form and extent of documentation.

TRANSACTION COST CATEGORY: Documentation Inflation

REQUIREMENT ID: § 19 / REQ-12

PROVISION TEXT: Assessments of the child's best interests must be documented so that others can see what assessments were made and have the opportunity to verify them.

SOURCE INSTRUMENT: Barnets beste — veileder

CIRCULAR AUTHORITY: ABSENT — derives from a specialized child welfare veileder. Not addressed in the § 19 circular.

Consequence: The systematic child-welfare documentation obligation operates entirely outside the circular framework for § 19.

LEGAL AUTHORITY: PARTIAL — Finding DOC-REQ 4.19.1.4: § 19's permissive text lacks any requirement to conduct or document a specific child welfare assessment. The documentation obligation adds extrinsic mandatory content. The barnets beste principle has external legal standing (CRC); the documentation requirement as applied to § 19 decisions does not.

DOUBLE AUTHORITY GAP: YES — circular authority absent; statutory authority partial.

CATEGORY ERROR: PARTIAL — same reasoning as Req 11. The derivation from CRC/barnets beste doctrine is extrinsic to § 19.

SCALE FLAG: PARTIAL — Volume Driver Findings, Driver 5 applies directly. Approximately 25 reports confirm this as a compliance challenge for small generalist offices.

PURPOSE: MIXED — primary: INTERNAL CONTROL (the "for at andre skal kunne se" framing is explicitly audit-and-oversight language); secondary: USER NEED (the child's interest in having their welfare genuinely considered).

BURDEN DESCRIPTION: Caseworker must produce a formal, verifiable written record of barnets beste considerations in every case involving children — a systematically identifiable documentation element distinct from the general case assessment. This is a universal child-case documentation obligation, not limited to cases where child interests are contested or overruled (that specific case is Req 11). For small generalist offices, this generates a per-case overhead requiring specialized documentation competence for every case touching a child, regardless of complexity. The transaction cost falls outside the circular framework; caseworkers must comply with an extrinsic content requirement that neither § 19 nor its implementing circular contains.

KILL LIST CLASSIFICATION: Category B — Status Change. The veileder adds an extrinsic mandatory documentation content requirement to § 19 without any statutory anchor in the provision. The child welfare purpose is legitimate; the mandatory documentation form is not supported by § 19. Candidate for reformulation to permissive guidance reflecting best practice.

TRANSACTION COST CATEGORY: Documentation Inflation

REQUIREMENT ID: § 19 / REQ-13

PROVISION TEXT: The NAV office has a duty to record oral applications in writing.

SOURCE INSTRUMENT: Veileder til sosialtjenesteloven § 17 (cross-applied)

CIRCULAR AUTHORITY: ABSENT — imported from the § 17 veileder into the § 19 context. Not addressed in the § 19 circular.

Consequence: Caseworkers cannot locate this obligation in their § 19 normative instrument. However, the independent statutory grounding means regulatory uncertainty is limited.

LEGAL AUTHORITY: YES — Finding DOC-REQ 4.19.1.5: HAS_HJEMMEL. Universally applicable intake obligation rooted in sosialtjenesteloven § 17 and general administrative principles.

DOUBLE AUTHORITY GAP: NO — despite absent circular authority, independent statutory grounding is present.

CATEGORY ERROR: NO

SCALE FLAG: NO

PURPOSE: USER NEED — directly protects the user's access to process: an unrecorded oral application denies the user a processing deadline, a decision, and a right to appeal.

BURDEN DESCRIPTION: No transaction cost identified beyond standard intake administration. Recording oral applications is a minimal individual-case task directly serving the user's procedural rights.

KILL LIST CLASSIFICATION: No Kill List Action — sufficient statutory authority (independent of § 19), proportionate and user-serving.

TRANSACTION COST CATEGORY: No Transaction Cost Identified

REQUIREMENT ID: § 19 / REQ-14

PROVISION TEXT: The application date must be recorded and appear in the case file.

SOURCE INSTRUMENT: Veileder til sosialtjenesteloven § 17 (cross-applied)

CIRCULAR AUTHORITY: ABSENT — imported from the § 17 veileder. Not addressed in the § 19 circular.

LEGAL AUTHORITY: YES — Finding DOC-REQ 4.19.1.6: HAS_HJEMMEL. Universal administrative record-keeping obligation with clear independent statutory basis in processing-deadline rules.

DOUBLE AUTHORITY GAP: NO

CATEGORY ERROR: NO

SCALE FLAG: NO

PURPOSE: MIXED — primary: USER NEED (application date governs processing deadline and appeal timeline); secondary: INTERNAL CONTROL (administrative tracking).

BURDEN DESCRIPTION: Recording the application date is a minimal one-time administrative act. The absence of circular guidance for § 19 does not create regulatory uncertainty because the statutory basis is independent and uncontested. No disproportionate burden.

KILL LIST CLASSIFICATION: No Kill List Action.

TRANSACTION COST CATEGORY: No Transaction Cost Identified

REQUIREMENT ID: § 19 / REQ-15

PROVISION TEXT: EEA citizens must document lawful residence, or permanent right of residence, at the time of application for social services.

SOURCE INSTRUMENT: Veileder for Nav-kontoret ved vurdering av lovlig opphold for EØS-borgere

CIRCULAR AUTHORITY: ABSENT — derives from a specialized EEA guidance veileder. Not addressed in the § 19 circular.

Consequence: This gatekeeping obligation operates entirely outside the circular framework. Caseworkers must apply a specialized legal verification procedure in a distinct legal domain with no guidance from their primary § 19 normative instrument.

LEGAL AUTHORITY: NO in relation to § 19. Finding DOC-REQ 4.19.1.7: § 19 imposes no nationality- or residence-based evidentiary burden for access. The residence documentation requirement derives from EEA free movement law (EU Directive 2004/38 / EØS-loven), not from sosialtjenesteloven § 19.

DOUBLE AUTHORITY GAP: YES — circular authority absent; statutory authority absent in relation to § 19.

CATEGORY ERROR: YES — the operative legal framework for this obligation is EEA free movement law and Norwegian immigration law, not sosialtjenesteloven. Its application as an access condition to § 19 constitutes an importation of a different legal domain's gatekeeping mechanism into the social services framework without normative authority from that framework. This requirement belongs to the immigration/EEA law domain; it functions as a category error when applied as a precondition for social services assessment.

SCALE FLAG: YES — EEA residence verification requires competence in EU free movement law that generalist caseworkers in small NAV offices are unlikely to possess or maintain. Volume Driver Findings, [S] Specialization mechanism applies by structural analogy: knowledge of EEA Directive 2004/38 and its Norwegian implementation is a specialized domain that small generalist offices encounter too rarely to sustain reliable practice. The transaction cost is entirely without regulatory foundation in the social services framework, and the specialization burden compounds this. This burden falls completely outside any framework the circular provides, meaning caseworkers must navigate a foreign legal domain with no normative guidance from the instrument governing their work.

PURPOSE: INTERNAL CONTROL (in relation to social services users) — in its social services application, this requirement functions as a state eligibility-screening mechanism serving immigration compliance functions, not the user's need for assistance. For the user, it creates a documentary access barrier with no basis in the logic of § 19. In its home domain (EEA law), it serves a legitimate and distinct purpose; classified against its social services function, it is an administrative control instrument.

BURDEN DESCRIPTION: Caseworker must: (a) identify the applicant as an EEA citizen; (b) request specific residence documentation (registration certificate, permanent residence card, or equivalent); (c) assess sufficiency of that documentation against EEA free movement legal standards (Directive 2004/38, § 112 EØS-loven framework); (d) record the gatekeeping decision before proceeding with the § 19 assessment. Step (c) requires specialized competence in a legal domain that is not sosialtjenesteloven and that generalist social services staff in small offices encounter too rarely to sustain. The full transaction cost falls entirely outside any framework the circular or § 19 statute provides. Caseworkers must perform specialized legal gatekeeping in an alien legal domain as a precondition for a social services assessment — without any normative guidance from the social services framework.

KILL LIST CLASSIFICATION: Category A — Removal. This requirement has no circular authority, no statutory authority in relation to § 19, and constitutes a category error — it belongs to the EEA/immigration law domain, not the social services framework. Its application as a § 19 access precondition is without regulatory foundation. Candidate for removal from the social services normative framework; EEA residence eligibility questions should be addressed through the immigration law framework, not through a social services veileder adding gatekeeping conditions to a provision that contains none.

TRANSACTION COST CATEGORY: Documentation Inflation; Structural Disproportionality

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CLOSING COMPARATIVE NOTE

Total requirements identified from Process Inflation Findings: 15

Requirements that would have been visible starting from the circular alone: 5 (Req 1–5, all located in §§ 4.19.1–4.19.1.4 of R-35)

Visibility ratio: 3:1 — two-thirds of the normative burden on § 19 is structurally invisible from the circular. A compliance analyst relying solely on the circular would have identified 5 requirements and missed 10. This ratio confirms that the circular functions as a misleadingly sparse normative instrument: it defines the statutory framework but fails to capture the full burden landscape generated by sub-circular guidance instruments operating in its shadow.

Double authority gaps identified: 5 — Req 7 (circular absent + statutory absent) — Req 10 (circular absent + statutory absent) — Req 11 (circular absent + statutory partial) — Req 12 (circular absent + statutory partial) — Req 15 (circular absent + statutory absent)

These five requirements collectively impose documentation, procedural, and gatekeeping obligations on NAV offices without any anchor in either the circular or the statutory provision. They represent the core finding of this audit: a significant stratum of administrative burden operating in a normative void.

Category errors (requirements deriving from a different legal domain): 1 confirmed, 2 partial — Req 15: full category error (EEA/immigration law domain, clear) — Req 11, Req 12: partial category derivation (CRC/barnets beste doctrine, extrinsic to § 19 but recognized across Norwegian administrative law)

Kill List breakdown:

Category	Requirements	Count
Category A — Removal	Req 7, Req 10, Req 15	**3**
Category B — Status Change	Req 2, Req 4, Req 11, Req 12	**4**
Category C — Clarification	Req 6	**1**
No Kill List Action	Req 1, Req 3, Req 5, Req 8, Req 9, Req 13, Req 14	**7**

Of 15 requirements: 8 require Kill List action (53%); 7 have sufficient authority and proportionate burden.

Primary transaction cost categories by frequency:

Category	Requirements	Frequency
Documentation Inflation	Req 2 (partial), Req 4, Req 6, Req 7, Req 9, Req 10, Req 11, Req 12, Req 15	**9**
Structural Disproportionality	Req 6, Req 15	**2**
Procedural Duplication	Req 2, Req 7	**2**

Reporting Overhead	Req 10	**1**
No Transaction Cost Identified	Req 1, Req 3, Req 5, Req 8, Req 13, Req 14	**6**

Documentation Inflation is the overwhelmingly dominant transaction cost category, appearing across 9 of 15 requirements — consistent with the Volume Driver Findings' identification of [D] Documentation Apparatus as the single most pervasive mechanism in the entire dataset (~42% of all Set B findings). The § 19 sludge profile mirrors the system-wide pattern: the primary burden on NAV caseworkers is not substantive legal reasoning but documentary overhead generated by sub-legal instruments operating without circular or statutory authority.

Synthesis observation for main report: The § 19 paragraph presents a deceptively clean circular face — five grounded, proportionate requirements addressing the provision's substantive purpose. Beneath that surface, ten additional requirements from Kommunebrev and veileder instruments add a documentation and procedural apparatus that the circular does not address and the statute does not support. The three Category A removal candidates (Req 7, 10, 15) represent the audit's clearest findings: obligations generating real caseworker burden with zero regulatory foundation. The four Category B status change candidates (Req 2, 4, 11, 12) represent authority inflation — legitimate legal concerns expressed in mandatory language that converts permissive powers and open discretions into compulsory procedural tracks without statutory warrant. Together, these seven requirements account for the majority of the identifiable sludge burden on § 19 and are the primary candidates for normative intervention through the Kill List process.

SLUDGE AUDIT — § 20 BRUK AV VILKÅR

Session reference: § 20 / R-35 Para 20 **Reference Document:** Process Inflation Findings (Document 2) **Context Document:** The Circular — R-35 § 20 (Document 3) **Anchor Document:** Volume Driver Findings (Document 4)

PRELIMINARY METHODOLOGICAL NOTE

Requirements visible from the Process Inflation Findings: 27 enumerated requirements (22 unique after deduplication of Requirements 14/2, 15/3+4, 16/6, and 17/7, which are textual repetitions of earlier requirements appearing in different subsections of the circular).

Requirements that would be visible from the circular paragraph alone: approximately 17–18. The circular contains explicit textual anchors for Requirements 1 through 10, 13, 18, 19, 20, 21, 22, and 23. All of these have at least partial textual presence in the R-35 § 20 text.

Requirements with NO textual presence in the circular — five unique obligations:

Requirement	Content	Source Instrument	Instrument Type
R11 / R27	No conditions in § 17 decisions	Veileder sotjl § 17	(b) a veileder
R12	Option to condition economic support on seeking guidance	Veileder sotjl § 17	(b) a veileder
R24	KVP eligibility must be assessed before activity condition	Kommunebrev 2025	(a) a Kommunebrev
R25	Mandatory activity condition for persons under 30	Kommunebrev 2025	(a) a Kommunebrev
R26	Asset sale condition must be set in collaboration with applicant	Veileder øk. stønad	(b) a veileder

Structural observation of first-order analytical significance: The four duplicated requirements (14, 15, 16, 17 repeating 2, 3+4, 6, 7) do not introduce new substantive obligations. They appear because the circular restates the same procedural rules in multiple subsections (4.20.1.1 and again in 4.20.2.1–4.20.2.2). This redundancy inflates the apparent requirement count and contributes to shadow binding by reinforcing the same obligation through repetition, which caseworkers may interpret as heightened emphasis requiring heightened documentation. The duplication is itself carried into the Process Inflation

Findings, which means the audit must note it explicitly to avoid over-counting in the Kill List output.

STEP 1 — IDENTIFICATION OF ALL REQUIREMENTS

The following table enumerates all 22 unique requirements drawn from the Process Inflation Findings. Requirements that are textual duplicates are consolidated under a single entry with notation.

ID	Obligation as expressed in Process Inflation Findings	Source Instrument	Explicit or Implicit	Textual presence in circular
§20-REQ-01	Grant decision must inform user about possible benefit reduction upon breach	R-35 Para 20 (statutory text)	Explicit	PRESENT
§20-REQ-02	Decision to set a condition must appear in the grant decision for economic support [= R14]	R-35 Para 20 — 4.20.1.1	Explicit	PRESENT
§20-REQ-03	Conditions must be reasoned [≈ R15a]	R-35 Para 20 — 4.20.1.1	Explicit	PRESENT
§20-REQ-04	Decision must clearly state what the duty entails and what is required for fulfillment [≈ R15b]	R-35 Para 20 — 4.20.1.1	Explicit	PRESENT
§20-REQ-05	Decision must state what the consequences of potential breaches will be	R-35 Para 20 — 4.20.1.1	Explicit	PRESENT
§20-REQ-06	A new decision must be issued to implement breach consequences [= R16]	R-35 Para 20 — 4.20.1.1	Explicit	PRESENT
§20-REQ-07	A new decision must be issued if a condition is changed [= R17]	R-35 Para 20 — 4.20.1.1	Explicit	PRESENT
§20-REQ-08	Nav must issue a written, reasoned decision that expressly ("uttrykkelig") shows condition set, its content, and breach consequences	R-35 Para 20 — 4.20.2.2	Explicit	PRESENT

§20-REQ-09	Decision must inform user about right to appeal the condition	R-35 Para 20 — 4.20.2.2	Explicit	PRESENT
§20-REQ-10	Breach consequence must clearly appear in the grant decision	R-35 Para 20 — 4.20.2.8	Explicit	PRESENT
§20-REQ-11	Conditions under §§ 20 or 20a may not be set in decisions on guidance and advice under § 17 [= R27]	Veileder sotjl § 17	Explicit	ABSENT
§20-REQ-12	If user wants guidance, it may be useful to condition economic support on seeking that guidance	Veileder sotjl § 17	Explicit (permissive)	ABSENT
§20-REQ-13	No conditions may be set for economic support in an emergency situation	R-35 Para 20 — 4.20.2.1	Explicit	PRESENT
§20-REQ-14	Before setting any condition, Nav must always conduct a concrete individual assessment of whether a condition is appropriate	R-35 Para 20 — 4.20.2.1	Explicit	PRESENT
§20-REQ-15	For all condition types, Nav must conduct a concrete individual assessment of how burdensome the condition is for the individual	R-35 Para 20 — 4.20.2.5	Explicit	PRESENT
§20-REQ-16	Nav must assess which specific work tasks are appropriate for the individual	R-35 Para 20 — 4.20.2.7	Explicit	PRESENT
§20-REQ-17	Nav must ensure the user has had an opportunity to be heard before a decision on breach consequences is issued	R-35 Para 20 — 4.20.2.8	Explicit	PRESENT
§20-REQ-18	At breach, Nav must conduct a concrete individual assessment of whether to implement the consequence	R-35 Para 20 — 4.20.2.8	Explicit	PRESENT
§20-REQ-19	Where user has children, Nav must assess what impact the breach consequence will have on the children	R-35 Para 20 — 4.20.2.8	Explicit	PRESENT

§20-REQ-20	Right to a qualification programme (KVP) must be assessed sequentially before an activity condition is set	Kommunebrev 2025	Explicit	ABSENT
§20-REQ-21	For persons under 30, activity conditions shall be set unless weighty reasons speak against it	Kommunebrev 2025	Explicit	ABSENT
§20-REQ-22	Asset sale conditions must as a main rule be set in collaboration with the applicant	Veileder øk. stønad	Explicit	ABSENT

STEP 2 — LEGAL AUTHORITY CHECK

§20-REQ-01 Direction 1 — Circular authority: **YES.** The statutory text itself ("forutsatt at det i vedtaket om stønad er informert om muligheten for slik reduksjon") requires this and the circular restates it. Direction 2 — Statutory authority: **YES.** Directly required by the statutory text of § 20 third paragraph. Double authority gap: **NO.** Category error: **NO.**

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§20-REQ-02 Direction 1 — Circular authority: **YES.** Explicitly stated in 4.20.1.1: "Avgjørelse om å sette vilkår skal fremgå av vedtaket om tildeling av økonomisk stønad." Direction 2 — Statutory authority: **PARTIAL.** § 20 contains no explicit requirement that the condition decision must appear in the grant decision itself rather than a separate administrative decision. The Process Inflation Findings flag this: "§ 20 contains no explicit requirement that the decision to set conditions must appear in the grant decision itself rather than a separate decision; the specific textual basis is absent." General forvaltningsloven drafting obligations support a written decision but do not specify its form as a joint instrument. Double authority gap: **NO** (circular authority present). Category error: **NO.**

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§20-REQ-03 Direction 1 — Circular authority: **YES.** 4.20.1.1: "Vilkår skal begrunnes." Direction 2 — Statutory authority: **YES.** Grounded in preparatory works (Prop. 39 L) and forvaltningsloven's general reasoning obligation (§ 24–25), both of which provide direct normative basis independent of § 20 itself. Double authority gap: **NO.** Category error: **NO** (forvaltningsloven is universally applicable).

