OCCUPATIONAL THERAPY IN-HOME ASSESSMENTForensicaLetterheadBottomGraphic

| Client Name: | Stephen Skinner | Date of Loss: | October 22, 2021 |
| --- | --- | --- | --- |
| Address: | 1610 Cedar Mills Road, Mississippi Station, ON | Date of Birth: | May 15, 1969 |
| Telephone #: |  |  |  |
| Lawyer: |  | Firm: | Bergeron Clifford |
| Adjuster: |  | Insurer: |  |
|  |  | Claim No.: |  |
| Therapist: | Sebastien Ferland OT Reg.(Ont.) | Date of Assessment: |  |
|  |  | Date of Report: |  |

THERAPIST QUALIFICATIONS:

Mr. Ferland is an Occupational Therapist with over 25 years of experience providing rehabilitation and expert opinion services in the province of Ontario. His professional practice began in 1998 when he graduated from the University of Ottawa’s School of Rehabilitation and began working as a registered Occupational Therapist in the private sector. Over the years, Mr. Ferland has developed his clinical skills and evolved to provide expert opinions in matters of human function to stakeholders in the automobile insurance sector, personal injury and family law, the Workplace Safety and Insurance Board (WSIB), Veterans Affairs and the Long-Term Disability sectors. His opinions are sought by both plaintiff and defense counsel in the context of resolving matters in personal injury and family law cases. He has been qualified several times as an expert in his field, providing testimony under oath in FSCO tribunals and cases appearing before the Ontario Superior Court of Justice.

Mr. Ferland’s practice includes regular contributions to catastrophic designation assessment teams where he provides opinions related to daily function of individuals suffering from serious physical, psychological and cognitive impairments. His assessments inform multidisciplinary team members (psychiatry, orthopedics, neurology, physiatry, psychology, etc.) of injured client’s daily functional capabilities at home, work and in the community, assisting them in forming opinions surrounding whether the catastrophic injury threshold is met.

Mr. Ferland concurrently provides services as a treating Occupational Therapist to clients who have sustained physical and psychological trauma in motor vehicle accidents. He has extensive experience in providing care to individuals suffering from chronic pain, depression, anxiety and posttraumatic stress, overseeing and directing functional reactivation programs to foster improvements in function and participation in meaningful activity.

SUMMARY OF FINDINGS:

The comprehensive assessment of Mr. Stephen Skinner reveals significant and pervasive functional impairments stemming from the motor vehicle accident of October 29, 2021. Prior to the accident, Mr. Skinner maintained an exceptionally demanding schedule that demonstrated his high level of function and energy. He successfully managed multiple concurrent roles including his position as a maple syrup equipment salesman working 50-60 hours weekly, operation of his sugar bush facility, and active participation in professional associations, while maintaining a physically demanding property maintenance routine on his three-acre rural property.

The post-accident period has been marked by a dramatic transformation in Mr. Skinner's functional capacity across all domains. His physical presentation is characterized by chronic cervical spine dysfunction, persistent thoracic and lumbar pain, and significant postural limitations that require frequent position changes. His sitting tolerance is limited to 30-40 minutes, and standing tolerance is restricted to approximately 20 minutes, during which he displays continuous movement and weight shifting rather than maintaining static positions. These physical limitations have fundamentally altered his ability to perform both work-related tasks and basic activities of daily living.

Cognitively, Mr. Skinner demonstrates substantial changes that have markedly impacted his daily function and work capabilities. His previous ability to manage complex business operations with minimal documentation has been replaced by a need for extensive written records and support. He experiences significant memory deficits, reduced processing speed, and diminished concentration that necessitate frequent breaks during cognitive tasks. His organizational skills have declined notably, and he struggles with multi-tasking and complex planning that were previously central to his work effectiveness.

The impact on Mr. Skinner's vocational function has been profound. Following a five-month complete work absence and two months of part-time work from home, he was unable to return to his previous employment role. His current position as Business Development Manager requires significant modifications and supervision, particularly regarding technical specifications and customer interactions. The need for extensive documentation and reduced capacity for concurrent demands represents a marked departure from his previous high-level functioning in similar roles.

