ForensicaLetterheadBottomGraphic**OCCUPATIONAL THERAPY TREATMENT**

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| **Client Name:** | Christina Pasqua | **Date of Loss:** | 2016-08-08 |
| **Address:** | 20 Laming Street, Ottawa, ON K2J 1V1 |  |  |
| **Telephone #:** | 613-983-6099 |  |  |
| **Lawyer:** | Frank McNally | **Firm:** | McNally Gervan |
| **Adjuster:** | Cassandra D’Andrea | **Insurer:** | Belair Insurance Company |
|  |  | **Claim No.:** | 5030704357 |
| **Therapist:** | Sebastien Ferland OT Reg.(Ont.) | **Dates of Sessions:** | 2021-03-25  2021-04-01  2021-04-09  2021-04-23  2021-05-18  2021-06-15  2021-06-22 |
|  |  | **Date of Report:** | 2021-08-04 |

**THERAPIST QUALIFICATIONS:**

Sebastien is an Occupational Therapist with over 23 years of experience. His professional practice began in 1998 when he graduated Magna Cum Laude from the University of Ottawa and launched himself in the world of private business. Over the years, Sebastien has provided services to the automobile insurance and legal communities as well the WSIB, Veterans Affairs and the Long-Term Disability sector.

Sebastien has extensive experience working with individuals suffering from catastrophic injuries. He provides assessment and treatment services as a primary Occupational Therapist as well as a Case Manager for individuals who sustained traumatic brain injuries, spinal cord injuries and amputations. He also has extensive experience working with individuals who have been deemed to meet the catastrophic threshold on the basis of psychological and/or psychiatric impairments.

Over his years of working with individuals injured in motor vehicle accidents, Sebastien developed a strong interest in the field of mental health, focussed on functional reactivation for injured individuals suffering from depression, anxiety and posttraumatic stress. His clinical acumen has led him to be qualified as an Expert in his field by the Ontario Superior Court of Justice.

**LONG-TERM TREATMENT PLAN GOALS (LTGs):**

An OCF-18 was submitted to the insurer and approved on April 13, 2021 for the provision of six (6) Occupational Therapy Treatment sessions. The following treatment goals were outlined as part of this treatment plan:

1. Foster engagement in meaningful activity
2. Return to activities of normal living

**SHORT-TERM GOALS (STGs):**

In support of the goals listed above, Ms. Pasqua and this therapist worked at developing a number of short-term goals which would builds towards the three goals highlighted above. The following goals have been developed and worked upon during these two sessions:

1. Establish rapport (In support of LTGs 1, 2)
2. Develop treatment goals (In support of LTGs 1, 2)
3. Develop healthier daily routine (In support of LTGs 1, 2)
4. Increase socialization and community outings (In support of LTGs 1, 2)
5. Foster return to driving (In support of LTGs 1, 2)

**PROGRESS UPDATE:**

The following is an outline of the work completed during these seven sessions in support of the STGs and LTGs highlighted above:

1. Establish rapport (Goal achieved):

Ms. Pasqua and this therapist spent considerable time discussing Ms. Pasqua’s various difficulties and struggles over the course of the first few sessions. She appeared to open-up with ease and shared intimate details of her daily life. Ms. Pasqua connected well with this therapist and in this therapist’s view, a healthy therapeutic relationship has been forged over this reporting period. This relationship will continue to be fostered throughout this therapist’s interventions with Ms. Pasqua.

1. Develop treatment goals (Goal in progress):

This therapist began these treatment sessions by providing a framework upon which Occupational Therapy treatment sessions would be delivered. Ms. Pasqua was educated on the fundamentals of functional reactivation and it was understood that the use of a goal-oriented approach would be most conducive to tracking treatment progress and maintaining focus of interventions. Ms. Pasqua shared her understanding of these principles and was fully engaged in developing the first set of goals outlined in this report. Long-term goals and short-term goals were discussed both in theory and practice. Ms. Pasqua shared her desire to work within this structured framework and Occupational Therapy interventions have and will continue to be delivered accordingly.