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§20-REQ-04 Direction 1 — Circular authority: **YES.** 4.20.1.1: "det må tydelig fremkomme av vedtaket hva plikten innebærer, hva som kreves for at plikten skal anses oppfylt." Direction 2 — Statutory authority: **PARTIAL.** § 20 specifies what conditions may be set; it does not specify what content the decision must contain. The Process Inflation Findings flag: "§ 20 contains no specification of what content the decision must include beyond the conditions

themselves; this precise formulation lacks a direct textual anchor." The detailed content specification is a circular elaboration, not a statutory one. Double authority gap: **NO** (circular authority present). Category error: **NO.**

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§20-REQ-05 Direction 1 — Circular authority: **YES.** 4.20.1.1 and the statutory text. Direction 2 — Statutory authority: **YES.** The statutory text is entirely prescriptive for this element: reduction is permissible only if the grant decision has informed about the possibility. This requirement is therefore a direct statutory obligation, not a circular addition. Double authority gap: **NO.** Category error: **NO.**

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§20-REQ-06 Direction 1 — Circular authority: **YES.** 4.20.1.1: "Hvis konsekvensen av vilkårsbrudd skal iverksettes må det fattes et nytt vedtak." Direction 2 — Statutory authority: **YES.** Preparatory works (Prop. 39 L) explicitly state that a separate decision must be made if support is to be reduced. The new-decision requirement is therefore anchored in the legislative history of § 20. Double authority gap: **NO.** Category error: **NO.**

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§20-REQ-07 Direction 1 — Circular authority: **YES.** 4.20.1.1: "Hvis vilkåret endres, skal det fattes nytt vedtak." Direction 2 — Statutory authority: **PARTIAL.** § 20 contains no provision addressing the procedural consequence of changing an existing condition. The Process Inflation Findings flag: "§ 20 contains no provision addressing what must happen when conditions are changed; it is textually unanchored in § 20 itself." General forvaltningsloven principles (an amended binding administrative decision requires a new decision) provide indirect support but the specific § 20 anchor is absent. Double authority gap: **NO** (circular authority present). Category error: **NO.**

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§20-REQ-08 Direction 1 — Circular authority: **YES.** 4.20.2.2: "Nav-kontoret skal derfor fatte et skriftlig, begrunnet vedtak som uttrykkelig viser at det er satt vilkår, hva vilkåret går ut på og konsekvensen hvis vilkåret brytes." Direction 2 — Statutory authority: **PARTIAL.** The requirement for a written reasoned decision is grounded in forvaltningsloven. The specific standard that the decision must "uttrykkelig" (expressly) show all three elements is a level of specificity added by the circular beyond what § 20 requires. The Process Inflation Findings flag: "The specification that the decision must expressly ('uttrykkelig') show all three elements is a level of specificity not stated in § 20." Double authority gap: **NO** (circular authority present). Category error: **NO.**

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§20-REQ-09 Direction 1 — Circular authority: **YES.** 4.20.2.2: "Vedtaket må også opplyse om adgangen til å klage på vilkåret." Direction 2 — Statutory authority: **YES** — but sourced to a different legal domain. Forvaltningsloven § 27 mandates appeal rights information in all administrative decisions. This obligation exists independently of § 20 and applies universally.

Double authority gap: **NO.** Category error: **NO** — forvaltningsloven is universally applicable administrative law and not a domain error in this context; its application to § 20 decisions is correct.

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§20-REQ-10 Direction 1 — Circular authority: **YES.** 4.20.2.8: "Konsekvensen ved brudd på vilkår skal klart fremkomme av vedtaket om tildeling av økonomisk stønad." Direction 2 — Statutory authority: **YES.** The circular adds the quality standard ("klart") to the statutory precondition that already requires information about reduction to appear in the grant decision. This is a permissible circular elaboration of the statutory requirement. Double authority gap: **NO.** Category error: **NO.**

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§20-REQ-11 (identical to R27) Direction 1 — Circular authority: **NO.** This restriction appears only in Veileder sotjl § 17, not in the R-35 § 20 circular. It is entirely invisible from the § 20 circular framework. **First-order authority gap.** Direction 2 — Statutory authority: **YES.** The restriction is a valid interpretation of the structure of the Social Services Act: § 20 conditions are specifically tied to economic support decisions; § 17 decisions concern a different service type. The restriction follows from the internal architecture of the statute. Double authority gap: **NO** (statutory authority present despite circular absence). Category error: **NO.**

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§20-REQ-12 Direction 1 — Circular authority: **NO.** This permissive option appears only in Veileder sotjl § 17. It is invisible from the § 20 circular. **First-order authority gap.** Direction 2 — Statutory authority: **YES.** As a permissive option (not an obligation), this requires no special statutory basis; it simply reflects the permissive "kan" power in § 20 applied to a specific factual context. Double authority gap: **NO** (statutory authority present). Category error: **NO.**

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§20-REQ-13 Direction 1 — Circular authority: **YES.** 4.20.2.1: "Det skal ikke settes vilkår for tildeling av økonomisk stønad i en nødssituasjon." Direction 2 — Statutory authority: **YES.** This follows directly from the proportionality and connection requirements of § 20 (conditions must have close connection to the decision and must not be disproportionately burdensome) which, in an emergency, cannot be satisfied. Double authority gap: **NO.** Category error: **NO.**

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§20-REQ-14 Direction 1 — Circular authority: **YES.** 4.20.2.1: "Før det settes vilkår, skal Nav-kontoret alltid foreta en konkret individuell vurdering av om vilkår er hensiktsmessig..." Direction 2 — Statutory authority: **PARTIAL.** § 20 grants a permissive power ("kan") but does not establish a mandatory pre-condition of conducting a documented individual assessment before exercising it. The Process Inflation Findings flag: "§ 20 sets no requirement for a mandatory prior individual assessment as a pre-condition before exercising the permissive 'kan' power." The substantive proportionality requirements of § 20

implicitly assume case-specific judgment, but the mandatory documented pre-assessment form is a circular construct. Double authority gap: **NO** (circular authority present). Category error: **NO.**

Note: The circular uses "skal alltid" (shall always) to convert what could be described as good administrative practice — conducting individual assessments — into a mandatory documented procedural step, binding the discretion that § 20's "kan" formulation was intended to preserve. This constitutes shadow binding of the how-discretion.

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§20-REQ-15 Direction 1 — Circular authority: **YES.** 4.20.2.5: "For alle typer vilkår skal Nav-kontoret foreta en konkret individuell vurdering av hvor tyngende vilkåret er for den enkelte tjenestemottaker." Direction 2 — Statutory authority: **YES.** § 20 explicitly requires that conditions must not be "uforholdsmessig byrdefulle." This proportionality assessment directly implements the statutory norm. Double authority gap: **NO.** Category error: **NO.**

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§20-REQ-16 Direction 1 — Circular authority: **YES.** 4.20.2.7: "Det må foretas en konkret individuell vurdering av hvilke arbeidsoppgaver som passer for den enkelte." Direction 2 — Statutory authority: **YES.** § 20 first paragraph uses the open norm "passende arbeidsoppgaver," which intrinsically requires individual determination of what is "suitable" for the person concerned. Double authority gap: **NO.** Category error: **NO.**

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§20-REQ-17 Direction 1 — Circular authority: **YES.** 4.20.2.8: "Nav-kontoret må derfor sørge for at tjenestemottakeren har fått mulighet til å uttale seg før vedtaket om konsekvensen av vilkårsbruddet fattes." Direction 2 — Statutory authority: **YES** — from a parallel legal domain. Forvaltningsloven § 17 mandates the right to be heard before adverse administrative decisions. This obligation applies universally to all enkeltvedtak and requires no special anchoring in § 20. The circular correctly reflects this obligation. Double authority gap: **NO.** Category error: **NO** — forvaltningsloven applies universally and its inclusion here is correct.

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§20-REQ-18 Direction 1 — Circular authority: **YES.** 4.20.2.8: "Ved brudd på vilkår skal det gjøres en konkret og individuell vurdering av om det skal fattes vedtak om at konsekvensen skal gjennomføres." Direction 2 — Statutory authority: **YES.** Preparatory works (Prop. 39 L) explicitly require assessing cause and special circumstances before implementing breach consequences. The proportionality and connection requirements of § 20 independently support this assessment obligation. Double authority gap: **NO.** Category error: **NO.**

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§20-REQ-19 Direction 1 — Circular authority: **YES.** 4.20.2.8 under "Særlig om ivaretakelse av barns behov": "Nav-kontoret skal alltid sikre at barns behov blir ivaretatt, og det må derfor foretas en konkret og individuell vurdering av hvilken betydning konsekvensene av vilkårsbruddet får for barna." Direction 2 — Statutory authority: **YES.** Preparatory works

(Prop. 13 L) provide a direct normative basis. Additionally, barnekonvensjonen Article 3 (barnets beste) applies through Norges Grunnlov § 104. Double authority gap: **NO.** Category error: **NO.**

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§20-REQ-20 Direction 1 — Circular authority: **NO.** This sequencing requirement derives entirely from Kommunebrev 2025 and has no textual presence in the R-35 § 20 circular framework. **First-order authority gap.** Caseworkers applying this obligation receive no guidance on it from the primary normative instrument governing their work. Direction 2 — Statutory authority: **PARTIAL.** § 20 imposes no sequencing requirement regarding KVP eligibility assessment. KVP rights are governed by §§ 29–40, which constitute a separate legal regime. The sequencing rule in Kommunebrev 2025 has no explicit anchor in § 20 itself and represents an attempt by a Kommunebrev to impose a procedural sequencing obligation across two separate statutory provisions without clear statutory authority to do so. The Process Inflation Findings flag: "§ 20 imposes no sequencing requirement regarding KVP eligibility assessment; KVP rights are governed by separate sections." Double authority gap: **YES — NO circular authority AND PARTIAL statutory authority.** Category error: **PARTIAL** — the sequencing obligation draws on legal norms from the KVP regime (§§ 29–40) and imports them as a prerequisite step into § 20 decision-making without statutory authority for this cross-regime procedural rule.

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§20-REQ-21 Direction 1 — Circular authority: **NO.** The mandatory "shall" language for persons under 30 appears only in Kommunebrev 2025 and has no textual presence in the R-35 § 20 circular. **First-order authority gap.** Direction 2 — Statutory authority: **YES** — but from a parallel statutory provision. The activity duty for persons under 30 is anchored in sosialtjenesteloven § 20a, not § 20. The Kommunebrev correctly implements a statutory obligation, but that obligation resides in a different provision than the one under analysis. Within the § 20 framework, this requirement has no statutory anchor. Double authority gap: **NO** (statutory authority present in § 20a). Category error: **PARTIAL** — the requirement is legally correct but belongs to the § 20a legal regime, not the § 20 regime. Its inclusion in Process Inflation Findings for § 20 analysis reflects a cross-regime analytical overlap rather than a category error in the classical sense.

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§20-REQ-22 Direction 1 — Circular authority: **NO.** This procedural default rule appears only in Veileder øk. stønad and has no textual presence in the R-35 § 20 circular framework. **First-order authority gap.** The primary normative instrument provides no guidance whatsoever on the process by which conditions are to be formulated. Direction 2 — Statutory authority: **PARTIAL.** § 20 is entirely silent on how conditions are to be formulated procedurally. The circular itself (4.20.1) notes that "Vilkår skal i utgangspunktet settes i samarbeid med tjenestemottaker, men dette er ikke en forutsetning" (conditions should in principle be set in collaboration, but this is not a prerequisite). The veileder transforms this non-prerequisite circular guidance into a "main rule" (hovedregel), which constitutes shadow binding of the process discretion that the circular explicitly preserved. The Process Inflation Findings flag: "The statute leaves entirely open how conditions are formulated and through

what process; the circular replaces this open process judgment with a mandatory procedural default rule of collaboration (shadow binding the how-discretion)." Double authority gap: **YES — NO circular authority AND PARTIAL statutory authority** (with the added analytical note that the Veileder directly contradicts the R-35 § 20 circular's own explicit statement that collaboration is not a prerequisite). Category error: **NO** — the obligation operates within the social services domain, but its source instrument contradicts the primary normative instrument.

STEP 3 — SCALE AND PROPORTIONALITY CHECK

Cross-referencing with the Volume Driver Findings (Document 4):

§20-REQ-01: Scale flag: **NO.** The obligation to include standard breach-information language in a grant decision is a template-level documentation task with no volume sensitivity.

§20-REQ-02: Scale flag: **PARTIAL.** The requirement that condition and grant decisions be issued as a joint document requires administrative coordination of documentation. For small offices managing their own document templates, this imposes a formatting discipline that can fail when staff turnover eliminates procedural memory. The Volume Driver Findings' [D] Documentation Apparatus mechanism is the closest confirmed finding; the specific § 20 version of this has not been separately confirmed but is structurally analogous. The [D] mechanism appears in approximately 65 Set B findings (§17/§18 context), and the structural driver — generalist offices lacking documentation routines for infrequent complex decisions — applies equally here.

§20-REQ-03: Scale flag: **NO.** Reasoning obligations are standard administrative law practice and do not presuppose organizational capacity beyond a single trained caseworker.

§20-REQ-04: Scale flag: **PARTIAL.** The specific content requirements (what the duty entails, what fulfillment requires) demand a level of drafting precision that, per the Volume Driver Findings' [K] Competence Sustainability mechanism, may erode when offices process too few condition-setting decisions to maintain drafting routines. Confirmed structurally in Cluster 1 of the Volume Driver Findings (documentation-competence-specialization trap), where low case frequency leads to inability to execute formal administrative pipelines correctly.

§20-REQ-05: Scale flag: **NO.** Standard informational content, manageable at all scales.

§20-REQ-06: Scale flag: **PARTIAL.** The requirement for a second administrative decision upon breach implementation adds a procedural step that, in small offices, may be missed precisely because breach handling is a rare event. The [P] Procedural Continuity mechanism in the Volume Driver Findings applies: pipelines that are triggered infrequently cannot achieve the routinization needed for reliable compliance. Confirmed in Skaun, Verdal, and Sogndal (parallel findings for § 17 decision pipelines; structurally identical logic).

§20-REQ-07: Scale flag: **PARTIAL.** Same [P] mechanism as REQ-06. Condition modifications are infrequent events; the requirement for a new decision on modification is likely to be missed in precisely those offices that process conditions rarely enough to have forgotten the procedural rule.

§20-REQ-08: Scale flag: **YES.** The "uttrykkelig" standard — requiring the decision to expressly display all three elements — is a documentation quality standard that the Volume Driver Findings' dominant [D] mechanism directly addresses. The finding from the Volume Driver Findings that "caseworkers knew more about the users' situations than the journals reflected" applies with full force here: caseworkers in small offices may set substantively appropriate conditions but fail the formal explicitness standard. This is a Tier 2 documentation driver per the Volume Driver Findings' structural analysis.

§20-REQ-09: Scale flag: **NO.** Appeal rights notification is a standard template element that does not scale with volume.

§20-REQ-10: Scale flag: **NO.** The "klart" standard for breach consequences appearing in the decision is addressed at the template level. No disproportionate burden.

§20-REQ-11: Scale flag: **NO.** The restriction on using § 20 conditions in § 17 decisions is a legal boundary that does not presuppose organizational capacity; it requires awareness, not volume.

§20-REQ-12: Scale flag: **NO.** A permissive option; imposes no compliance burden.

§20-REQ-13: Scale flag: **NO.** A prohibition requiring awareness, not organizational capacity.

§20-REQ-14: Scale flag: **YES.** The mandatory pre-assessment before exercising the "kan" power must be documented in every case where conditions are considered — including cases where the outcome is to set no condition. The Volume Driver Findings confirm that the [D] mechanism produces systematic compliance failures for assessment-documentation requirements in small offices: see Cluster 3 (child-perspective documentation) where the finding that caseworkers conduct assessments without documenting them applies with structural equivalence here. For § 20, the burden is specific: every decision to set no condition also requires documenting why the pre-assessment concluded against it, multiplying documentation demands beyond only the condition-setting cases. **This requirement has no circular authority for its most burdensome implication** — the documentation of negative assessments (decisions not to set conditions) — generating disproportionate burden without regulatory foundation as confirmed by the [D] mechanism analysis.

§20-REQ-15: Scale flag: **PARTIAL.** Proportionality assessment documentation is subject to the same [D]/[K] dynamic as REQ-14. The Volume Driver Findings confirm (Cluster 3) that documentation of individualized assessments is consistently the first compliance layer to fail in small offices, even when the underlying assessment has in fact been made.

§20-REQ-16: Scale flag: **NO.** Assessment of appropriate tasks is an individualized judgment within any competent caseworker's skill set. No volume sensitivity identified.

§20-REQ-17: Scale flag: **NO.** The right to be heard before adverse decisions is a universal procedural right; no scale disproportionality identified.

§20-REQ-18: Scale flag: **PARTIAL.** The documented individual assessment at the breach stage is subject to the same [D] mechanism dynamic as REQ-14 and REQ-15. Additionally, breach assessment procedures that are rarely triggered will not become routinized in small offices, implicating the [P] Procedural Continuity mechanism confirmed across the Volume Driver Findings dataset.

§20-REQ-19: Scale flag: **YES.** The Volume Driver Findings identify the child-perspective documentation cluster (Cluster 3) as a Tier 3 moderate-impact volume driver: "Requires individualized, written documentation of children's needs in every financial assistance decision... In small offices where caseworkers personally know every family, the information exists but is not written down." This applies directly to the children's needs assessment at the breach stage. The finding that "caseworkers verbally knew what they should do but failed to document it" is structurally confirmed for child-perspective assessments across approximately 25 Set B reports.

§20-REQ-20: Scale flag: **YES — and no circular authority, making the burden disproportionate without regulatory foundation.** The requirement to assess KVP eligibility as a sequencing prerequisite before setting an activity condition presupposes administrative infrastructure to conduct two parallel eligibility streams and document both. The Volume Driver Findings confirm in the § 20a context (Nav Vestby) that activity duty compliance involves structural dependency on organizational capacity: "Previously the municipality had a municipal programme... it was then easier to set conditions early... challenges are cited with waiting times for state-level measures." A pre-sequencing requirement adds a formal procedural layer on top of the already-challenging activity duty compliance infrastructure. Since this requirement lacks circular authority, the burden it imposes falls entirely outside any framework the circular provides guidance for.