Perhaps most striking is the impact on Mr. Skinner's home life and property maintenance activities. His wife estimates his current participation in household tasks at "2%" compared to his previous "50%" contribution. The management of their three-acre property, which includes two acres of grass and one acre of bush, has been severely compromised. Even basic grass cutting must now be performed in segments due to his limited stamina. Wood cutting, which he hasn't performed for three years, exemplifies the degree of functional loss, as this task was previously a regular part of his routine.

The psychological and emotional impact of these changes is significant. Mr. Skinner experiences pronounced anxiety, particularly related to driving, and demonstrates reduced stress tolerance in both social and professional settings. His emotional regulation has been notably affected, with a tendency to become overwhelmed in situations requiring sustained attention or multiple demands. His temperament has changed markedly, characterized by increased frustration and reduced patience.

Community participation and social engagement have also declined substantially. His previous roles as Vice President of the Carp Farmer's Market and board member of the Lanark and District Maple Syrup Producer Association reflected deep community involvement that he can no longer maintain. Social interactions now require careful energy conservation and planning, often resulting in extended recovery periods.

Mr. Skinner's current daily routine reflects the complex interaction between his physical symptoms, cognitive challenges, and fatigue levels. The need for frequent rest periods and careful energy conservation has fundamentally altered his ability to engage in both necessary tasks and discretionary activities that previously defined his lifestyle. When he returns home from work, he typically has energy only for essential tasks before requiring rest, a sharp contrast to his previously high level of evening productivity.

INFORMED CONSENT STATEMENT:

Insert CVS templated statement here please.. ;)

DOCUMENTATION REVIEWED:

PRE-ACCIDENT MEDICAL HISTORY:

Prior to the subject motor vehicle accident of October 29, 2021, Mr. Skinner was in generally good health with no significant medical concerns aside from being slightly overweight. He had no prior history of chronic pain, headaches, neck or back issues that impacted his function. He demonstrated a high level of physical and cognitive capacity, managing a demanding work schedule of 50-60 hours per week in maple syrup equipment sales while also maintaining an active lifestyle that included significant physical labor related to his sugar bush operation.

MECHANISM OF INJURY:

On October 29, 2021, between 9:30 and 10:00 AM, Mr. Skinner was the restrained driver of a 2015 Ford F-150 pickup truck. He had come to a complete stop at a red light in a construction zone on Highway 31 when his vehicle was struck from behind by what he described as a small car traveling at high speed. The impact was primarily to the passenger side rear of his vehicle, as the other driver appeared to attempt veering right before collision. The force of impact pushed Mr. Skinner's vehicle forward approximately 10 feet. While he did not recall any direct contact with the vehicle interior and did not lose consciousness, he reported feeling "woozy and off kilter" immediately following the collision. Weather and road conditions were good at the time of the accident.

NATURE OF INJURY:

The initial impact resulted in multiple injuries and symptoms that presented both immediately and in the days following the accident. Primary injuries include:

* Concussion/mild traumatic brain injury with ongoing post-concussion symptoms
* Cervical spine injury with chronic neck pain radiating into the shoulder blade region
* Upper back pain concentrated between the shoulder blades
* Lower back injury with recurrent sciatic symptoms
* Psychological impacts including depression and anxiety, particularly related to driving
* Vestibular dysfunction resulting in balance issues
* Sensory sensitivities including photophobia and hyperacusis
* Development of tinnitus

Diagnostic imaging including cervical spine x-rays and a subsequent MRI have shown primarily soft tissue involvement. A CT scan of the head performed in mid-2023 showed no acute abnormalities, though his post-concussive symptoms have persisted.

COURSE OF RECOVERY TO DATE:

Mr. Skinner's recovery trajectory has been complicated by multiple factors affecting both his physical and cognitive rehabilitation. While he initially attempted to return to work shortly after the accident, he found himself unable to maintain his previous level of function. After being assessed at the Perth Hospital emergency department on the day of the accident, he was prescribed a neck brace and referred for physiotherapy.