1. Develop healthier daily routine (Goal in progress)

Over the past several years, Ms. Pasqua has been struggling with significant mental health issues which have led her to develop a poor daily routine. At the onset of care delivery, Ms. Pasqua noted that she did not get dressed in day clothes on a regular basis, would go several days without showering and participated in a limited manner to the running of the household. She spent her days sitting on the living room sofa, monitoring her children, and watching television shows. Ms. Pasqua shared an immense sense of guilt at how she had deteriorated to such an extent and also highlighted a strong desire to make meaningful changes to her daily routine.

With respect to her daily routine, Ms. Pasqua and this therapist developed a number of goals which were believed to be achievable, and which would hold high rehabilitative value in regards to her poor mental health. Primarily, over the past months, Ms. Pasqua has worked at achieving and maintaining the following functional goals relating to her daily routine:

1. Showering first thing in the morning on a daily basis
2. Dressing in day clothes after her morning shower
3. Going for a walk on a daily basis

Over the course of the last few months, Ms. Pasqua made remarkable progress in relation to these goals. She found the strategy of focussing on specific small behavioural changes to have a significant impact on her overall confidence and self-esteem. She noted that she gradually began feeling more energetic and engaged with her family. Ms. Pasqua’s presentation morphed over the last few months, and she was found to become gradually less flat and tearful and was more upbeat and positive with respect to the future. She was praised for these changes and noted that she would continue on this path, introducing more functional goals as she integrated existing ones in her daily routine.

Ms. Pasqua also noted that she experienced significant guilt over her lack of involvement in grocery shopping which has been managed by her husband. This therapist reviewed a number of strategies to foster engagement in grocery shopping which included online ordering and curbside pickup options. Ms. Pasqua noted that while she felt completely overwhelmed the idea of going into a grocery store at this time, she did feel that she could manage the online ordering portion and accompany her husband on the drive to the grocery store to pickup the groceries. She noted that she was not comfortable with the interface for online ordering however agreed to have her husband work with her for the first few orders to achieve an understanding of the workings of the online interface with the ultimate goal of taking over the responsibility of grocery ordering outright. This remains a goal in progress as Ms. Pasqua noted experiencing some difficulties with the planning aspect of grocery ordering. This therapist discussed a number of strategies to assist her in tracking items she would like to purchase, to make note of items which have been utilized and requiring replacement etc. Ms. Pasqua noted that she was always an avid fan of “making lists” and found that she had largely interrupted this practice over the last few years as her mental health deteriorated. She committed to resuming this practice and to keep an ongoing open grocery list which she and her husband would contribute to on a daily basis. She found this idea to be positive as it would reduce the mental effort required when came time to order the groceries on the online app. This remains a work in progress which will continue to be monitored by this therapist over the following weeks.

1. Increase socialization and community outings (Goal in progress):

An area of significant concern highlighted during the initial assessment completed by this therapist has been the extent of social isolation experienced by Ms. Pasqua over the last few years. She noted that she had completely disconnected from her circle of friends and feared going outdoors as she was no longer comfortable talking with neighbours or strangers in public places. She went on to develop an avoidance strategy with regards to her past social network, ignoring texts from friends and family and not answering her phone. She noted that she experienced guilt over her lack of engagement with her circle of friends and family and feared the reaction she would have from her friends if she reached out to them after such a significant hiatus in communication. Ms. Pasqua provided an example of how she did not respond to a text from one of her long-term friends from a few days prior and how she kept “spinning” her lack of responsiveness leading to increased anxiety. This therapist highlighted Ms. Pasqua’s pattern of avoidance behaviour and challenged her to respond to her friend during the session with this OT. Ms. Pasqua and this therapist went through an exercise of reviewing what she believed would be the response (ie. “my friend will be upset, think I’m a terrible person”) in contrast with the less catastrophic reality that her friend may just be happy to hear from her. She was encouraged to speak candidly with her close friends about her struggles to provide context for her lack of responsiveness and to seek their support. Ms. Pasqua reported back in the following session that the response from her friend was highly positive and that they had made plan to get together for a short visit. Ms. Pasqua was praised for her effort and was further encouraged to begin challenging her negative and distorted thoughts by journaling on a daily basis and begin documenting the negative thought patterns which are driving her anxiety. The goal will be to begin challenging these negative thought patterns and replacing them with more realistic ones.