§20-REQ-21: Scale flag: **YES.** The Volume Driver Findings confirm (§ 20a / Nav Vestby, Ringerike) that activity duty compliance for persons under 30 is a volume-sensitive requirement: the availability of appropriate measures, and the caseworker's ability to maintain routines for setting and following up conditions, scales with case volume. The Kommunebrev's mandatory "shall" language compounds this by removing the discretion that would otherwise allow small offices to respond proportionately to their capacity.

§20-REQ-22: Scale flag: **YES — and no circular authority, making the burden disproportionate without regulatory foundation.** The "main rule of collaboration" in condition-setting requires that the condition-setting process be documented as having been conducted collaboratively, or alternatively that the departure from the main rule be documented and justified. For small offices, this imposes a procedural documentation layer over every condition-setting case. The Volume Driver Findings' [P] Procedural Continuity and [D] Documentation Apparatus mechanisms apply. Since this requirement also lacks circular authority, caseworkers must comply with an obligation that the primary normative instrument governing their work explicitly characterizes as a non-prerequisite.

STEP 4 — PURPOSE CLASSIFICATION

§20-REQ-01: [USER NEED]. The obligation to inform users about possible benefit reductions directly serves the user's legal security and ability to make informed decisions. The statutory text itself establishes this as a prerequisite for any reduction, making it an instrument of user protection.

§20-REQ-02: [MIXED]. Primary: user need (the user needs to see the condition and grant decision as one integrated instrument to understand their obligations and rights). Secondary: internal control (placing the condition in the grant decision creates an administrative record that links condition to benefit, facilitating oversight). The primary function is user protection through administrative clarity; the secondary is documentation integrity.

§20-REQ-03: [USER NEED]. Reasoning serves the user's ability to understand the basis for the condition, to contest it, and to appeal. The Process Inflation Findings correctly classify this as rooted in the user's administrative law protections.

§20-REQ-04: [MIXED]. Primary: user need (clarity about what the duty requires directly enables compliance and informed decision-making by the user). Secondary: internal control (standardizing decision content enables supervisory review). The detailed content specification — derived from the circular's elaboration beyond what § 20 itself specifies — introduces a secondary internal documentation standard that exceeds the primary user protection rationale.

§20-REQ-05: [USER NEED]. Information about breach consequences directly serves the user's ability to make informed decisions about condition compliance. Statutory basis is explicit.

§20-REQ-06: [USER NEED]. The requirement for a new decision to implement breach consequences serves the user's procedural protection (new decision = new appeal right, new reasoning obligation, new individualized assessment). This is not primarily a documentation requirement; it is a procedural safeguard.

§20-REQ-07: [USER NEED]. Same rationale as REQ-06: a new decision for condition changes ensures the user receives a fresh appeal right and reasoning when their situation is altered.

§20-REQ-08: [MIXED]. Primary: user need (a written, reasoned decision allows the user to understand and appeal). Secondary: internal control (the "uttrykkelig" standard — expressly showing all three elements — adds a quality control layer that serves supervisory auditability more than it directly adds to the user's understanding beyond what a well-written decision would provide). The imperative "uttrykkelig" formulation primarily serves the administrative documentation standard; the underlying reasoning and clarity obligation already serves the user.

§20-REQ-09: [USER NEED]. Appeal rights information directly serves the user. No transaction cost burden identified — this is standard template content.

§20-REQ-10: [USER NEED]. The "klart" quality standard for breach consequence information serves the user's understanding. This is a circular quality elaboration of a statutory requirement, primarily serving user clarity.

§20-REQ-11: [USER NEED]. The restriction on using § 20 conditions in § 17 decisions protects the user from having a discretionary power misapplied to a different decision type. This is a legal boundary serving legal correctness, which is a user protection function.

§20-REQ-12: [USER NEED]. A permissive option for the user's benefit; no burden.

§20-REQ-13: [USER NEED]. Prohibition serving substantive user protection in emergency situations.

§20-REQ-14: [MIXED]. Primary: user need (ensuring conditions are appropriate serves the user directly). Secondary: internal control (the mandatory documented pre-assessment creates an administrative record demonstrating that appropriateness was considered, serving audit and supervisory functions). The circular's use of "skal alltid" (shall always) to mandate a documented assessment procedure — rather than simply permitting conditions where appropriate — converts a user-protective purpose into a procedural compliance demand. The documented pre-assessment is primarily a supervisory accountability instrument; the substantive protection is already provided by § 20's proportionality requirements. The Process Inflation Findings note that this "mandates a specific individual assessment process as a pre-condition before exercising substantive discretion."

§20-REQ-15: [MIXED]. Primary: user need (proportionality assessment directly protects the user from disproportionate conditions). Secondary: internal control (documentation of this assessment serves supervisory review). The proportionality obligation is directly statutory; the documented individual assessment format adds an internal control layer.

§20-REQ-16: [MIXED]. Primary: user need (appropriateness of tasks protects the user). Secondary: internal control (documentation of the task assessment is primarily an audit instrument). The open norm "passende" requires individual judgment; the documented assessment requirement operationalizes that judgment in a format serving supervisory accountability.

§20-REQ-17: [USER NEED]. The right to be heard before adverse decisions is entirely a user protection mechanism. No transaction cost burden identified — this obligation is procedural and protects the user.

§20-REQ-18: [MIXED]. Primary: user need (fair assessment at breach stage, considering cause and circumstances, directly protects the user from automatic and disproportionate reductions). Secondary: internal control (the documented concrete assessment at breach stage creates an administrative record that makes supervisory review of breach decisions possible). The Prop. 39 L basis confirms the user-protective primary function.

§20-REQ-19: [USER NEED]. The children's needs assessment at the breach stage directly serves children's welfare. No transaction cost burden identified — the substantive assessment is the obligation; its documentation is a secondary consequence.

Note: documentation of the children's assessment, while not classified as pure internal control, does attract the [D] scale burden identified in Step 3. The purpose is user need; the compliance problem is documentation.

§20-REQ-20: [INTERNAL CONTROL]. The KVP sequencing requirement primarily serves procedural administrative consistency and resource allocation optimization across two statutory regimes, not the user's need for assistance. The user's access to KVP is guaranteed by §§ 29–40 independently of any sequencing rule applied to § 20 decisions. The sequencing rule serves the administrative system's interest in ensuring that a more intensive support measure (KVP) is considered before a less intensive one (activity condition), but this ordering does not directly affect the user's case outcome since both options remain open regardless of sequence. The language of the Kommunebrev 2025 instrument frames this as an administrative procedure for NAV offices, not as a right for users. This requirement is sourced to a Kommunebrev, derives from a cross-regime administrative logic, and lacks both circular and statutory authority for its sequencing mandate: it is a procedural discipline for the internal administrative system.

§20-REQ-21: [MIXED]. Primary: policy objective (the mandatory activity condition for under-30s serves the statutory policy of self-sufficiency). Secondary: internal control (the mandatory "shall" language creates a documented compliance obligation that serves supervisory verification). The statutory backing in § 20a makes the primary classification as policy objective rather than internal control, but the Kommunebrev's formulation as a mandatory default (rather than a statutory provision with its own forvaltningsrettslig infrastructure) introduces a procedural compliance layer.

§20-REQ-22: [INTERNAL CONTROL]. The "main rule of collaboration" in condition-setting primarily serves procedural compliance with a veileder standard. The user's interests are not directly advanced by the documented collaboration process as such — what matters substantively is whether the condition is appropriate and proportionate, both of which are guaranteed by § 20's own requirements. The Veileder øk. stønad's "main rule" does not create a user right; it creates a procedural default for administrative process. Moreover, the requirement contradicts the R-35 § 20 circular's explicit statement that collaboration is not a prerequisite — meaning it serves a process standard that the primary normative instrument has already designated as non-mandatory. The purpose of documenting compliance with this "main rule" is internal administrative accountability, not user protection.

STEP 5 — TRANSACTION COST CHARACTERIZATION

Requirements classified as [USER NEED] with no transaction cost burden:

- §20-REQ-01, REQ-03, REQ-05, REQ-06, REQ-07, REQ-09, REQ-10, REQ-11, REQ-12, REQ-13, REQ-17, REQ-19

No transaction cost burden is identified for these requirements because their compliance demand coincides with what serving the user's case requires; the caseworker performing the substantive work simultaneously satisfies the requirement.

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§20-REQ-02 [MIXED] — Transaction Cost: The caseworker must ensure that the decision to set a condition is recorded in the same document as the economic support grant, not in a separate decision. This requires active formatting and drafting coordination: the caseworker cannot issue a grant decision first and then a separate conditions decision. The administrative demand is a document-consolidation discipline that must be maintained consistently across all condition-setting cases. **This imposes a low but systematically recurring documentation formatting burden.** Circular authority is present; the cost is proportionate.

§20-REQ-04 [MIXED] — Transaction Cost: The caseworker must draft decision text that explicitly states (a) what the duty requires, (b) what constitutes fulfillment, and (c) breach consequences, all with "tydelig" clarity. This requires writing three distinct substantive elements in each condition decision, not merely noting that a condition has been set. The administrative demand is a drafting quality standard. **This imposes a moderate drafting burden per condition-setting case, multiplied by the number of conditions set.** Circular authority is present; the cost is supported by the circular framework.

§20-REQ-08 [MIXED] — Transaction Cost: The caseworker must produce a decision that "uttrykkelig" (expressly) shows all three elements — not merely contains them — meaning the decision must be structured so that a supervisor reviewing it can verify compliance without interpretive effort. This is a quality standard applied to the decision document itself, above and beyond what good drafting would produce. The caseworker or leader may need to review draft decisions specifically for compliance with the "uttrykkelig" standard rather than just substantive correctness. **This imposes an additional quality-checking layer on every condition-setting decision.** Circular authority is present, but the "uttrykkelig" formulation adds a supervisory audit compliance layer beyond the user-need rationale. Caseworkers must draft not only for the user's understanding but for supervisory legibility.

§20-REQ-14 [MIXED] — Transaction Cost: The caseworker must document a concrete individual pre-assessment of appropriateness before setting any condition, even in cases where the assessment is straightforward. This requires creating a documented deliberation record as a precondition to exercising the "kan" power — meaning even decisions not to set conditions require a documented record showing why conditions were not appropriate. The caseworker must: (a) assess appropriateness, (b) document the assessment in writing, (c) reference the assessment in the decision, and (d) maintain the assessment in the case file. **This imposes a systematic pre-decision documentation obligation on every case where conditions are considered, including cases resulting in no conditions being set.** Circular authority is present, but the statutory authority is partial. The "skal alltid" formulation converts substantive proportionality judgment into a documented administrative procedure, creating documentation overhead that serves supervisory auditability more than user protection. The volume driver findings confirm ([D] mechanism, ~65 findings in Set B) that this type of documented assessment requirement systematically overwhelms small offices.

§20-REQ-15 [MIXED] — Transaction Cost: The caseworker must document the proportionality assessment — how burdensome the condition is — for every condition type,

considering the individual user and their family. This requires a distinct documented analysis per condition per case, separate from the reasoning obligation. The administrative demand is: (a) conduct assessment, (b) document weighting of burdensomeness, (c) document how burdensomeness was weighed against the reasons for the condition. **This imposes moderate documentation overhead per condition per case.** Circular authority is present; the statutory proportionality obligation supports this requirement. The documentation form adds internal control value.

§20-REQ-16 [MIXED] — Transaction Cost: The caseworker must document the individual assessment of which tasks are appropriate. This is a case-specific drafting demand per work-duty condition. The administrative demand is: (a) assess task suitability, (b) document the assessment, (c) reference the assessment in the decision. **This imposes low-to-moderate documentation overhead per activity condition.** Circular authority and statutory authority are both present; the cost is proportionate.

§20-REQ-18 [MIXED] — Transaction Cost: At the breach stage, the caseworker must document a concrete individual assessment before deciding whether to implement consequences. This requires: (a) actively soliciting and documenting the user's explanation for non-compliance, (b) assessing whether the breach reflects incapacity or unwillingness, (c) assessing impact on the user and family, (d) documenting all of this before issuing the breach-consequence decision. **This imposes a substantial additional procedural layer at the breach stage, requiring documentation of a multi-factor assessment that must be completed before the new decision can be issued.** Circular authority is present; the statutory basis is confirmed in preparatory works. The cost is high but supported by the regulatory framework.

§20-REQ-20 [INTERNAL CONTROL] — Transaction Cost: The caseworker must, before setting any activity condition, assess the user's eligibility for KVP (§§ 29–40) and document that this assessment has been conducted. The administrative demand is: (a) assess KVP eligibility against the separate statutory regime for §§ 29–40, (b) document the assessment outcome, (c) only then proceed to consider activity conditions under § 20. **This imposes a mandatory two-step procedural sequence — a cross-regime eligibility screening followed by documentation of that screening — on every case where activity conditions are contemplated.** This obligation falls outside any framework the circular provides guidance for: caseworkers must comply with a cross-regime procedural rule that the primary normative instrument governing their work (R-35 § 20) does not address. The Kommunebrev is the only source; no supervisory methodology guidance within the § 20 framework exists. The transaction cost is a Structural Disproportionality and Documentation Inflation combined burden arising from the double authority gap.

§20-REQ-21 [MIXED] — Transaction Cost: For persons under 30, the caseworker must: (a) identify the demographic, (b) assess whether weighty reasons ("tungtveiende grunner") speak against setting an activity condition, (c) document that assessment, (d) if no weighty reasons, set the activity condition, (e) if weighty reasons exist, document them explicitly. **The mandatory default ("shall unless...") converts discretion into a documented exception-management process.** Every under-30 case without an activity condition requires documentation of why weighty reasons were present. This falls outside the § 20 circular framework — the circular does not address under-30 mandatory conditions, so

caseworkers must comply with an obligation that their primary normative instrument provides no operational guidance for. Transaction cost: Documentation Inflation and Structural Disproportionality.

§20-REQ-22 [INTERNAL CONTROL] — Transaction Cost: The caseworker must conduct condition-setting through a collaboration process (or document why the main rule was departed from) and demonstrate this in the case record. The administrative demand is: (a) conduct a collaborative condition-setting dialogue, (b) document that collaboration took place, (c) if conditions are set unilaterally, document the justification for departing from the collaboration main rule. **This imposes a process documentation burden over the entire condition-setting phase, requiring the caseworker to demonstrate procedural compliance with a veileder standard that the primary normative instrument explicitly designates as a non-prerequisite.** This obligation falls entirely outside the § 20 circular framework, meaning caseworkers must comply with a collaboration-demonstration obligation that R-35 § 20 has already stated is not required. The contradictory authority situation (veileder says "main rule — collaborate"; circular says "not a prerequisite") creates interpretive overhead in addition to compliance burden. Transaction cost: Reporting Overhead and Documentation Inflation.

STEP 6 — CATALOG ENTRIES

REQUIREMENT ID: §20-REQ-01 **PROVISION TEXT:** Grant decision must inform user about possibility of benefit reduction upon breach of condition. **SOURCE INSTRUMENT:** R-35 Para 20 — statutory text (sosialtjenesteloven § 20 third paragraph) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — statutory text directly requires this element as a precondition for any benefit reduction. **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. Compliance is achieved through standard decision template language and coincides with the substantive service obligation. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §20-REQ-02 (= R2 / R14 in Process Inflation Findings — duplicate requirement) **PROVISION TEXT:** Decision to set conditions must appear in the grant decision for economic support, not in a separate decision. **SOURCE INSTRUMENT:** R-35 Para 20 — 4.20.1.1 (restated in two subsections, creating a documented duplicate within the circular itself) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — § 20 does not specify the formal instrument through which condition decisions are recorded; the consolidated-document requirement is a circular construction without explicit statutory anchor. Forvaltningsloven supports written decisions but does not specify their form. **DOUBLE AUTHORITY GAP:** NO (circular authority present) **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — small offices experience the [D] documentation apparatus

mechanism structurally; formatting coordination disciplines erode under low-volume conditions (confirmed across ~65 Set B findings for parallel documentation requirements). **PURPOSE:** MIXED — Primary: user need (administrative clarity for the user). Secondary: internal control (document consolidation serves supervisory audit by creating a linked record). **BURDEN DESCRIPTION:** Caseworker must coordinate decision drafting to ensure condition and grant appear in one document. Moderate document-formatting discipline burden per condition-setting case. Circular authority present; cost is proportionate within the circular framework. **KILL LIST CLASSIFICATION:** Category C — Clarification: The partial statutory authority for the consolidated-document requirement (versus a separate conditions decision) means that the room for maneuver — whether a well-drafted separate decision could satisfy the user's needs equally — needs to be made explicit to prevent over-compliance with a format that may not be legally required. **TRANSACTION COST CATEGORY:** Documentation Inflation (minor)

REQUIREMENT ID: §20-REQ-03 **PROVISION TEXT:** Conditions must be reasoned in the decision. **SOURCE INSTRUMENT:** R-35 Para 20 — 4.20.1.1; forvaltningsloven §§ 24–25; preparatory works Prop. 39 L **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — grounded in forvaltningsloven's universal reasoning obligation and preparatory works. **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. The reasoning obligation coincides with good administrative practice and the substantive drafting demand of issuing any lawful administrative decision. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §20-REQ-04 **PROVISION TEXT:** Decision must clearly state what the duty entails and what is required for the duty to be considered fulfilled. **SOURCE INSTRUMENT:** R-35 Para 20 — 4.20.1.1 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — § 20 specifies the permissible content of conditions but does not specify what the decision document must contain. The specific content-explicitness requirements are circular elaborations without direct statutory anchor in § 20. **DOUBLE AUTHORITY GAP:** NO (circular authority present) **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — content-drafting quality erodes with low encounter frequency ([K] mechanism; confirmed in Verdal, Nes, Sogndal for parallel decision-drafting requirements). **PURPOSE:** MIXED — Primary: user need (clarity about duty and fulfillment serves the user directly). Secondary: internal control (standardized content serves supervisory legibility and audit). **BURDEN DESCRIPTION:** Caseworker must draft two specific substantive elements in every condition decision — defining the duty and defining fulfillment — with "tydelig" (clear) quality. Moderate drafting overhead per condition per case. Circular authority present; the partial statutory anchoring means the specific content formulation is a circular-imposed drafting standard rather than a statutory one. **KILL LIST CLASSIFICATION:** Category C — Clarification: The room for maneuver in what level of content specificity satisfies the "tydelig" standard should be made explicit, given the partial statutory authority. The circular's standard may be stricter than forvaltningsloven requires. **TRANSACTION COST CATEGORY:** Documentation Inflation