His early recovery was hindered by approximately eight to ten weeks' delay in accessing physiotherapy services. Once initiated, he began attending weekly sessions at Perth Physiotherapy, which he has maintained consistently since February 2022. These sessions have provided temporary relief of his musculoskeletal symptoms, typically lasting three to four days. While there was some initial improvement in his condition through early 2023, he has shown minimal progress since that time despite ongoing treatment.

An attempt was made to engage with the 360 Concussion Clinic, but due to COVID-19 restrictions, they were only able to offer virtual services which proved ineffective for his needs. Mr. Skinner's rehabilitation has been further complicated by limited access to specialized care, with referrals to both physiatry and neuropsychology services facing extended wait times.

His current treatment regime consists of weekly physiotherapy sessions with Danielle Willard at Perth Physiotherapy, which he reports as helpful in maintaining his current level of function. Without regular physiotherapy, he experiences significant deterioration in his symptoms. He receives periodic follow-up care from his nurse practitioner, Mike Bingley, primarily for monitoring of his general health and medication management.

While Mr. Skinner has made some adaptations to his daily routine and work schedule to accommodate his limitations, he continues to experience significant ongoing symptoms that impact his functional capacity across multiple domains. His recovery has plateaued, with minimal improvement noted in his core symptoms over the past year despite consistent engagement in available treatment options.

CURRENT MEDICAL/REHABILITATION TEAM:

| Health Professional Name and Specialty | Date of Last Appointment/ Frequency of appointments | Outcome of Last Appointment | Date of Next Appointment |
| --- | --- | --- | --- |
| Mike Bingley, Nurse Practioners | Every 2 - 3 months | Follow-up bloodwork for cholesterol. | TBD |
| Perth Physiotherapy, Daniella Willard | Once weekly | Treatment provided | Ongoing |

MEDICATION:

| Medication Name | Dosage/Frequency | Purpose |
| --- | --- | --- |
| Tecta |  |  |
| Cholesterol |  |  |
| Escitalopram | Stopped due to sexual dysfunction, no drive. |  |

SUBJECTIVE INFORMATION (CLIENT REPORT):

Physical Symptoms:

Pain symptoms are rated on an analog pain scale where 0 = no pain and 10 = intolerable pain*.*

| Symptom/Complaint | Details | Pain Rating if Necessary |
| --- | --- | --- |
| Neck, upper-back | Constant pain booth sides radiating to shoulder blades. | 4 - 8/10 |
| Lower back | Constant pain and episodes of sciatica (usualy if he sits tool long). | 4 - 8/10 |
| Headaches | Has a constant, dull headache. If subjected to loud noise, intense light, someone yelling, it amplifies it. | 5/10 |

Cognitive and Emotional Symptoms:

Mr. Skinner presents with significant cognitive changes that have markedly impacted his daily function and work capabilities since the subject accident. Prior to his injury, he demonstrated high-level cognitive functioning, managing complex business operations that required multitasking, detailed memory, and executive planning skills. He was able to handle multiple customer calls while driving, maintaining detailed equipment specifications and order information in memory without the need for written documentation.

His current cognitive presentation reveals substantial deterioration across multiple domains. Most notably, Mr. Skinner experiences significant memory deficits that interfere with both personal and professional functioning. He struggles to recognize longtime customers and can no longer recall their previous orders or equipment specifications - a skill that was previously central to his work effectiveness. These memory issues necessitate extensive note-taking and documentation for information he previously managed effortlessly.

Processing speed and attention have been particularly affected. Mr. Skinner now demonstrates marked difficulty with multitasking and requires significantly more time to complete cognitive tasks. He frequently loses his train of thought during conversations and requires additional time to process information. His ability to concentrate has diminished substantially, necessitating frequent breaks during computer work and limiting his capacity to engage in sustained mental activity.

Problem-solving abilities and organizational skills have also declined notably. Tasks that previously came naturally to him, such as planning equipment installations or managing his sugar bush operation, now present significant challenges. The scope of his sugar bush expansion plans has been curtailed due to his reduced cognitive capacity to manage complex operations.

From an emotional perspective, Mr. Skinner's presentation reflects the significant psychological impact of his injuries. He experienced pronounced depression in the early months following the accident, particularly during periods when he was confined to the couch due to physical symptoms and unable to maintain his typically active lifestyle. This depression has evolved into a chronic state characterized by reduced motivation and engagement.