Another area of function which was addressed by this therapist was Ms. Pasqua’s fear of leaving her home. She noted that her social anxiety was to such an extent that the idea of going out of the house to pickup mail at the community mailbox seemed unachievable to her. This therapist went on to review an array of “worst case” scenarios as to what could possibly occur if she went out of her home. She noted that she feared people would talk to her and that she wouldn’t know how to respond. She also noted that she feared people’s reaction seeing her out and about after not seeing her out of her home for such an extended period of time. This therapist challenged these concerns and provided alternatives on how to handle each possible scenario she identified. In the end of the session, Ms. Pasqua was challenged to accompany this therapist for a short walk to pickup the mail. Ms. Pasqua noted an immediate increase in her anxiety and began displaying signs of a panic attack. This therapist coached Ms. Pasqua through a breathing exercise to reduce her anxiety and thwart the panic attack, which was successful. Ms. Pasqua shared a feeling of empowerment with this new knowledge and noted that she felt that she now believed she could breathe through these intense surges in anxiety and experience relief in a rapid manner. Following this experience, Ms. Pasqua agreed to go outside with this therapist to get the mail and return home. She was observed leaving her home and walking at a brisk pace to the mailbox located a few hundred feet from her home. She opened the mailbox, obtained a few pieces of mail and then returned home at a rapid pace. She was then observed breaking down in tears, sharing how proud she felt of this accomplishment. Ms. Pasqua was again challenged to take the responsibility of getting the mail on a daily basis from her husband and to integrate this into her daily routine. She agreed and has, for the past few months, continued to get the mail on a daily basis.

1. Foster return to driving (Goal on hold)

Another area of function which Ms. Pasqua wanted to address with this therapist was a return to driving within her community. Ms. Pasqua noted that she had not driven her vehicle in years as she had developed a significant driving phobia and felt unable to safely operate her vehicle. This therapist agreed to integrate driving desensitization into the array of goals. To assess her current status with respect to operating a motor vehicle, this therapist and Ms. Pasqua agreed to get into her car and have her pull out of the driveway. Breathing exercises were performed throughout this process however the exercise was terminated after a short period of time as Ms. Pasqua experienced a panic attack after pulling out of the driveway, requiring that she park her vehicle and allow this therapist to drive it back into her driveway. She was unable to catch her breath for several minutes and this therapist made a decision to postpone further driving attempts until Ms. Pasqua developed a better handle on her anxiety.

**RECOMMENDATIONS:**

1. Ms. Pasqua has demonstrated a significant level of engagement in OT treatment sessions and made significant gains over the past several months. This therapist would recommend another course of six treatment sessions to continue working on the goals highlighted above. An OCF18 will be submitted to the insurer for another block of treatment with this OT.

**CONTACT:**

This therapist may be contacted through the offices of FERLAND & ASSOCIATES REHABILITATION INC. at 613-204-1549 or by email at [ferland@ferlandassociates.com](mailto:ferland@ferlandassociates.com) .

Sincerely,

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Description automatically generated with low confidence

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Sebastien Ferland OT Reg.(Ont)

Enclosed: NA

An electronic signature was used in order to assist with a timely report. The assessor is in agreement with the content of the report, and has provided authorization to utilize the electronic signature***.***