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REQUIREMENT ID: §20-REQ-05 **PROVISION TEXT:** Decision must state what the consequences of potential breaches will be. **SOURCE INSTRUMENT:** R-35 Para 20 — 4.20.1.1; sosialtjenesteloven § 20 third paragraph **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — the statutory text makes breach consequences information a prerequisite for any reduction. **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. Standard template language satisfies this obligation. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §20-REQ-06 (= R6 / R16 in Process Inflation Findings — duplicate) **PROVISION TEXT:** A new decision must be issued to implement breach consequences. **SOURCE INSTRUMENT:** R-35 Para 20 — 4.20.1.1; preparatory works Prop. 39 L **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — preparatory works explicitly require a separate decision before support is reduced. **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — the requirement for a second administrative decision at the breach stage is subject to the [P] Procedural Continuity mechanism for infrequently triggered procedures (confirmed in § 17 context; structurally applicable here). **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified as a Kill List concern. The procedural protection for users (new decision = new appeal right) coincides with the compliance obligation. The [P] scale risk is noted but does not alter the purpose classification. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified (procedural burden is justified by the user protection function)

REQUIREMENT ID: §20-REQ-07 (= R7 / R17 in Process Inflation Findings — duplicate) **PROVISION TEXT:** A new decision must be issued if a condition is changed. **SOURCE INSTRUMENT:** R-35 Para 20 — 4.20.1.1 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — § 20 contains no provision addressing what must happen when conditions are modified. The new-decision requirement on condition change is a circular construction. General forvaltningsloven principles on amending binding decisions provide indirect support. **DOUBLE AUTHORITY GAP:** NO (circular authority present) **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — condition modifications are infrequent events; the [P] mechanism applies for procedures triggered rarely enough that routines cannot be maintained. **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified as a Kill List concern. The obligation to issue a new decision when conditions change serves the user's appeal rights. The partial statutory authority is noted but does not displace the user protection rationale. **KILL LIST CLASSIFICATION:** Category C — Clarification: The partial statutory authority for this specific procedural rule (versus alternative approaches to condition modification) means that the room for maneuver — including the possibility of a simplified amendment procedure — should be made explicit in the circular. **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §20-REQ-08 **PROVISION TEXT:** Nav must issue a written, reasoned decision that expressly ("uttrykkelig") shows that a condition is set, what the condition entails, and what the consequences of breach are. **SOURCE INSTRUMENT:** R-35 Para 20 — 4.20.2.2 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — the written reasoned decision requirement is grounded in forvaltningsloven. The specific "uttrykkelig" (express) standard — requiring the decision to display all three elements with supervisory legibility — is a circular quality standard exceeding the statutory text of § 20 and the general forvaltningsloven drafting requirements. **DOUBLE AUTHORITY GAP:** NO (circular authority present) **CATEGORY ERROR:** NO **SCALE FLAG:** YES — the "uttrykkelig" standard is a documentation quality demand directly implicating the dominant [D] Documentation Apparatus mechanism confirmed in ~65 Set B findings. Small offices systematically fail documentation quality standards for infrequent complex decisions even when the substantive service is delivered correctly. **PURPOSE:** MIXED — Primary: user need (written decision serves legal certainty). Secondary: internal control (the "uttrykkelig" formulation adds a supervisory auditability standard that serves oversight more than it adds to the user's understanding beyond a well-drafted decision). **BURDEN DESCRIPTION:** Caseworker must structure decision language so that all three elements — condition, content, consequence — are explicitly identifiable to a supervisor reviewing for compliance, not merely present as implied content. This is an additional quality-checking obligation layered over normal drafting. In small offices, this standard erodes when conditions are set infrequently and no established template discipline exists. The circular authority is present; however, the "uttrykkelig" formulation adds an audit-compliance layer that caseworkers must satisfy in addition to the user-oriented drafting obligation. **KILL LIST CLASSIFICATION:** Category B — Status Change: The "uttrykkelig" standard in the circular should be reformulated from imperative language to permissive-with-guidance language (e.g., specifying that a clear, well-structured decision is expected to include these elements, rather than imposing an express-showing obligation as a mandatory quality standard beyond the statutory and forvaltningsloven basis). This would restore local drafting discretion while preserving the user-protective function. **TRANSACTION COST CATEGORY:** Documentation Inflation

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REQUIREMENT ID: §20-REQ-09 **PROVISION TEXT:** Decision must inform user about right to appeal the condition. **SOURCE INSTRUMENT:** R-35 Para 20 — 4.20.2.2; forvaltningsloven § 27 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — forvaltningsloven § 27 mandates this universally in all enkeltvedtak. **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. Standard template language satisfies this obligation. The forvaltningsloven basis is universal and uncontested. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §20-REQ-10 **PROVISION TEXT:** Breach consequences must clearly ("klart") appear in the economic support decision. **SOURCE INSTRUMENT:** R-35 Para 20 — 4.20.2.8 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — the circular adds a clarity quality standard to the statutory precondition already established in § 20 third paragraph. This is a permissible circular elaboration. **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. The clarity standard is satisfied through standard drafting practice and coincides with the user-protection function of § 20. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §20-REQ-11 (= R11 / R27 in Process Inflation Findings — duplicate) **PROVISION TEXT:** Conditions under §§ 20 or 20a may not be set in decisions on guidance and advice under § 17. **SOURCE INSTRUMENT:** Veileder sotjl § 17 **CIRCULAR AUTHORITY:** ABSENT — this restriction has no textual presence in the R-35 § 20 circular framework. Caseworkers must comply with this obligation without receiving guidance from the primary normative instrument governing their § 20 decision-making. **First-order authority gap. LEGAL AUTHORITY:** YES — the restriction follows from the structural architecture of the Social Services Act: § 20 conditions attach to economic support grants; § 17 concerns a different service type. The restriction is a valid legal interpretation with a solid systemic basis. **DOUBLE AUTHORITY GAP:** NO (legal authority present despite circular absence) **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. The restriction requires legal awareness of the boundary between service types; it does not impose procedural overhead. However, the absence of circular authority means that caseworkers operating within the § 20 circular framework receive no guidance on this boundary from their primary normative reference. **KILL LIST CLASSIFICATION:** Category C — Clarification: The restriction should be incorporated into the R-35 § 20 circular to give it circular authority and eliminate the current situation where caseworkers must seek guidance on § 20's scope from a separate veileder for a different provision. **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §20-REQ-12 **PROVISION TEXT:** If a user wants guidance and counselling, it may be useful to condition economic support on seeking that guidance. **SOURCE INSTRUMENT:** Veileder sotjl § 17 **CIRCULAR AUTHORITY:** ABSENT — this permissive option has no textual presence in the R-35 § 20 circular. **First-order authority gap (for the source instrument). LEGAL AUTHORITY:** YES — permissive option within the "kan" power of § 20; requires no special statutory basis. **DOUBLE AUTHORITY GAP:** NO (legal authority present) **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. Permissive option; creates no compliance obligation. **KILL LIST CLASSIFICATION:** No Kill List Action — but the absence of circular authority for this guidance means it may not be known to caseworkers operating purely within the § 20 circular framework. A cross-reference would

serve operational clarity without altering the Kill List classification. **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §20-REQ-13 **PROVISION TEXT:** No conditions may be set for economic support in emergency situations. **SOURCE INSTRUMENT:** R-35 Para 20 — 4.20.2.1 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — follows directly from § 20's proportionality and connection requirements. **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. The prohibition requires awareness and legal judgment; it creates no documentation overhead. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §20-REQ-14 **PROVISION TEXT:** Before setting any condition, Nav must always conduct a concrete individual assessment of whether the condition is appropriate and will promote the user's path to self-sufficiency. **SOURCE INSTRUMENT:** R-35 Para 20 — 4.20.2.1 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — § 20 grants a permissive "kan" power without establishing a mandatory documented pre-assessment procedure as a precondition to exercising it. The proportionality requirements of § 20 implicitly require case-specific judgment, but the mandatory documented pre-assessment form — and particularly the "shall always" ("skal alltid") formulation — is a circular construct that converts substantive proportionality judgment into a documented procedural obligation. **DOUBLE AUTHORITY GAP:** NO (circular authority present) **CATEGORY ERROR:** NO **SCALE FLAG:** YES — the mandatory documented pre-assessment implicates the dominant [D] Documentation Apparatus mechanism (~65 Set B findings) and the [K] Competence Sustainability mechanism. In small offices, documented assessment routines for infrequently triggered decisions erode systematically (confirmed in Cluster 3 of Volume Driver Findings: child-perspective documentation; structurally identical to pre-condition assessment documentation). **PURPOSE:** MIXED — Primary: user need (ensuring conditions are appropriate protects the user). Secondary: internal control (the "skal alltid" mandate that the assessment be conducted and documented creates an administrative accountability record serving supervisory audit, converting substantive proportionality protection into a documented process obligation). **BURDEN DESCRIPTION:** Caseworker must document a concrete individual assessment of condition appropriateness before exercising the "kan" power — including in cases resulting in no conditions being set, where the assessment must document why conditions were not appropriate. The administrative demand is: (a) conduct appropriateness assessment, (b) document it in writing, (c) retain it in the case file as a precondition record. The "shall always" formulation makes this a systematic per-case obligation across all casework involving potential conditions. The circular authority is present; the partial statutory authority means the mandatory documented form is a circular-imposed procedure. The scale burden is confirmed by the [D] mechanism: small offices cannot maintain documented assessment routines for infrequent events. The transaction cost falls within the circular framework guidance. **KILL LIST CLASSIFICATION:** Category B — Status Change: The "skal alltid" formulation should be reformulated from

imperative to permissive language, restoring the "kan" discretion that § 20's own formulation preserves. The circular should state that Nav should consider whether conditions are appropriate, rather than mandating a documented pre-assessment as a procedural prerequisite to the discretionary power. **TRANSACTION COST CATEGORY:** Documentation Inflation; Structural Disproportionality (for small offices below the case volume threshold at which such routines can be sustained)

REQUIREMENT ID: §20-REQ-15 **PROVISION TEXT:** For all condition types, Nav must conduct a concrete individual assessment of how burdensome the condition is for the individual (and their family). **SOURCE INSTRUMENT:** R-35 Para 20 — 4.20.2.5 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — directly implements the statutory requirement that conditions must not be "uforholdsmessig byrdefulle" (disproportionately burdensome). The individual proportionality assessment is required by § 20 itself. **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — documented proportionality assessment is subject to the [D] mechanism: caseworkers conduct the assessment but fail to document it in small offices where case frequency is insufficient to build documentation routines (confirmed structurally in Volume Driver Findings Cluster 3). **PURPOSE:** MIXED — Primary: user need (proportionality protection directly serves the user). Secondary: internal control (documented individual assessment serves supervisory verification of proportionality compliance). **BURDEN DESCRIPTION:** Caseworker must document a proportionality analysis weighing condition burdensomeness against the reasons for the condition, per condition per case. Moderate documentation overhead. Circular and statutory authority both present; the cost is proportionate within the regulatory framework. **KILL LIST CLASSIFICATION:** No Kill List Action — the requirement is legally well-grounded and serves a primary user protection function. The documentation burden is proportionate to the statutory proportionality obligation it implements. **TRANSACTION COST CATEGORY:** Documentation Inflation (minor; proportionate to statutory obligation)

REQUIREMENT ID: §20-REQ-16 **PROVISION TEXT:** Nav must conduct a concrete individual assessment of which specific work tasks are appropriate for the individual. **SOURCE INSTRUMENT:** R-35 Para 20 — 4.20.2.7 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — directly implements the statutory open norm "passende arbeidsoppgaver" (suitable work tasks), which intrinsically requires individual determination. **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** MIXED — Primary: user need (assessment of appropriate tasks protects the user from unsuitable work conditions). Secondary: internal control (documented assessment serves supervisory review). The statutory open norm makes this primarily user-protective. **BURDEN DESCRIPTION:** Caseworker must document the task suitability assessment per activity condition. Low-to-moderate documentation overhead per case. Both circular and statutory authority present; the cost is proportionate. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** Documentation Inflation (minor; proportionate to statutory obligation)

REQUIREMENT ID: §20-REQ-17 **PROVISION TEXT:** Nav must ensure the user has had an opportunity to be heard before a decision on breach consequences is issued. **SOURCE INSTRUMENT:** R-35 Para 20 — 4.20.2.8; forvaltningsloven § 17 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — forvaltningsloven § 17 mandates the right to be heard before adverse administrative decisions. This applies universally. **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost burden identified. The obligation to give the user an opportunity to be heard before adverse decisions is a fundamental procedural protection that coincides entirely with the user's substantive interests. Compliance is achieved through the case handling process itself. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §20-REQ-18 **PROVISION TEXT:** At breach, Nav must conduct a concrete individual assessment of whether to implement the consequence, considering the cause of breach, capacity versus will, and impact on the user and family. **SOURCE INSTRUMENT:** R-35 Para 20 — 4.20.2.8; preparatory works Prop. 39 L **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — preparatory works explicitly require assessing cause and special circumstances before implementing breach consequences. **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — the multi-factor documented assessment at the breach stage is subject to both the [D] Documentation Apparatus and [P] Procedural Continuity mechanisms for infrequently triggered procedures. **PURPOSE:** MIXED — Primary: user need (fair individualized assessment at breach stage protects the user from automatic reductions). Secondary: internal control (documented assessment serves supervisory review of breach decisions). The primary function is user protection, confirmed by the preparatory works basis. **BURDEN DESCRIPTION:** Caseworker must document a multi-factor individual assessment at the breach stage before issuing the new decision: (a) solicit and document user's explanation, (b) assess incapacity versus unwillingness, (c) assess impact on user and family, (d) document all factors. This is a substantial documentation obligation at a procedurally complex stage. Circular and statutory authority present; the cost is supported by the regulatory framework. The [P] scale risk for rarely-triggered procedures is noted but does not alter the classification. **KILL LIST CLASSIFICATION:** No Kill List Action — well-grounded in statute and preparatory works, serving a primary user protection function. **TRANSACTION COST CATEGORY:** Documentation Inflation; Procedural Duplication (minor — the breach consequence decision must incorporate factors already present in the case file)

REQUIREMENT ID: §20-REQ-19 **PROVISION TEXT:** Where the user has children, Nav must assess what impact the breach consequence will have on the children and ensure children's needs are protected. **SOURCE INSTRUMENT:** R-35 Para 20 — 4.20.2.8; preparatory works Prop. 13 L; barnekonvensjonen Article 3; Grunnloven § 104 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — multiple statutory and constitutional bases confirm this obligation. **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** YES — the Volume Driver Findings identify the child-perspective

documentation cluster as a Tier 3 moderate-impact volume driver confirmed in approximately 25 Set B reports, with the dominant finding that "caseworkers verbally knew what they should do but failed to document it." This structural pattern applies directly to children's impact assessments at the breach stage in § 20 cases. **PURPOSE:** USER NEED (children as direct beneficiaries) **BURDEN DESCRIPTION:** No transaction cost burden identified as a Kill List concern. The assessment serves the substantive welfare of children and is constitutionally grounded. The [D] scale risk of documentation failure is noted — the assessment may be conducted but not documented in small offices — but this is a compliance risk, not a Kill List target. The obligation itself is correct. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** Documentation Inflation (arising from the [D] scale mechanism, not from the obligation itself) — noted but not classified as a Kill List concern.

REQUIREMENT ID: §20-REQ-20 **PROVISION TEXT:** The right to a qualification programme (KVP) must be assessed sequentially before an activity condition is set under § 20. **SOURCE INSTRUMENT:** Kommunebrev 2025 **CIRCULAR AUTHORITY:** ABSENT — this sequencing requirement derives entirely from Kommunebrev 2025 and has no textual presence in the R-35 § 20 circular. Caseworkers must comply with a cross-regime procedural sequencing obligation that their primary normative reference document does not address. **First-order authority gap. LEGAL AUTHORITY:** PARTIAL — § 20 imposes no sequencing requirement regarding KVP eligibility assessment. KVP rights are governed by a separate statutory regime (§§ 29–40) that operates independently of § 20. The Kommunebrev cannot create a cross-regime procedural prerequisite without statutory authority for that linkage. The Process Inflation Findings flag: "§ 20 imposes no sequencing requirement regarding KVP eligibility assessment; KVP rights are governed by separate sections." **DOUBLE AUTHORITY GAP:** YES — NO circular authority AND PARTIAL/NO statutory authority for the sequencing obligation itself. **CATEGORY ERROR:** PARTIAL — the obligation imports procedural logic from the KVP regime (§§ 29–40) into the § 20 decision-making framework without statutory authority for this cross-regime procedural rule. It belongs analytically to the KVP legal regime, not the § 20 conditions regime. **SCALE FLAG:** YES — the sequencing requirement presupposes administrative capacity to conduct parallel eligibility assessments and document both outcomes before proceeding to the activity condition decision. The Volume Driver Findings confirm ([T] Threshold-Dependent Quality for activity measures, Nav Vestby) that activity duty compliance is structurally sensitive to organizational capacity. Since this requirement lacks circular authority, any scale-related burden it imposes is unsupported by the circular framework and constitutes disproportionate burden without regulatory foundation. **PURPOSE:** INTERNAL CONTROL — the KVP sequencing requirement primarily serves administrative procedural consistency and resource allocation logic across two statutory regimes. The user's access to KVP is guaranteed by §§ 29–40 independently; the sequencing rule does not create any user right that did not already exist. The administrative purpose is ensuring that NAV applies the more intensive support measure (KVP) before the less intensive one (activity condition), serving the system's efficiency logic rather than the user's individual case outcome. **BURDEN DESCRIPTION:** Caseworker must: (a) assess KVP eligibility under §§ 29–40 as a mandatory first step, (b) document that assessment and its outcome, (c) only then proceed to consider activity conditions under § 20. This is a mandatory two-step cross-regime

procedural sequence imposed by a Kommunebrev without circular or statutory authority in the § 20 framework. The transaction cost falls entirely outside any framework the circular provides guidance for, meaning caseworkers must comply with an obligation that the primary normative instrument governing their § 20 work does not address. The double authority gap means the compliance overhead is unsupported by regulatory foundation. **KILL LIST CLASSIFICATION:** Category A — Removal: This requirement lacks both circular authority and statutory authority for the cross-regime sequencing obligation within § 20 decision-making. It derives from a Kommunebrev — a sub-legal instrument — and uses imperative language to create a procedural prerequisite that has no anchor in the Social Services Act's § 20 provisions. It should be removed from the § 20 normative framework. Where sequencing guidance is considered appropriate policy, it should be reformulated as a permissive recommendation within the § 20a framework (where activity conditions for under-30s are the statutory subject), not as an imperative prerequisite within § 20. **TRANSACTION COST CATEGORY:** Documentation Inflation; Structural Disproportionality; Combined Burden (cross-regime obligation without regulatory foundation)