His emotional regulation has been notably affected. Mr. Skinner describes himself as being easily overwhelmed, particularly in situations requiring sustained attention or multiple demands. When feeling overwhelmed, he tends to "shut down" - a response pattern that significantly impacts his ability to manage daily responsibilities. His attention span has shortened considerably, and he experiences frequent episodes of mental fatigue that further compound his emotional regulation difficulties.

Anxiety has emerged as a significant concern, particularly in relation to driving. While he has resumed driving, he experiences heightened anxiety in traffic situations and requires extended time to feel comfortable when planning routes, especially to his sugar camp. This anxiety extends beyond driving to general social situations, where he finds himself more easily overwhelmed than before the accident.

A notable aspect of Mr. Skinner's emotional presentation is his self-described transformation from a highly efficient "go-go-go" individual who could function effectively on 4-6 hours of sleep to someone who requires frequent rest periods and struggles with sustained activity. This fundamental shift in his capacity has led to significant frustration and challenges with self-image. His natural tendency toward procrastination has been exacerbated by his current condition, which he attributes to lacking the energy and cognitive resources to tackle tasks promptly.

These cognitive and emotional changes have created a cyclical pattern where reduced cognitive capacity leads to increased frustration and emotional distress, which in turn further impacts his cognitive functioning. The interaction between these symptoms has significantly affected his overall quality of life and functional capacity across multiple domains.

Symptom Management Strategies:

Mr. Skinner reported making use of the following strategies to manage his symptoms at this time:

* Rest
* Activity avoidance

Mr. Skinner was prescribed Escitalopram for management of post-accident depression and anxiety symptoms approximately four months after the subject accident. However, he discontinued the medication after a brief trial period due to experiencing sexual side effects that he found intolerable, specifically related to sexual function (achieving erection or when erection occurs, being unable to orgasm). During discussion of his medication history, Mr. Skinner demonstrated limited understanding of both the therapeutic mechanisms of SSRIs and the availability of alternative medication options within different therapeutic classes. This knowledge gap presents an opportunity for medication counseling and education, as there are several other medication options that could potentially address his ongoing psychological symptoms while minimizing adverse effects. A referral to a psychiatrist for comprehensive medication management would be beneficial given the complexity of his post-accident psychological presentation and his previous adverse reaction to first-line antidepressant therapy.

FUNCTIONAL AND BEHAVIOURAL OBSERVATIONS:

Tolerances, Mobility and Transfers:

During the assessment period, Mr. Skinner demonstrated consistent patterns of functional limitation across multiple domains. His movement patterns, posture, and compensatory strategies provide clear evidence of both physical impairment and adapted behaviors developed since his accident.

Sitting Tolerance and Positioning:

Mr. Skinner demonstrates significantly reduced sitting tolerance, maintaining any single position for no more than 30-40 minutes before requiring position change. During seated observation, he exhibited constant weight shifting and postural adjustments, indicating ongoing discomfort. When working at his computer, he frequently alternates between sitting and standing, with notable grimacing during transitions. His posture shows a forward head position with rounded shoulders, potentially contributing to his ongoing cervical and thoracic symptoms.

Standing and Balance:

Standing tolerance is limited to approximately 20 minutes, during which Mr. Skinner displays continuous movement and weight shifting rather than maintaining static positions. While he passed basic balance testing using the Berg Balance Scale, observation of his functional mobility reveals subtle instability, particularly during direction changes and when navigating confined spaces. His gait pattern demonstrates decreased speed and confidence compared to his pre-injury status, with deliberate, cautious movements that suggest underlying vestibular involvement.

Transfers and Mobility:

Mr. Skinner's transfer abilities have been notably impacted, particularly in lower-height situations. During bed mobility assessment, he demonstrated difficulty with positional changes and required assistance positioning his feet when moving from supine to sitting. While he maintains independence with most transfers, they are performed with significant compensatory movements and visible effort. His stability during transfers is reduced, necessitating consistent use of upper extremity support for safety.