REQUIREMENT ID: §20-REQ-21 **PROVISION TEXT:** For persons under 30 years of age, activity conditions shall be set when granting economic social assistance unless weighty reasons speak against it. **SOURCE INSTRUMENT:** Kommunebrev 2025 **CIRCULAR AUTHORITY:** ABSENT — this mandatory default rule has no textual presence in the R-35 § 20 circular. **First-order authority gap within the § 20 framework. LEGAL AUTHORITY:** YES — but in a different statutory provision. The activity duty for persons under 30 is anchored in sosialtjenesteloven § 20a, not § 20. The Kommunebrev correctly implements a statutory obligation, but that obligation belongs to the § 20a legal regime with its own decision-making infrastructure. **DOUBLE AUTHORITY GAP:** NO (statutory authority present in § 20a) **CATEGORY ERROR:** PARTIAL — this requirement belongs to the § 20a legal regime. Its inclusion in the § 20 analysis reflects a cross-regime analytical overlap: the Kommunebrev applies § 20a obligations in the context of § 20 condition-setting, creating analytical confusion between two separate statutory regimes. **SCALE FLAG:** YES — the Volume Driver Findings confirm ([T] mechanism, Nav Vestby; [K] mechanism, Ringerike) that activity duty compliance for under-30s is sensitive to the availability of appropriate measures and caseworker encounter frequency. The Kommunebrev's mandatory formulation compounds scale pressure by eliminating the discretion that would allow small offices to respond proportionately. **PURPOSE:** MIXED — Primary: statutory policy objective (self-sufficiency through activity obligation, anchored in § 20a). Secondary: internal control (the mandatory "shall unless" formulation creates a documented exception-management process serving supervisory verification). The mandatory default converts what § 20a's own statutory framework structures as a rights-and-obligations arrangement into a compliance-documentation obligation within the § 20 analytical framework. **BURDEN DESCRIPTION:** For every under-30 case without an activity condition, the caseworker must document the "weighty reasons" ("tungtveiende grunner") that justified the departure from the mandatory default. This converts discretion into documented exception management, imposing documentation overhead on every under-30 case that falls outside the mandatory default. Since this requirement lacks circular authority within the § 20 framework, caseworkers must comply with this obligation without receiving guidance from the primary normative instrument governing their § 20 decision-making. **KILL LIST CLASSIFICATION:**

Category C — Clarification within the § 20 framework: The room for maneuver — specifically that this obligation derives from § 20a rather than § 20, and that its full decision-making infrastructure (including the specific grounds for exception) should be found in the § 20a circular framework rather than in Kommunebrev guidance — needs to be made explicit. This would reduce shadow binding and cross-regime confusion without altering the underlying statutory obligation in § 20a. **TRANSACTION COST CATEGORY:** Documentation Inflation (exception documentation); Structural Disproportionality (mandatory default without scale sensitivity)

REQUIREMENT ID: §20-REQ-22 **PROVISION TEXT:** Conditions regarding the sale of assets must as a main rule be set in collaboration with the applicant; asset sale conditions may in any event not be made a prerequisite for having the need for assistance assessed. **SOURCE INSTRUMENT:** Veileder øk. stønad **CIRCULAR AUTHORITY:** ABSENT — this procedural default rule appears only in Veileder øk. stønad and has no textual presence in the R-35 § 20 circular framework. Critically, the circular (4.20.1) explicitly states that while conditions should in principle be set in collaboration, "dette er ikke en forutsetning" (this is not a prerequisite). The veileder's "main rule of collaboration" directly contradicts the circular's own explicit designation of collaboration as a non-prerequisite. **First-order authority gap; the source instrument contradicts the primary normative instrument. LEGAL AUTHORITY:** PARTIAL — § 20 is entirely silent on the procedural process for formulating conditions. The restriction that asset sale conditions cannot be a prerequisite for having the need assessed is more substantively grounded (rooted in § 20's requirement that condition-setting not be confused with the eligibility assessment). The "main rule" of collaboration, however, transforms a non-prerequisite process recommendation (circular's own language) into a mandatory procedural default — a direct shadow binding of the how-discretion that the primary normative instrument explicitly left open. **DOUBLE AUTHORITY GAP:** YES — NO circular authority AND PARTIAL statutory authority. The veileder's "main rule" formulation contradicts both the circular and the statutory structure of § 20's "kan" power. **CATEGORY ERROR:** NO — the obligation operates within the social services domain. However, the contradiction between source instruments constitutes an authority conflict that functions analytically like a double authority gap. **SCALE FLAG:** YES — the collaboration documentation obligation is subject to the [D] Documentation Apparatus mechanism and the [P] Procedural Continuity mechanism. Since this requirement lacks circular authority, any scale-related documentation burden it imposes is unsupported by the circular framework and constitutes disproportionate burden without regulatory foundation. **PURPOSE:** INTERNAL CONTROL — the "main rule of collaboration" primarily serves administrative process compliance with a veileder standard. The user's substantive interests are protected by § 20's proportionality and connection requirements; those protections operate regardless of whether conditions were set collaboratively or unilaterally. The prohibition on conditioning the need assessment on asset sales has a partial user protection rationale, but the broader "main rule" imposes a process discipline on the entire condition-setting interaction that serves veileder compliance, not the user's case outcome. **BURDEN DESCRIPTION:** Caseworker must: (a) structure the condition-setting process as a collaborative interaction, (b) document that collaboration took place, (c) if conditions are set unilaterally, document the justification for departing from the "main rule." This imposes process documentation overhead over the entire condition-setting phase. This obligation

falls entirely outside the § 20 circular framework — the primary normative instrument explicitly states that collaboration is not a prerequisite, meaning caseworkers operating within the § 20 circular are being told by the primary instrument that this process form is not required, while the veileder imposes it as a main rule. The contradictory authority situation creates interpretive overhead in addition to compliance burden. The double authority gap means the transaction cost is unsupported by regulatory foundation. **KILL LIST CLASSIFICATION:** Category A — Removal (partial): The "main rule of collaboration" formulation should be removed from the § 20 normative framework as it directly contradicts the circular's explicit statement and lacks both circular and statutory authority. The prohibition on conditioning the needs assessment on asset sales (which has a clearer legal basis in the structure of § 20) should be reformulated as a standalone, clearly bounded restriction without the broader "main rule" that creates the shadow binding problem. The underlying principle — that collaboration is good practice — can be retained in permissive advisory language consistent with the circular's own non-prerequisite framing.
TRANSACTION COST CATEGORY: Documentation Inflation; Reporting Overhead; Combined Burden (contradictory authority, no circular guidance, shadow binding of how-discretion)

CLOSING COMPARATIVE NOTE

Total requirements identified from Process Inflation Findings: 27 enumerated; **22 unique** after deduplication of Requirements 14, 15, 16, and 17 (which are textual repetitions of Requirements 2, 3+4, 6, and 7 respectively, appearing in different circular subsections). The Process Inflation Findings correctly identified these as separate listings, but analytical deduplication is necessary for Kill List purposes to avoid over-counting.

Requirements that would have been visible from the circular alone: 17 (Requirements 1–10, 13, 14/18, 15/19, 16/20, 17/21, 18/22, 19/23 — all those with textual presence in R-35 § 20). The circular-invisible requirements (§20-REQ-11, REQ-12, REQ-20, REQ-21, REQ-22) represent **5 unique requirements** — nearly one quarter of the unique requirement set — that are entirely unaddressable from within the primary normative instrument.

Double authority gaps: 2

- §20-REQ-20: KVP sequencing (Kommunebrev 2025) — NO circular authority, PARTIAL/NO statutory authority within § 20
- §20-REQ-22: Collaboration main rule for asset sales (Veileder øk. stønad) — NO circular authority, PARTIAL statutory authority; directly contradicts the circular

Category errors (different legal domain or cross-regime authority): 2 full, 2 partial

- §20-REQ-20: PARTIAL — imports KVP regime procedural logic into § 20 without statutory authority for the cross-regime sequencing rule
- §20-REQ-21: PARTIAL — belongs to the § 20a statutory regime; its appearance in the § 20 analysis reflects cross-regime confusion

- §20-REQ-09: NO error — forvaltningsloven is universally applicable and correctly applied
- §20-REQ-17: NO error — forvaltningsloven § 17 is universally applicable and correctly applied

Kill List breakdown:

Category	Requirements	Count
Category A — Removal	§20-REQ-20 (KVP sequencing), §20-REQ-22 (collaboration main rule — partially)	**2**
Category B — Status Change	§20-REQ-08 (uttrykkelig standard), §20-REQ-14 (mandatory pre-assessment / skal alltid)	**2**
Category C — Clarification	§20-REQ-02 (form of consolidated decision), §20-REQ-04 (content specificity), §20-REQ-07 (new decision on change), §20-REQ-11 (circular cross-reference), §20-REQ-21 (under-30 / cross-regime framing)	**5**
No Kill List Action	§20-REQ-01, 03, 05, 06, 09, 10, 12, 13, 15, 16, 17, 18, 19	**13**

Primary transaction cost categories by frequency:

Category	Frequency	Primary Requirements
Documentation Inflation	9 requirements	REQ-02, 04, 08, 14, 15, 16, 18, 20, 21, 22
Structural Disproportionality	3 requirements	REQ-14, REQ-20, REQ-21
Combined Burden	2 requirements	REQ-20, REQ-22
Reporting Overhead	1 requirement	REQ-22
Procedural Duplication	1 requirement	REQ-18
No Transaction Cost Identified	12 requirements	REQ-01, 03, 05, 06, 07, 09, 10, 11, 12, 13, 17, 19

Synthesis observation for the main report: The § 20 analysis reveals a normative architecture that is substantially sound at its statutory core. The majority of requirements in the circular have adequate legal grounding and serve genuine user protection functions. The Kill List targets are concentrated in three structural problems: (1) **shadow binding through "shall always" formulations** that convert substantive proportionality protections into mandatory documented process obligations (REQ-14, REQ-08), adding compliance

overhead without advancing the user-protective purpose; (2) **sub-legal instruments operating outside the primary normative instrument's framework** (REQ-20, REQ-22), imposing obligations with double authority gaps that caseworkers must satisfy without circular guidance; and (3) **cross-regime analytical confusion** (REQ-20, REQ-21) where Kommunebrev instruments import obligations from the § 20a regime into § 20 decision-making without statutory authority for the linkage. The dominant transaction cost mechanism across § 20 is Documentation Inflation, confirming the [D] Documentation Apparatus as the empirically predominant mechanism for this provision — consistent with the Volume Driver Findings' finding that documentation apparatus failures account for approximately 42% of all Set B findings across Norwegian social services supervision.

SLUDGE AUDIT — § 20a BRUK AV VILKÅR FOR PERSONER UNDER 30 ÅR

PRELIMINARY METHODOLOGICAL NOTE

Requirement count comparison:

Starting from the Process Inflation Findings (Document 4), a total of **21 distinct requirements** are identifiable once duplications across the parallel § 20 and § 20a extraction layers are consolidated. Starting from the circular alone (§ 20a statutory text + punkt 4.20a.1–4.20a.2.8, Document 2), a direct reading would surface **16–17** requirements. The delta of **4–5 requirements** is attributable to sub-legal instruments that operate entirely outside the circular framework.

Requirements with no textual presence in the circular:

Requirement	Source Instrument	Instrument Category
Prohibition on § 20/20a conditions in § 17 decisions	*Veileder til sosialtjenesteloven § 17*	(b) Veileder
Counseling requirement may function as condition in economic assistance decision	*Veileder til sosialtjenesteloven § 17*	(b) Veileder
Asset sale conditions must as a main rule be formulated in collaboration with the applicant	*Veileder til økonomisk stønad*	(b) Veileder
Broad and flexible activity portfolio (bør-language)	*Kommunebrev 2025*	(a) Kommunebrev

Structural observation: The KVP sequencing obligation appears in both *Kommunebrev 2025* and punkt 4.20a.2.1 of the circular; it therefore has partial circular presence. The four requirements above have zero textual presence in the circular and are entirely invisible to any analyst working from Document 2 alone. This establishes the core analytical value of the Process Inflation Findings as the reference document: the circular systematically understates its own operative normative universe.

STEP 1 — IDENTIFICATION OF ALL REQUIREMENTS

The following 21 consolidated distinct requirements are enumerated from the Process Inflation Findings. Duplications across the § 20 and § 20a extraction layers have been merged; where the same obligation appears in both layers, the § 20a-specific instrument is treated as primary.

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§20a-R1 — Mandatory activity condition for persons under 30

- *Exact obligation:* Det skal stilles vilkår om aktivitet for tildeling av økonomisk stønad til personer under 30 år med mindre tungtveiende grunner taler mot det.
- *Source instrument:* Sosialtjenesteloven § 20a; R-35 punkt 4.20a (beginning); Kommunebrev 2025
- *Explicit or implicit:* Explicit
- *Circular presence:* PRESENT (§ 20a statutory text + punkt 4.20a.2.1)

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§20a-R2 — Language/Norwegian training assessment and condition

- *Exact obligation:* Dersom manglende norsk- eller samiskkunnskaper er årsaken til at personen ikke er selvhjulpen, skal det vurderes å stille vilkår om norsk- eller samiskopplæring. For tjenestemottakere med rett og plikt til introduksjonsprogram skal det stilles vilkår om norskopplæring.
- *Source instrument:* Sosialtjenesteloven § 20a; R-35 punkt 4.20a (beginning and "Om vilkår om språk"); Forskrift om bruk av vilkår § 1
- *Explicit or implicit:* Explicit
- *Circular presence:* PRESENT

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§20a-R3 — NIR verification of introduction program status

- *Exact obligation:* For at tjenestemottaker skal omfattes av norskopplæringsplikten må det fremgå av opplysninger i Nasjonalt introduksjonsregister (NIR) at vedkommende har rett og plikt til å delta i introduksjonsprogram. Nav-kontoret kan innhente opplysninger fra NIR.
- *Source instrument:* Sosialtjenesteloven § 20a; Forskrift om bruk av vilkår § 1; R-35 punkt 4.20a.2.1
- *Explicit or implicit:* Explicit
- *Circular presence:* PRESENT (punkt 4.20a.2.1 "Om vilkår om språk")

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§20a-R4 — Assessment of weighty reasons for exemption from activity condition

- *Exact obligation:* Nav-kontoret må foreta en konkret og individuell vurdering av om det foreligger tungtveiende grunner for ikke å delta i aktivitet.
- *Source instrument:* R-35 punkt 4.20a (middle, "Om tungtveiende grunner")
- *Explicit or implicit:* Explicit

- *Circular presence:* PRESENT

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§20a-R5 — Ongoing follow-up and re-imposition when weighty reasons cease

- *Exact obligation:* Hvis tjenestemottaker har tungtveiende grunner på vedtakstidspunktet må Nav-kontoret følge opp vedkommende med tiltak og støtte, og stille vilkår om aktivitet når det ikke lenger foreligger tungtveiende grunner.
- *Source instrument:* R-35 punkt 4.20a (middle)
- *Explicit or implicit:* Explicit
- *Circular presence:* PRESENT

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§20a-R6 — KVP sequential check before activity conditions

- *Exact obligation:* Rett til kvalifiseringsprogram skal vurderes før det stilles vilkår om aktivitet. / Tjenestemottakere som fyller kravene for deltakelse i kvalifiseringsprogram skal få tilbud om dette før det vil være aktuelt å tildele økonomisk stønad med vilkår om aktivitet.
- *Source instrument:* R-35 punkt 4.20a.2.1; Kommunebrev 2025
- *Explicit or implicit:* Explicit
- *Circular presence:* PRESENT (R-35 formulation); reinforced but not originated by Kommunebrev 2025

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§20a-R7 — Individual assessment of appropriate activity content for the user

- *Exact obligation:* Nav-kontoret må foreta en konkret og individuell vurdering av hvilke aktiviteter som er hensiktsmessig for den enkelte. Tjenestemottakers behov, synspunkter og ønsker skal tas med i vurderingene.
- *Source instrument:* R-35 punkt 4.20a.2.1
- *Explicit or implicit:* Explicit
- *Circular presence:* PRESENT

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§20a-R8 — User participation in condition-setting (collaboration as main rule)

- *Exact obligation:* Vilkår skal i utgangspunktet stilles i samarbeid med tjenestemottaker. Der hvor Nav-kontoret ensidig pålegger tjenestemottaker vilkår, skjerpes kravene til den konkrete og individuelle vurderingen.
- *Source instrument:* R-35 punkt 4.20a.2.1; 4.20a.2.2
- *Explicit or implicit:* Explicit
- *Circular presence:* PRESENT

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§20a-R9 — Individual burden/proportionality assessment per condition

- *Exact obligation:* For alle typer vilkår skal Nav-kontoret foreta en konkret og individuell vurdering av hvor tyngende vilkåret er for den enkelte tjenestemottaker, og eventuelt vedkommendes familie.
- *Source instrument:* R-35 punkt 4.20a.2.6
- *Explicit or implicit:* Explicit
- *Circular presence:* PRESENT

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§20a-R10 — Condition decision must appear in grant decision (written, reasoned)

- *Exact obligation:* Avgjørelse om å stille vilkår skal fremgå av vedtaket om tildeling av økonomisk stønad. Nav-kontoret skal fatte et skriftlig, begrunnet vedtak.
- *Source instrument:* R-35 punkt 4.20a.1.1; 4.20a.2.3
- *Explicit or implicit:* Explicit
- *Circular presence:* PRESENT

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§20a-R11 — Decision content: obligation, fulfillment criteria, breach consequences

- *Exact obligation:* Det må tydelig fremkomme av vedtaket hva plikten innebærer, hva som kreves for at plikten skal anses oppfylt, og hva som kan bli konsekvensene av eventuelle brudd på vilkårene.
- *Source instrument:* R-35 punkt 4.20a.1.1; 4.20a.2.3
- *Explicit or implicit:* Explicit
- *Circular presence:* PRESENT

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§20a-R12 — Decision must inform about appeal rights

- *Exact obligation:* Vedtaket må opplyse om adgangen til å klage på vedtaket.
- *Source instrument:* R-35 punkt 4.20a.2.3
- *Explicit or implicit:* Explicit
- *Circular presence:* PRESENT

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§20a-R13 — New decision required when conditions are changed

- *Exact obligation:* Hvis vilkåret endres, skal det fattes nytt vedtak.
- *Source instrument:* R-35 punkt 4.20a.1.1
- *Explicit or implicit:* Explicit
- *Circular presence:* PRESENT

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§20a-R14 — New decision required to implement breach consequences

- *Exact obligation:* Hvis konsekvensen av vilkårsbrudd skal iverksettes, må det fattes et nytt vedtak. Konsekvensene må knyttes til det løpende stønadsvedtaket. Brudd på vilkår kan ikke begrunne reduksjon i fremtidige vedtak.
- *Source instrument:* Sosialtjenesteloven § 20a (3); R-35 punkt 4.20a.1.1; 4.20a.2.8
- *Explicit or implicit:* Explicit
- *Circular presence:* PRESENT

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§20a-R15 — User must have opportunity to comment before breach consequence decision

- *Exact obligation:* Nav-kontoret må sørge for at tjenestemottaker har fått mulighet til å uttale seg før vedtaket om konsekvensen av vilkårsbruddet fattes.
- *Source instrument:* R-35 punkt 4.20a.2.8
- *Explicit or implicit:* Explicit
- *Circular presence:* PRESENT

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§20a-R16 — Concrete individual assessment before breach consequence decision

- *Exact obligation:* Ved brudd på vilkår skal det gjøres en konkret og individuell vurdering av om det skal fattes vedtak om at konsekvensen skal gjennomføres. I denne vurderingen skal det tas hensyn til årsaken tjenestemottaker oppgir for ikke å ha oppfylt vilkåret, om årsaken skyldes evne eller vilje, og hvilken betydning konsekvensen får for tjenestemottaker og eventuell familie.
- *Source instrument:* R-35 punkt 4.20a.2.8
- *Explicit or implicit:* Explicit
- *Circular presence:* PRESENT

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§20a-R17 — Child impact assessment mandatory when breach consequences affect families

- *Exact obligation:* Nav-kontoret skal alltid sikre at barns behov blir ivaretatt, og det må derfor foretas en konkret og individuell vurdering av hvilken betydning konsekvensene av vilkårsbruddet får for barna.
- *Source instrument:* R-35 punkt 4.20a.2.8 (end); Prop. 13 L (implied authority)
- *Explicit or implicit:* Explicit
- *Circular presence:* PRESENT

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§20a-R18 — Prohibition on § 20/20a conditions in § 17 decisions

- *Exact obligation:* Det kan ikke settes vilkår etter sotjl. §§ 20 eller 20a i vedtak om opplysning, råd og veiledning etter sotjl. § 17.
- *Source instrument:* Veileder til sosialtjenesteloven § 17
- *Explicit or implicit:* Explicit
- *Circular presence:* ABSENT — no textual presence in § 20a circular

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§20a-R19 — Asset sale conditions must as main rule be formulated in collaboration

- *Exact obligation:* Vilkår om salg av eiendeler kan ikke stilles som en forutsetning for å få hjelpebehov vurdert, og skal som hovedregel settes i samarbeid med den som søker.
- *Source instrument:* Veileder til økonomisk stønad
- *Explicit or implicit:* Explicit
- *Circular presence:* ABSENT — no textual presence in § 20a circular

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§20a-R20 — Broad and flexible activity portfolio (bør)

- *Exact obligation:* Nav-kontoret og kommunen bør tilstrebe å bygge opp brede og fleksible aktivitetstilbud for de unge.
- *Source instrument:* Kommunebrev 2025
- *Explicit or implicit:* Explicit (advisory register)
- *Circular presence:* ABSENT — no textual presence in § 20a circular; structurally implied by the activity portfolio obligation in punkt 4.20a.1 but not textually stated there

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§20a-R21 — No conditions may be set in emergency situations

- *Exact obligation:* Det skal ikke stilles vilkår for tildeling av økonomisk stønad i en nødssituasjon.
- *Source instrument:* R-35 punkt 4.20a (beginning)
- *Explicit or implicit:* Explicit
- *Circular presence:* PRESENT

STEP 2 — LEGAL AUTHORITY CHECK

Direction 1: Circular authority (is the requirement contained in the § 20a circular, Document 2?) **Direction 2: Statutory authority** (does the requirement have direct grounding in sosialtjenesteloven or directly applicable superior law?)

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§20a-R1 — Mandatory activity condition for under-30s

- D1 Circular authority: PRESENT
- D2 Statutory authority: YES — sosialtjenesteloven § 20a første ledd, første punktum. Direct statutory text.
- Double authority gap: NO
- Category error: NO

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§20a-R2 — Language training assessment and condition

- D1 Circular authority: PRESENT
- D2 Statutory authority: YES — sosialtjenesteloven § 20a første ledd, second and third punktum; Forskrift om bruk av vilkår § 1
- Double authority gap: NO
- Category error: NO

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§20a-R3 — NIR verification

- D1 Circular authority: PRESENT
- D2 Statutory authority: YES — sosialtjenesteloven § 20a (NIR-access provision); Forskrift om bruk av vilkår § 1. Statutory basis is solid for the permission; the *obligation* to verify before imposing language training condition flows directly from Forskriften.
- Double authority gap: NO
- Category error: NO
- Note from Process Inflation Findings: PROC-REQ-20a.2 — legal gap was assessed as "no gap identified." Confirmed.

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§20a-R4 — Assessment of weighty reasons

- D1 Circular authority: PRESENT
- D2 Statutory authority: YES — sosialtjenesteloven § 20a, fifth punktum ("Det skal ikke stilles vilkår om aktivitet når tungtveiende grunner taler mot det"). The assessment obligation is the direct procedural implementation of a statutory standard.
- Double authority gap: NO
- Category error: NO

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§20a-R5 — Follow-up and re-imposition when weighty reasons cease

- D1 Circular authority: PRESENT

- D2 Statutory authority: PARTIAL — sosialtjenesteloven § 20a establishes the mandatory condition obligation but does not explicitly address the follow-up and re-imposition temporal obligation. This is a circular elaboration operationalizing the statutory duty through a temporally specified procedural rule. Process Inflation Findings identified no explicit gap but the forward-looking re-imposition obligation derives primary force from the circular rather than the statute.
- Double authority gap: NO (circular authority present)
- Category error: NO

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§20a-R6 — KVP sequential check

- D1 Circular authority: PRESENT (punkt 4.20a.2.1 contains this sequencing rule)
- D2 Statutory authority: PARTIAL — sosialtjenesteloven contains no explicit sequencing provision placing KVP assessment before § 20a conditions. The duty flows from general principles of good administration and the purpose of KVP under sosialtjenesteloven § 29, but not from an explicit statutory sequencing rule. The mandatory form ("skal") in punkt 4.20a.2.1 and Kommunebrev 2025 exceeds the statutory text. Process Inflation Findings: PROC-REQ-20a.12 identifies the gap: "§ 20a S1 mandates activity conditions but contains no prerequisite sequencing assessment for KVP rights."
- Double authority gap: NO (circular authority present, though statutory authority is PARTIAL)
- Category error: NO
- Note: Kommunebrev 2025's restatement of this rule constitutes a (a) Kommunebrev reinforcement of an already-PARTIAL authority chain.

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§20a-R7 — Individual assessment of appropriate activities

- D1 Circular authority: PRESENT
- D2 Statutory authority: YES — the obligation flows from sosialtjenesteloven § 4 (forsvarlighetskravet), § 42 (brukermedvirkning), and forvaltningsloven § 17 (utredningsplikten). The specific procedural form is circular elaboration but the substantive obligation has clear statutory grounding.
- Double authority gap: NO
- Category error: NO

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§20a-R8 — User participation in condition-setting

- D1 Circular authority: PRESENT
- D2 Statutory authority: YES — sosialtjenesteloven § 42 (brukermedvirkning). Circular uses "i utgangspunktet" (as a main rule), preserving limited discretion.
- Double authority gap: NO
- Category error: NO

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§20a-R9 — Burden/proportionality assessment per condition

- D1 Circular authority: PRESENT
- D2 Statutory authority: YES — sosialtjenesteloven § 20a (second paragraph explicitly states conditions "må ikke være uforholdsmessig byrdefulle"). The concrete individual assessment is the procedural mechanism to apply this statutory standard.
- Double authority gap: NO
- Category error: NO

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§20a-R10 — Condition in written, reasoned grant decision

- D1 Circular authority: PRESENT
- D2 Statutory authority: YES/PARTIAL — sosialtjenesteloven § 20a and the general administrative law framework (forvaltningsloven §§ 23–25) ground the written, reasoned decision requirement. The specific requirement that the condition must appear *in the grant decision rather than a separate decision* is a circular specification without explicit statutory basis. Process Inflation Findings DOC-REQ-20.2: "§ 20 contains no explicit requirement that the decision to set conditions must appear in the grant decision as opposed to a separate decision." This applies equally to § 20a.
- Double authority gap: NO (circular authority present)
- Category error: NO

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§20a-R11 — Decision content: obligation, fulfillment criteria, consequences

- D1 Circular authority: PRESENT
- D2 Statutory authority: YES — forvaltningsloven § 25 (begrunnelse) and Prop. 13 L provide direct grounding for the detailed content requirements. The specific enumeration of three mandatory content elements (plikt, oppfyllelse, konsekvens) represents circular elaboration that is nonetheless grounded in administrative law principles.
- Double authority gap: NO
- Category error: NO

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§20a-R12 — Appeal rights notification

- D1 Circular authority: PRESENT
- D2 Statutory authority: YES — forvaltningsloven § 27 creates an independent mandatory obligation to inform about appeal rights. No gap.
- Double authority gap: NO
- Category error: NO

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§20a-R13 — New decision when conditions change

- D1 Circular authority: PRESENT
- D2 Statutory authority: PARTIAL — forvaltningsloven § 35 governs amendment of administrative decisions, but does not explicitly require a *new* decision each time conditions are *modified* (as distinct from revoked). The mandatory form in the circular ("skal fattes nytt vedtak") goes beyond the general administrative law framework without explicit statutory grounding in sosialtjenesteloven. Process Inflation Findings DOC-REQ-20.7: "§ 20 contains no provision addressing what must happen procedurally when conditions are changed."
- Double authority gap: NO (circular authority present)
- Category error: NO

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§20a-R14 — New decision to implement breach consequences

- D1 Circular authority: PRESENT
- D2 Statutory authority: YES — sosialtjenesteloven § 20a (3) uses the formula "fattes vedtak om at stønaden reduseres," directly mandating a vedtak for breach consequences. The statutory grounding is firm.
- Double authority gap: NO
- Category error: NO

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§20a-R15 — User comment opportunity before breach decision

- D1 Circular authority: PRESENT
- D2 Statutory authority: YES — forvaltningsloven § 16 (forhåndsvarsling) creates a mandatory procedural guarantee before adverse decisions. No gap.
- Double authority gap: NO
- Category error: NO

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§20a-R16 — Concrete individual assessment before breach consequence

- D1 Circular authority: PRESENT
- D2 Statutory authority: YES — forvaltningsloven § 17 (utredningsplikt) and sosialtjenesteloven § 4 (forsvarlighetskravet) together ground the individualized assessment requirement.
- Double authority gap: NO
- Category error: NO

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§20a-R17 — Child impact assessment for breach consequences

- D1 Circular authority: PRESENT

- D2 Statutory authority: PARTIAL — Prop. 13 L authorizes special consideration for children's needs, and barnekonvensjonen Article 3 provides supra-legislative authority. However, the *always* formulation in the circular ("skal alltid sikre," "må foretas en konkret og individuell vurdering") goes beyond what either the statute or the convention mandates in form. Process Inflation Findings PROC-REQ-20a.11: "Prop. 13 L authorizes special consideration but does not strictly mandate a separate, mandatory 'always' assessment regarding child impacts devoid of flexibility."
- Double authority gap: NO (circular authority present)
- Category error: NO

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§20a-R18 — Prohibition on § 20/20a conditions in § 17 decisions

- D1 Circular authority: ABSENT — this requirement derives from Veileder til sosialtjenesteloven § 17, which is a veileder, not the § 20a circular. There is no corresponding text in the § 20a circular framework.
- D2 Statutory authority: YES — the prohibition is constitutionally sound: sosialtjenesteloven § 17 creates a separate service obligation, and conditions under §§ 20/20a are legally restricted to grant decisions. The substantive rule is correct in law. The authority gap is purely formal: the operative normative instrument is a veileder, not the circular governing the domain.
- Double authority gap: NO (statutory authority YES despite circular authority ABSENT)
- Category error: NO (substantive legal content is correct; the issue is instrument level, not domain)

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§20a-R19 — Asset sale conditions in collaboration (Veileder øk. stønad)

- D1 Circular authority: ABSENT — derives from Veileder til økonomisk stønad; no textual presence in the § 20a circular.
- D2 Statutory authority: PARTIAL — sosialtjenesteloven § 20a (second paragraph) contains the proportionality and voluntariness standards that ground this requirement, and § 42 grounds user collaboration. But the specific formulation as a default rule ("skal som hovedregel") exceeds the statutory text and is a veileder construction.
- Double authority gap: NO (statutory authority PARTIAL, not NO)
- Category error: NO

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§20a-R20 — Broad and flexible activity portfolio (Kommunebrev 2025)

- D1 Circular authority: ABSENT — derives from Kommunebrev 2025; no textual presence in the § 20a circular.

- D2 Statutory authority: PARTIAL — sosialtjenesteloven § 20a places the obligation to set conditions on Nav-kontoret but does not mandate that the municipality maintain a specific portfolio breadth or quality. The Anchor Document (Volume Driver Findings, Part 4, Tier 4) explicitly flags: "the obligation to maintain a diverse portfolio is articulated primarily in the circular (shall-language). Whether the statute independently mandates this breadth requires legal verification." The Kommunebrev uses *bør* (advisory), which reduces but does not eliminate the authority question.
- Double authority gap: NO (advisory language reduces; circular authority absent but statutory partial)
- **Note:** Although not a double authority gap by strict classification, this requirement exhibits a structural authority vulnerability: it operates outside the circular in advisory language from a Kommunebrev, with partial statutory grounding only. It is the single requirement most exposed to the Volume Driver's [T] mechanism.
- Category error: NO

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§20a-R21 — No conditions in emergency situations

- D1 Circular authority: PRESENT
- D2 Statutory authority: YES — sosialtjenesteloven § 4 (forsvarlighetskravet) and the purpose provisions in § 1. The prohibition is a well-grounded legal principle.
- Double authority gap: NO
- Category error: NO

DOUBLE AUTHORITY GAP SUMMARY: No requirement in the § 20a domain meets the strict double authority gap test (circular authority ABSENT and statutory authority NO). However, four requirements — R18, R19, R20, and partially R6 — exhibit **first-order authority gaps** (circular authority absent), and three of these (R5, R13, R17) exhibit **elevated authority risk** due to the circular's "shall" language exceeding the statutory text.

STEP 3 — SCALE AND PROPORTIONALITY CHECK

Cross-reference with Volume Driver Findings (Document 3).

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§20a-R1 — Mandatory activity condition

- Scale flag: YES — Anchor Document Part 4, Tier 4 and Summary Table Rank 7: "Activity portfolio (§ 20a), Mechanism T (Threshold-Dependent Quality), confirmed in Nav Vestby." The obligation to set conditions presupposes conditions can actually be fulfilled; in municipalities without a functioning activity portfolio, the condition requirement is formally operative but materially hollow.

- Specific finding: Nav Vestby 2025 — "Det oppgis at kommunen tidligere hadde et kommunalt tiltak. Det var da enklere å stille vilkår... ventetider på statlige tiltak" (Part 1, Requirement 1).

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§20a-R2 — Language training condition

- Scale flag: YES (PARTIAL) — Anchor Document Part 1, Requirement 2: Mechanism K (Competence Sustainability) — "Formally mapping a young person's language proficiency against established assessment frameworks requires specialist skill that will decay in a generalist office that rarely handles such cases." Flagged as latent volume driver; no Set B confirmation yet.

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§20a-R3 — NIR verification

- Scale flag: YES (PARTIAL) — Anchor Document Part 1, Requirement 3: Mechanism D (Documentation Apparatus) — "Maintaining active user access, technical connections, and routine familiarity with a specialized external national database imposes overhead that assumes back-office support or steady throughput." Flagged as latent volume driver; analogous to confirmed Compilo/ASYS/QM+ fragmentation findings.

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§20a-R4 — Assessment of weighty reasons

- Scale flag: NO — The weighty reasons assessment is a single individualized judgment for each case. It does not presuppose sustained organizational capacity. No specific Volume Driver finding applies. The quality of the assessment may degrade with low volume (K-mechanism risk), but the assessment itself does not require infrastructure.

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§20a-R5 — Follow-up and re-imposition

- Scale flag: YES (PARTIAL) — Anchor Document Part 2, Mechanism P (Procedural Continuity): "the inability to maintain a repeatable pipeline" when a trigger fires fewer than 10–15 times per year. The forward-looking monitoring obligation — tracking when weighty reasons cease — requires a case-management pipeline that small offices with irregular § 20a throughput cannot sustain habitually. Not confirmed specifically for § 20a; structural plausibility is high.

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§20a-R6 — KVP sequential check

- Scale flag: YES (PARTIAL) — Anchor Document Part 2, Mechanism P, and Part 4, Tier 3: The KVP eligibility assessment requires caseworkers to maintain familiarity with a separate statutory program's eligibility criteria. In offices processing fewer than 10 KVP assessments annually, this competence decays (Mechanism K intersection). No specific § 20a finding in the corpus; structural plausibility confirmed in adjacent domains.

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§20a-R7 — Individual assessment of appropriate activities

- Scale flag: YES — Anchor Document Part 4, Tier 4, T-mechanism: "for 1–2 youths per year, the 'activity' degrades to ad hoc, isolated tasks." The assessment's quality is directly dependent on whether appropriate activities exist and are known to the caseworker. Low-volume offices will struggle to conduct meaningful individual assessments when the pool of available activities is itself limited by volume constraints.

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§20a-R8 — User participation in condition-setting

- Scale flag: NO — The collaboration requirement imposes time per case but does not require organizational infrastructure beyond the case relationship. No Volume Driver finding applies directly.

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§20a-R9 — Burden/proportionality assessment

- Scale flag: NO — Individual assessment per case; does not presuppose organizational scale. However, the quality of the assessment benefits from experienced workers who have processed similar cases frequently (K-mechanism risk, not flagged in corpus for § 20a).

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§20a-R10 — Written, reasoned decision

- Scale flag: YES (PARTIAL) — Anchor Document Dominant Mechanism D: "frontline generalists in small offices deliver competent practical help but fail to translate that help into the formal administrative artefacts demanded by supervisory standards." The vedtak-production pipeline is the most pervasive volume-sensitive failure in the corpus. The specific § 20a vedtak requirement is structurally identical to the § 17 vedtak requirement confirmed in 35+ Set B reports.

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§20a-R11 — Decision content requirements

- Scale flag: YES (PARTIAL) — Same D-mechanism as R10. The three-element content requirement (obligation, fulfillment, consequences) demands detailed individual drafting. In high-volume environments, this becomes routine; in low-volume environments (1–3 § 20a cases per year), each decision requires reconstructing the drafting practice from near-scratch.

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§20a-R12 — Appeal rights notification

- Scale flag: NO — Standardizable, not volume-sensitive. Can be embedded in template.

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§20a-R13 — New decision when conditions change

- Scale flag: YES (PARTIAL) — Mechanism P: the condition-amendment pipeline requires caseworkers to recognize modification events and trigger a new decision. In offices handling very few § 20a cases, this pipeline is not internalized as a habit and will fail irregularly.

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§20a-R14 — New decision to implement breach consequences

- Scale flag: NO — This is a triggered event that occurs only when breach is determined; the decision requirement does not itself presuppose sustained volume. However, the *quality* of the breach-consequence vedtak will be affected by the K-mechanism in low-volume offices.

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§20a-R15 — User comment before breach decision

- Scale flag: NO — Procedural step per case; not volume-sensitive in structure.

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§20a-R16 — Individual assessment before breach consequence

- Scale flag: NO — Triggered per breach event; does not require sustained infrastructure.

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§20a-R17 — Child impact assessment for breach consequences

- Scale flag: YES — Anchor Document Part 3, Cluster 3, and Part 5, Critical Intersection 2 (Ringerike 2025): "even a relatively large municipality fails to trigger the barnets beste assessment when the specific demographic is rare." The Ringerike

finding is directly applicable: young parents under 30 receiving economic assistance is a sufficiently rare demographic in small municipalities that the child impact trigger fails to become a habitual assessment pipeline.

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§20a-R18 — Prohibition on § 20a conditions in § 17 decisions

- Scale flag: NO — This is a legal boundary rule; its observance does not depend on organizational scale.

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§20a-R19 — Asset sale conditions in collaboration

- Scale flag: NO — Per-case procedure; not volume-sensitive in structure.

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§20a-R20 — Broad activity portfolio

- Scale flag: YES — Anchor Document Part 1, Requirement 1, and Part 4, Tier 4: Mechanism T (Threshold-Dependent Quality), confirmed in Nav Vestby 2025. This is the only T-classified requirement in the § 20a domain and the one empirically confirmed volume driver in the corpus for this paragraph. *Given that this requirement operates entirely outside the circular framework (circular authority ABSENT), the scale-related burden it imposes is unsupported by the primary normative instrument. The T-mechanism consequence falls entirely outside the circular's guidance scope.*

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§20a-R21 — No conditions in emergencies

- Scale flag: NO — Prohibitory rule; not volume-sensitive.

STEP 4 — PURPOSE CLASSIFICATION

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§20a-R1: [USER NEED] — The statutory condition obligation directly serves the user's transition to work and self-sufficiency. Language in § 20a and punkt 4.20a.1: "styrke tjenestemottakers muligheter for overgang til arbeid, utdanning eller bli selvforsørget." The purpose is substantively directed at user outcomes.

§20a-R2: [USER NEED] — Language training conditions serve the user's pathway to self-sufficiency and correct a structural cause of dependency. Purpose is user-directed.

§20a-R3: [MIXED] — The NIR verification primarily serves legal correctness of the mandatory language-training condition (internal control function: ensuring the office does not impose or omit conditions without verifiable basis). The secondary benefit to the user is accuracy of the condition decision. Primary: internal/legal compliance. Secondary: user legal security. *The internal control function dominates because the verification does not produce any direct benefit to the user — it is a precondition check on the caseworker's authority.*

§20a-R4: [USER NEED] — The weighty reasons assessment directly determines whether the user is subjected to an obligation that may not be appropriate for their situation. The purpose is protection of user rights.

§20a-R5: [MIXED] — The re-imposition obligation serves the statutory purpose (user transition) but the monitoring pipeline — tracking when weighty reasons cease — operates as an internal case management function. Primary: user need (ensuring conditions are imposed when appropriate). Secondary: organizational pipeline control.

§20a-R6: [USER NEED] — Ensuring KVP eligibility is assessed first protects the user's right to a more comprehensive support program before being subjected to condition-setting. Purpose is user-protective.

§20a-R7: [USER NEED] — The individualized activity assessment directly determines the content and quality of the condition placed on the user. This is core substantive casework.

§20a-R8: [USER NEED] — User participation in condition-setting is grounded in § 42 (brukermedvirkning). The requirement serves user autonomy and the quality of the resulting condition. However, the *heightened scrutiny when conditions are unilaterally imposed* partially serves internal oversight. Overall classification: USER NEED with a secondary internal oversight function.

§20a-R9: [USER NEED] — The proportionality assessment directly protects the user from disproportionate burdens. Grounded in the statutory prohibition ("ikke uforholdsmessig byrdefulle"). The purpose is unambiguously user-protective.

§20a-R10: [MIXED] — The written, reasoned decision requirement serves user legal security (right to understand the decision and appeal it) but also constitutes a documentation artefact for internal control and supervisory compliance. Primary: user legal security. Secondary: internal documentation/audit compliance. The Anchor Document's dominant D-mechanism finding — that workers know more about users than the written record reflects — shows the documentation obligation has become primarily an internal control function in practice.

§20a-R11: [MIXED] — The three-element content requirement (obligation, fulfillment criteria, consequences) directly serves user clarity and legal security. However, the highly specified documentary format (all three elements must appear explicitly) is simultaneously an audit-readiness requirement. Primary: user need. Secondary: internal compliance standardization.

§20a-R12: [USER NEED] — Appeal rights notification serves user legal protection exclusively. Forvaltningsloven § 27 basis.

§20a-R13: [MIXED] — The new-decision requirement when conditions change serves the user's right to a new and appealable decision (user legal security). However, the administrative pipeline triggered — new vedtak, new reasoning, new filing — serves internal control and audit chain integrity. Primary: user legal security. Secondary: internal documentation.

§20a-R14: [MIXED] — The new decision for breach consequences protects the user's right to an appealable decision at the enforcement stage (user legal security). The administrative pipeline is simultaneously an internal enforcement documentation artefact. Primary: user legal security. Secondary: internal audit.

§20a-R15: [USER NEED] — Forhåndsvarsling before adverse decisions is a procedural guarantee for the user. No internal control function.

§20a-R16: [USER NEED] — The individualized breach consequence assessment protects the user from automatic or disproportionate enforcement. Directly user-protective.

§20a-R17: [MIXED] — The child impact assessment at the breach consequence stage directly protects children (user-family need). However, the *always* formulation transforms an individualized substantive duty into a mandatory documentation event, which serves internal compliance demonstration. Primary: user/family need. Secondary: internal documentation compliance.

§20a-R18: [USER NEED] — Protecting § 17 service decisions from being contaminated with § 20/20a conditions protects user rights to unconditional advisory services. User-protective.

§20a-R19: [MIXED] — Collaboration in asset sale conditions serves user autonomy and proportionality (user need). The "main rule" formulation with exceptions serves administrative predictability (internal standardization). Primary: user autonomy. Secondary: internal compliance.

§20a-R20: [INTERNAL CONTROL / SYSTEMIC QUALITY] — The Kommunebrev's *bør* language for activity portfolio breadth is directed at municipal service quality planning rather than individual case outcomes. This requirement is not applied at the case level; it is a systemic organizational obligation. Its primary beneficiary is the administrative system's ability to offer conditions of sufficient quality — which is necessary for the substantive obligation in R1 to be meaningful. Classify as: *[MIXED]* with the primary function being systemic service quality (which serves users collectively) and the secondary function being compliance readiness. Since it operates at the organizational rather than case level, its dominant operational effect is **internal systemic compliance**.

§20a-R21: [USER NEED] — Prohibiting conditions in emergencies protects users at their most vulnerable. No internal control function.

STEP 5 — TRANSACTION COST CHARACTERIZATION

Only requirements classified as [INTERNAL CONTROL] or [MIXED] are analyzed here.

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§20a-R3 — NIR Verification [MIXED] *What must be done:* The caseworker must access Nasjonalt introduksjonsregister, verify the specific user's status, and document the result as a precondition for determining whether the language training condition is mandatory. This requires: maintained technical access to NIR, active familiarity with the interface, and a documentation step recording the verification. *Burden:* Moderate per-case overhead with a disproportionate fixed-cost component: maintaining user access and interface familiarity requires regular use. In offices processing 1–3 language-condition cases per year, the access maintenance overhead is structurally inefficient. *Circular guidance:* Circular guidance IS present (punkt 4.20a.2.1). Transaction cost is within the circular framework.

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§20a-R5 — Follow-up and re-imposition pipeline [MIXED] *What must be done:* The caseworker must maintain an active monitoring track for each user with weighty reasons: documenting the reasons at assessment, establishing a review timeline, and executing a new condition-setting process when the reasons are assessed as having ceased. This requires: active case-management, calendar/reminder systems, and recurring vedtak-production. *Burden:* Moderate per-case, significant at the organizational level for offices with multiple concurrent § 20a cases in "weighty reasons" status. The re-imposition pipeline — assessing cessation of weighty reasons and generating a new condition decision — imposes [Documentation Inflation] and [Procedural Duplication] if closely spaced with the original assessment. *Circular guidance:* PRESENT. Transaction cost is within the circular framework.

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§20a-R10 — Written, reasoned decision [MIXED] *What must be done:* The caseworker must produce a formally structured written decision for each § 20a condition, integrated into the grant decision. The decision must be logged in the case management system. This requires: decision drafting, system entry, supervisory approval (maker/checker where applicable), and archiving. *Burden:* High cumulative burden when multiplied across all § 20a decisions. For offices processing 2–5 such decisions per year, each decision represents a near-complete reconstruction of the drafting practice. This is the D-mechanism (Documentation Apparatus) in its canonical form — confirmed across 35+ municipalities in the Volume Driver corpus. *Circular guidance:* PRESENT. Transaction cost is within the circular framework.

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§20a-R11 — Three-element decision content [MIXED] *What must be done:* The caseworker must ensure three distinct content elements are explicitly stated in the decision text: (1) what the obligation entails, (2) what is required for it to be considered fulfilled, and (3) what the consequences of breach will be. This requires individualized drafting of all three elements for each condition type — these cannot be identically templated if the individual assessment requirement (R7) is complied with. *Burden:* The three-element requirement multiplies decision drafting time relative to a single-element obligation. Combined with R7 (individual activity assessment), the caseworker must both conduct the individualized

assessment AND translate it into individualized decision language across three dimensions. [Documentation Inflation]. *Circular guidance:* PRESENT.

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§20a-R13 — New decision when conditions change [MIXED] *What must be done:* When any condition is modified — whether in content, scope, or duration — the caseworker must initiate a full new vedtak process: draft a new decision, justify the change, obtain approval, serve the decision, and archive it. *Burden:* Procedural Duplication. Every condition modification, however minor, triggers a complete decision pipeline. In conditions that are adjusted incrementally (e.g., progressively more demanding activity requirements), each adjustment generates a full administrative cycle. The "shall" language in the circular exceeds the statutory basis (PARTIAL authority, see Step 2 R13), meaning this burden is partly a circular construction without statutory compulsion. *Circular guidance:* PRESENT.

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§20a-R14 — New decision for breach consequences [MIXED] *What must be done:* When a breach is determined, a separate new vedtak must be drafted, justified (including the individualized assessment from R16), approved, served with forhåndsvarsel compliance (R15), and archived. This decision must be linked to the original grant decision. *Burden:* Moderate per-incident. The requirement is well-grounded statutorily; the burden is proportionate. [Documentation Inflation] is present but supported. *Circular guidance:* PRESENT.

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§20a-R17 — Child impact assessment [MIXED] *What must be done:* At every breach consequence decision involving a user with children, the caseworker must conduct and document an individualized assessment of how the consequence affects the children. This assessment must appear in the decision or case journal. The "always" formulation removes all discretion to omit the assessment even in cases where no children's interests are at stake at the decision moment. *Burden:* The "always" obligation combined with documentation requirements creates [Documentation Inflation] that is disproportionate to the statutory basis (PARTIAL authority — Prop. 13 L authorizes but does not mandate the "always" form). In the specific demographic of young parents under 30, the Ringerike finding confirms that the assessment fails precisely when it is most needed, suggesting the formalistic obligation does not achieve its substantive purpose. *Circular guidance:* PRESENT.

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§20a-R20 — Broad activity portfolio [MIXED/INTERNAL SYSTEMIC] *What must be done:* NAV office management and municipal administration must plan, fund, and maintain a portfolio of: (1) low-threshold activity measures, (2) skills-development and qualifying measures, and (3) work-oriented activities. This requires ongoing budget allocation, partnership management with activity providers (municipal, state, third sector), quality assurance of the portfolio, and capacity planning. *Burden:* [Structural Disproportionality]. This is an organizational capital requirement, not a per-case task. It presupposes continuous investment at a scale that is only sustainable when the municipality has sufficient youth

under 30 to fill activities and justify dedicated resource allocation. Nav Vestby 2025 confirms the structural consequence when this investment is not maintained: activity conditions become formally mandated but materially unfulfillable. *Circular guidance:* **ABSENT** — this requirement derives from Kommunebrev 2025 and has no textual presence in the § 20a circular. The transaction cost it imposes falls entirely outside the framework the circular provides guidance for. Caseworkers and NAV leaders must comply with an obligation that the primary normative instrument governing their work does not address. The structural disproportionality burden therefore operates without regulatory foundation in the circular framework.

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§20a-R19 — Asset sale conditions in collaboration [MIXED] *What must be done:* When considering conditions requiring asset sales, the caseworker must conduct a documented collaborative process with the applicant before the condition is set. This requires: prior conversation, documentation of the user's position, and integration into the decision reasoning. *Burden:* Low per-case; the requirement is a process standard that adds one documented conversation step. [Documentation Inflation] is minimal. The absence of circular grounding (ABSENT) means caseworkers must operationalize this without guidance from the primary instrument. *Circular guidance:* **ABSENT** — Veileder til økonomisk stønad is the source. Transaction cost is outside the circular framework, though the per-case burden is low.

Requirements classified as [USER NEED] with no transaction cost identified: §20a-R1, R2, R4, R6, R7, R8, R9, R12, R15, R16, R18, R21.

STEP 6 — CATALOG ENTRIES

REQUIREMENT ID: §20a-R1 **PROVISION TEXT:** Mandatory activity condition for persons under 30 receiving economic assistance, unless weighty reasons apply. **SOURCE INSTRUMENT:** Sosialtjenesteloven § 20a; R-35 punkt 4.20a; Kommunebrev 2025 (reinforcement) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — direct statutory basis **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** YES — T-mechanism confirmed (Nav Vestby 2025); activity portfolio required for meaningful compliance **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost identified. The obligation is substantive and user-directed. Scale impact operates at the organizational level (portfolio availability), not the individual decision level. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §20a-R2 **PROVISION TEXT:** Assessment of whether insufficient Norwegian/Sami language skills cause dependency; mandatory language training condition for those with prior introduction program rights; permissive condition for others. **SOURCE INSTRUMENT:** Sosialtjenesteloven § 20a; Forskrift om bruk av vilkår § 1; R-35 punkt 4.20a.2.1 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — K-mechanism (latent, unconfirmed); specialist language assessment skill decays in low-volume generalist offices **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost identified. The assessment is substantively directed at the user's pathway. Scale risk is real but unconfirmed; language assessment competence is a K-mechanism vulnerability. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §20a-R3 **PROVISION TEXT:** NAV must verify user's introduction program status in NIR before imposing mandatory language training condition; NAV may access NIR for this purpose. **SOURCE INSTRUMENT:** Sosialtjenesteloven § 20a; Forskrift om bruk av vilkår § 1; R-35 punkt 4.20a.2.1 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — D-mechanism (latent); database access overhead assumes regular use; analogous to confirmed Compilo/ASYS fragmentation **PURPOSE:** MIXED — primary: internal/legal compliance verification; secondary: user accuracy **BURDEN DESCRIPTION:** Caseworker must maintain active NIR access, verify user status prior to condition decision, and document the verification result. Fixed-cost overhead of access maintenance is disproportionate in low-volume offices. Circular guidance is present; burden is within the framework. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** Documentation Inflation (low intensity); Structural Disproportionality (in low-volume offices)

REQUIREMENT ID: §20a-R4 **PROVISION TEXT:** Concrete individual assessment required to determine whether weighty reasons for exemption from activity condition exist at decision time. **SOURCE INSTRUMENT:** R-35 punkt 4.20a.2.1 ("Om tungtveiende grunner") **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — procedural implementation of statutory open standard **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost identified. Individualized assessment per case; serves user rights protection directly. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §20a-R5 **PROVISION TEXT:** When weighty reasons exist at decision time, NAV must follow up with measures and support and impose activity conditions when weighty reasons no longer apply. **SOURCE INSTRUMENT:** R-35 punkt 4.20a.2.1 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — statutory basis establishes the mandatory condition obligation; forward-looking temporal re-imposition

requirement is a circular elaboration without explicit statutory text **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — P-mechanism; monitoring pipeline requires repeatable trigger below sustainable volume in small offices **PURPOSE:** MIXED — primary: user need (ensuring conditions imposed when appropriate); secondary: organizational case management pipeline **BURDEN DESCRIPTION:** Caseworker must maintain active monitoring of each "weighty reasons" case, document the ongoing situation, establish review intervals, and trigger a new condition-setting process when the reasons cease. This constitutes a [Procedural Continuity] demand that presupposes a functioning pipeline above minimum trigger volume. Burden is within the circular framework. **KILL LIST CLASSIFICATION:** Category C — Clarification: The re-imposition trigger needs operationalized guidance on what constitutes "cessation of weighty reasons" and at what review interval the reassessment should occur, to reduce caseworker uncertainty without adding shadow binding. **TRANSACTION COST CATEGORY:** Documentation Inflation; Procedural Duplication (re-imposition cycle)

REQUIREMENT ID: §20a-R6 **PROVISION TEXT:** Right to Qualification Program (KVP) must be assessed before activity conditions under § 20a are imposed; qualifying users must be offered KVP first. **SOURCE INSTRUMENT:** R-35 punkt 4.20a.2.1; Kommunebrev 2025 **CIRCULAR AUTHORITY:** PRESENT (R-35 formulation) **LEGAL AUTHORITY:** PARTIAL — no explicit statutory sequencing provision; derived from general purpose principles and § 29 KVP framework **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — K-mechanism intersection; caseworkers in low-volume offices may not maintain live familiarity with KVP eligibility criteria **PURPOSE:** USER NEED — ensures users receive most comprehensive program before less intensive condition-setting **BURDEN DESCRIPTION:** No transaction cost identified at the individual assessment level. However, the mandatory sequential structure adds a procedural step to every § 20a decision process, which in low-volume offices may create confusion about the decision sequence rather than ensuring its correct execution. The Kommunebrev 2025 restatement is a (a) Kommunebrev, which — while not originating the requirement — amplifies it without adding authority. **KILL LIST CLASSIFICATION:** Category C — Clarification: The sequencing rule's partial statutory basis and its operational consequence for low-volume offices should be made explicit in guidance, clarifying what constitutes a sufficient KVP eligibility assessment (rather than a full KVP saksbehandling process) before proceeding to § 20a condition-setting. **TRANSACTION COST CATEGORY:** No Transaction Cost Identified (individual level); Structural Disproportionality (latent)

REQUIREMENT ID: §20a-R7 **PROVISION TEXT:** Concrete individual assessment of which activities are appropriate for the specific user; user's needs, views, and wishes must be included. **SOURCE INSTRUMENT:** R-35 punkt 4.20a.2.1 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** YES — T-mechanism (indirect): the quality of individual activity assessment is bounded by the available portfolio; assessment of "hensiktsmessig" activity is meaningless if no activity is available **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost identified. This is core substantive casework. **KILL LIST**

CLASSIFICATION: No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §20a-R8 **PROVISION TEXT:** Conditions shall as a main rule be set in collaboration with the user; if unilaterally imposed, heightened requirements apply to the individual assessment. **SOURCE INSTRUMENT:** R-35 punkt 4.20a.2.1; 4.20a.2.2 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — sosialtjenesteloven § 42 **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost identified. The collaboration requirement is a substantive procedural guarantee for the user. The "heightened scrutiny" element for unilateral imposition adds a qualitative standard but not a separate documentation layer. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §20a-R9 **PROVISION TEXT:** For all condition types, concrete individual assessment of how burdensome the condition is for the user and any family must be conducted. **SOURCE INSTRUMENT:** R-35 punkt 4.20a.2.6 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — sosialtjenesteloven § 20a (second paragraph) **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost identified. Assessment is directly user-protective; implements the statutory proportionality standard. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §20a-R10 **PROVISION TEXT:** Decision to set conditions must appear in the grant decision as a written, reasoned administrative decision (vedtak). **SOURCE INSTRUMENT:** R-35 punkt 4.20a.1.1; 4.20a.2.3 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES/PARTIAL — forvaltningsloven §§ 23–25 grounds the vedtak requirement; the specific requirement that conditions appear *in the grant decision* (rather than a separate decision) exceeds the statutory text (gap confirmed in Process Inflation Findings DOC-REQ-20.2) **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — D-mechanism; vedtak production pipeline confirmed as dominant volume driver across 35+ municipalities **PURPOSE:** MIXED — primary: user legal security; secondary: internal documentation/audit compliance **BURDEN DESCRIPTION:** Caseworker must draft, format, log, and archive a formally compliant written decision for each § 20a condition imposed. The requirement that the condition appear in the grant decision (rather than separately) adds a structural integration requirement to the drafting task. In offices with 1–3 such cases per year, each decision cycle requires reconstructing drafting practice. [Documentation Inflation]. Circular guidance is present; burden is within the framework. **KILL LIST CLASSIFICATION:** Category B — Status Change: The specific integration requirement (conditions *in* the grant decision as opposed to a linked separate decision) lacks explicit statutory grounding and uses mandatory language. Reformulation to permit conditions to appear in a formal appendix or linked decision would reduce drafting

burden without undermining user legal security. **TRANSACTION COST CATEGORY:** Documentation Inflation; Structural Disproportionality (in low-volume offices)

REQUIREMENT ID: §20a-R11 **PROVISION TEXT:** Decision must explicitly state: (1) what the obligation entails, (2) what is required for it to be considered fulfilled, and (3) the potential consequences of breach. **SOURCE INSTRUMENT:** R-35 punkt 4.20a.1.1; 4.20a.2.3 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — forvaltningsloven § 25; Prop. 13 L **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — D-mechanism intersection; three-element content requirement multiplies individualized drafting demand **PURPOSE:** MIXED — primary: user clarity and legal security; secondary: internal audit standardization **BURDEN DESCRIPTION:** Caseworker must draft three distinct individualized content elements per decision. Since R7 (individual activity assessment) requires individualized conditions, templating is limited. The combined R10+R11 drafting burden is [Documentation Inflation] that is compounded in low-volume settings. Circular guidance is present. **KILL LIST CLASSIFICATION:** Category C — Clarification: The three-element requirement is well-grounded but would benefit from explicit guidance on the level of individualization required for element (2) (fulfillment criteria) versus the scope for standardized formulation, to reduce shadow binding and unnecessary drafting burden. **TRANSACTION COST CATEGORY:** Documentation Inflation

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REQUIREMENT ID: §20a-R12 **PROVISION TEXT:** Decision must inform user about the right to appeal the condition. **SOURCE INSTRUMENT:** R-35 punkt 4.20a.2.3 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — forvaltningsloven § 27 **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost identified. Fully standardizable; can be embedded in decision template. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §20a-R13 **PROVISION TEXT:** If conditions are changed, a new administrative decision must be made. **SOURCE INSTRUMENT:** R-35 punkt 4.20a.1.1 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — forvaltningsloven § 35 governs amendment but does not explicitly mandate a full new vedtak for each condition modification; the "shall" formulation in the circular exceeds the statutory framework (gap confirmed in Process Inflation Findings DOC-REQ-20.7) **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** PARTIAL — P-mechanism; condition-amendment pipeline fails when trigger is too infrequent to become habitual **PURPOSE:** MIXED — primary: user legal security (new appealable decision); secondary: internal documentation chain integrity **BURDEN DESCRIPTION:** Caseworker must initiate a complete decision cycle for each condition modification: draft new vedtak, provide reasoning for change, obtain approval, serve decision, and archive. The mandatory form exceeds the statutory basis. In offices with incrementally adjusted conditions (progressive activity demands), each step generates a full administrative cycle. [Procedural Duplication] relative to the statutory requirement. Circular guidance is present, though it exceeds the statute. **KILL LIST**

CLASSIFICATION: Category B — Status Change: The mandatory "shall" form lacks full statutory grounding. Reformulation to permit condition modifications to be recorded as addenda to the existing decision (unless the modification is substantive in nature) would restore proportionality without eliminating user legal protection. **TRANSACTION COST CATEGORY:** Procedural Duplication; Documentation Inflation

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REQUIREMENT ID: §20a-R14 **PROVISION TEXT:** If breach consequences are to be implemented, a new administrative decision must be made. Consequences must be linked to the current grant decision. Breach cannot justify reduction in future decisions. **SOURCE INSTRUMENT:** Sosialtjenesteloven § 20a (3); R-35 punkt 4.20a.1.1; 4.20a.2.8 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — statutory text ("fattes vedtak") **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** MIXED — primary: user legal security; secondary: internal enforcement documentation **BURDEN DESCRIPTION:** Caseworker must produce a formally compliant breach consequence decision, linked to the original grant decision, including the R16 individualized assessment and R15 forhåndsvarsel compliance. Burden is proportionate and well-grounded. Circular guidance is present. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** Documentation Inflation (low intensity, proportionate)

REQUIREMENT ID: §20a-R15 **PROVISION TEXT:** NAV must ensure the user has had the opportunity to comment before the breach consequence decision is finalized. **SOURCE INSTRUMENT:** R-35 punkt 4.20a.2.8 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — forvaltningsloven § 16 **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost identified. Procedural guarantee per incident; directly user-protective. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §20a-R16 **PROVISION TEXT:** Concrete individual assessment required before deciding to implement breach consequences; must consider the user's stated reason, whether the breach reflects ability or will, and the significance of the consequence for the user and family. **SOURCE INSTRUMENT:** R-35 punkt 4.20a.2.8 **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES — forvaltningsloven § 17; sosialtjenesteloven § 4 **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED **BURDEN DESCRIPTION:** No transaction cost identified. Assessment is the substantive core of proportionate breach enforcement; directly user-protective. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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REQUIREMENT ID: §20a-R17 **PROVISION TEXT:** NAV must always ensure children's needs are safeguarded; a concrete individual assessment of how breach consequences affect the children must always be conducted. **SOURCE INSTRUMENT:** R-35 punkt 4.20a.2.8 (end); Prop. 13 L; barnekonvensjonen Article 3 (supra-legislative) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** PARTIAL — Prop. 13 L and barnekonvensjonen Article 3 authorize special consideration but do not mandate the "always" form of a separate documented assessment; the circular's mandatory formulation exceeds the statutory authority basis (Process Inflation Findings PROC-REQ-20a.11) **DOUBLE AUTHORITY GAP:** NO (circular authority present) **CATEGORY ERROR:** NO **SCALE FLAG:** YES — confirmed K-mechanism in adjacent domain (Ringerike 2025): the specific demographic of young parents under 30 is rare enough in small municipalities that child impact assessment does not become a reliable pipeline, directly analogous to confirmed Track A intersection 2 in Anchor Document **PURPOSE:** MIXED — primary: user/family need (children's protection); secondary: internal compliance documentation **BURDEN DESCRIPTION:** Caseworker must conduct and document an individualized child impact assessment at every breach consequence stage where children are in the household. The "always" formulation removes discretion to abbreviate this even where the consequence is minor. The partially unsupported "always" standard has created a formalistic documentation obligation that, per the Ringerike finding, fails precisely when substantive need is highest — suggesting the formalism substitutes for rather than ensuring the substantive protection. [Documentation Inflation] with partial circular authority. **KILL LIST CLASSIFICATION:** Category C — Clarification: The room for maneuver in the "always" standard should be made explicit. The requirement is warranted substantively but the "always" formulation without flexibility for cases where children are clearly unaffected imposes Documentation Inflation without commensurate user protection. Guidance should distinguish between the substantive duty (always consider) and the documentary form (proportionate to the significance of the consequence for children). **TRANSACTION COST CATEGORY:** Documentation Inflation; Combined Burden (with R16 assessment)

REQUIREMENT ID: §20a-R18 **PROVISION TEXT:** Conditions under sosialtjenesteloven §§ 20 or 20a may not be set in decisions about advice and guidance under § 17. **SOURCE INSTRUMENT:** Veileder til sosialtjenesteloven § 17 — instrument category (b): veileder **CIRCULAR AUTHORITY:** ABSENT — no textual presence in the § 20a circular; consequence: the requirement operates entirely outside the § 20a circular framework; caseworkers and leaders relying solely on the § 20a circular receive no guidance on this boundary rule **LEGAL AUTHORITY:** YES — the substantive rule is legally correct; §§ 20/20a are materially restricted to grant decisions; the veileder accurately states the law **DOUBLE AUTHORITY GAP:** NO (statutory authority YES despite circular authority ABSENT) **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED — protects users' access to unconditional advisory services **BURDEN DESCRIPTION:** No transaction cost identified. The rule is a prohibitory boundary; observance requires legal knowledge, not administrative infrastructure. However, the absence of circular guidance creates a knowledge gap: caseworkers working from the § 20a circular alone have no instrument-level basis for this rule. This is a [Reporting Overhead] risk in reverse — the rule is absent from the instrument where it would be most useful. **KILL LIST CLASSIFICATION:** Category C — Clarification: The rule should be incorporated into the § 20a circular

framework (or a cross-reference to the Veileder should be explicit in the circular) to eliminate the instrument gap. The substantive content requires no change. **TRANSACTION COST CATEGORY:** No Transaction Cost Identified (at caseworker level); Structural Disproportionality risk from instrument fragmentation

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REQUIREMENT ID: §20a-R19 **PROVISION TEXT:** Conditions requiring asset sales may not be set as a precondition for having the help need assessed; shall as a main rule be formulated in collaboration with the applicant. **SOURCE INSTRUMENT:** Veileder til økonomisk stønad — instrument category (b): veileder **CIRCULAR AUTHORITY:** ABSENT — no textual presence in the § 20a circular; consequence: the requirement imposes a procedural standard that the primary normative instrument does not address; caseworkers must comply with an obligation the § 20a circular cannot guide them on **LEGAL AUTHORITY:** PARTIAL — sosialtjenesteloven § 20a (second paragraph) and § 42 provide partial grounding; the "main rule" formulation is a veileder construction **DOUBLE AUTHORITY GAP:** NO (authority not NO, only PARTIAL) **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** MIXED — primary: user autonomy; secondary: internal compliance standardization **BURDEN DESCRIPTION:** Caseworker must conduct and document a prior collaborative conversation before setting asset sale conditions. The burden per case is low. However, the absence of circular guidance (ABSENT) means caseworkers must operationalize this requirement without the framework of the primary instrument. [Documentation Inflation] (low) plus instrument fragmentation risk. **KILL LIST CLASSIFICATION:** Category C — Clarification: Cross-reference to or incorporation of this rule into the § 20a circular would eliminate the instrument gap without changing the substantive standard. **TRANSACTION COST CATEGORY:** Documentation Inflation (low)

REQUIREMENT ID: §20a-R20 **PROVISION TEXT:** NAV office and municipality should strive to build broad and flexible activity offerings for young people. **SOURCE INSTRUMENT:** Kommunebrev 2025 — instrument category (a): Kommunebrev **CIRCULAR AUTHORITY:** ABSENT — no textual presence in the § 20a circular; consequence: the requirement imposes a systemic organizational obligation that the primary normative instrument does not address; the transaction cost it imposes falls entirely outside any framework the circular provides guidance for **LEGAL AUTHORITY:** PARTIAL — sosialtjenesteloven § 20a grounds the activity condition obligation but does not mandate portfolio breadth; the Anchor Document flags this for legal verification (Flag 4, Part 5); the bør-language reduces but does not eliminate the authority question **DOUBLE AUTHORITY GAP:** NO (advisory language; authority PARTIAL not NO) **CATEGORY ERROR:** NO **SCALE FLAG:** YES — T-mechanism, empirically confirmed, Nav Vestby 2025; the only confirmed volume driver in the § 20a domain; directly determines whether the mandatory condition obligation (R1) can be meaningfully fulfilled **PURPOSE:** MIXED — primary: systemic service quality (which serves users collectively); secondary: internal systemic compliance **BURDEN DESCRIPTION:** Municipal management and NAV leadership must plan, fund, and maintain a structured activity portfolio across three tiers (low-threshold, skills-development, work-oriented). This requires sustained budget allocation, partnership management, and capacity planning. In municipalities with 1–3 youth under 30 annually, the portfolio cannot be funded or sustained

at a scale that justifies dedicated structure. [Structural Disproportionality] — confirmed in Nav Vestby. *Critically: since this requirement has no circular authority, the Structural Disproportionality burden it imposes is entirely unsupported by the primary normative framework. Municipalities subject to this expectation have no circular to rely on for compliance guidance or for contesting the expectation's scope.* **KILL LIST CLASSIFICATION:** Category B — Status Change: The Kommunebrev's bør-language is already advisory in register, but its operational effect in supervisory practice creates shadow binding (municipalities treat Kommunebrev expectations as compliance requirements). Explicit reformulation at the circular level — acknowledging that portfolio breadth scales with municipal size and is not a hard compliance standard for all office configurations — would restore local discretion and eliminate the disproportionate burden on micro-offices. The Kommunebrev instrument should not be the sole normative basis for a systemic organizational obligation of this scale. **TRANSACTION COST CATEGORY:** Structural Disproportionality; Combined Burden (with R1 mandatory condition obligation)

REQUIREMENT ID: §20a-R21 **PROVISION TEXT:** Conditions may not be set for grant decisions in emergency situations. **SOURCE INSTRUMENT:** R-35 punkt 4.20a (beginning) **CIRCULAR AUTHORITY:** PRESENT **LEGAL AUTHORITY:** YES **DOUBLE AUTHORITY GAP:** NO **CATEGORY ERROR:** NO **SCALE FLAG:** NO **PURPOSE:** USER NEED — absolute protection for users at greatest vulnerability **BURDEN DESCRIPTION:** No transaction cost identified. Prohibitory rule; requires legal knowledge, not administrative infrastructure. **KILL LIST CLASSIFICATION:** No Kill List Action **TRANSACTION COST CATEGORY:** No Transaction Cost Identified

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CLOSING COMPARATIVE NOTE

Quantitative summary:

Metric	Count
Requirements identified from Process Inflation Findings (consolidated)	**21**
Requirements visible from the circular alone	**17**
Requirements invisible from the circular alone	**4** (R18, R19, R20, and partially R6 via Kommunebrev)
Double authority gaps	**0**
First-order authority gaps (circular authority ABSENT)	**3** (R18, R19, R20)
Elevated authority risk (circular present but statutory PARTIAL, "shall" exceeds statute)	**4** (R5, R6, R13, R17)

Category errors (different legal domain)	**0**

Kill List breakdown:

Category	Count	Requirements
Category A — Removal	**0**	None in this domain
Category B — Status Change	**3**	R10, R13, R20
Category C — Clarification	**5**	R5, R6, R11, R17, R18, R19
No Kill List Action	**13**	R1, R2, R3, R4, R7, R8, R9, R12, R14, R15, R16, R21

(Note: R18 and R19 both fall under Category C; combined count of C = 6 if R19 is separately listed.)

Transaction cost categories by frequency:

Category	Frequency
Documentation Inflation	8 requirements (R3, R5, R10, R11, R13, R14, R17, R19)
Structural Disproportionality	4 requirements (R3, R10, R20, R18 indirectly)
Procedural Duplication	2 requirements (R5, R13)
Combined Burden	2 requirements (R17, R20)
Reporting Overhead	0 requirements (not the dominant pattern in this domain)
No Transaction Cost Identified	12 requirements

Synthesis for the main report:

The § 20a domain exhibits a different sludge profile than the debt counseling domain. No double authority gaps are present, no category errors arise, and no requirements are candidates for outright removal (Category A). The sludge structure here is more subtle and consists of three converging problems:

First, **instrument fragmentation**: three operative requirements (R18, R19, R20) have no textual presence in the primary governing circular. Caseworkers working from the § 20a circular alone will not encounter these requirements. This is not a legal deficiency in the underlying rules but a systemic normative architecture failure — the circular understates its

own operative framework, and the gap is filled by veileders and a Kommunebrev that carry less institutional weight.

Second, **circular exceeds statute**: four requirements (R5, R6, R13, R17) use mandatory language ("shall") for obligations whose statutory basis is at best partial. The most significant of these is R13 (new decision for each condition modification), where the mandatory form is a circular construction without statutory grounding, generating Procedural Duplication that could be eliminated without statutory amendment.

Third, **structural disproportionality at organizational scale**: R20 (activity portfolio) is the single empirically confirmed [T]-mechanism finding in the § 20a domain — the only requirement confirmed by supervision evidence to fail structurally in small municipalities. Its absence from the circular, combined with its origin in a Kommunebrev (the normative instrument with the lowest authority rank in the hierarchy), means the most organizationally consequential requirement in this domain is simultaneously the most normatively exposed. The implication for the Kill List is a Category B status change: the requirement should be incorporated into the circular with explicit language acknowledging scale-proportionality, replacing the shadow-binding effect of the Kommunebrev with transparent regulatory guidance.