Ambulatory Function:

Gait assessment revealed reduced walking speed and endurance, with Mr. Skinner managing approximately 10 minutes of continuous ambulation at a leisurely pace before requiring rest. His walking pattern shows notable changes from his pre-injury status, characterized by decreased stride length and reduced arm swing. During community mobility assessment, he exhibited heightened anxiety and caution, particularly in areas with increased sensory stimulation or multiple environmental demands.

Physical Handling and Dexterity:

Upper extremity function assessment revealed limitations in load handling capacity. While Mr. Skinner can manage to lift individual cases of maple syrup (approximately 30 pounds), he is unable to handle multiple cases or sustain repeated lifting activities. Fine motor coordination shows subtle changes affecting precision tasks, though these deficits become more pronounced with fatigue. His grip strength remains functional but demonstrates increased fatigue with sustained use.

Stair Management:

Stair navigation is performed independently but with significant modification from his previous capacity. Mr. Skinner demonstrates safe use of railings and appropriate sequencing, however, his speed and confidence are notably reduced. He exhibits increased caution during descent, particularly when managing visual transitions between lighting conditions.

Behavioral Observations:

Throughout the assessment, Mr. Skinner displayed consistent evidence of fatigue, requiring frequent rest breaks between assessment components. His affect remained appropriate but showed clear signs of frustration when confronting tasks that were previously performed with ease. He demonstrated good insight into his limitations and appropriate use of compensatory strategies, though at times pushed himself beyond comfortable tolerances in an apparent attempt to perform at pre-injury levels. His interaction style remained engaged and cooperative throughout the assessment, despite visible signs of physical and cognitive fatigue.

Active Range of Motion:

| Legend:  WFL: Within Functional Limits  %: approximate percentage of normal range  Nominal: less than 25% range | | | | |
| --- | --- | --- | --- | --- |
| Movement | | Right | Left | Comments |
| Neck | Forward flexion | WFL | | No identified limitations. |
| Lateral flexion | WFL | WFL |
| Rotation | WFL | WFL |
| Extension | WFL | |
| Shoulder | Flexion | WFL | WFL | No identified limitations. |
| Extension | WFL | WFL |
| Abduction | WFL | WFL |
| Adduction | WFL | WFL |
| Internal rotation | WFL | WFL |
| External rotation | WFL | WFL |
| Elbow | Flexion | WFL | WFL | No identified limitations. |
| Extension | WFL | WFL |
| Wrist | Flexion | WFL | WFL | No identified limitations. |
| Extension | WFL | WFL |
| Supination | WFL | WFL |
| Pronation | WFL | WFL |
| Trunk | Forward flexion | WFL | | No identified limitations. |
| Lateral flexion | WFL | WFL |
| Rotation | WFL | WFL |
| Hip | Flexion | WFL | WFL | No identified limitations. |
| Extension | WFL | WFL |
| Knee | Flexion | WFL | WFL | No identified limitations. |
| Extension | WFL | WFL |
| Ankle | Dorsiflexion | WFL | WFL | No identified limitations. |
| Plantar flexion | WFL | WFL |

Emotional Presentation:

Cognitive Presentation:

TYPICAL DAY:

Pre-Accident Routine:

Prior to the subject accident, Mr. Skinner maintained an exceptionally demanding schedule that demonstrated his high level of function and energy. During peak season (December through late May), his day would begin at 5:00-6:00 AM with a quick breakfast of toast and coffee before departing for town. He would arrive at his workplace by 7:00 AM, using this quiet hour before the store's 8:00 AM opening to manage administrative tasks and planning. His workday would extend until 5:00 PM, followed by paperwork completion until approximately 6:30 PM.

During sap collection season, his already full days extended even further. He would frequently make customer service calls for equipment issues while traveling to his sugar camp, typically arriving between 8:30 and 9:00 PM. There, he would prepare and manage the boiling of approximately 750 gallons of sap. Despite getting only 3-4 hours of sleep, he maintained this rigorous schedule seven days per week, using Sundays as catch-up days for his own operation while remaining available for customer needs.

During the off-season, Mr. Skinner would maintain a slightly modified but still demanding schedule. After taking one week for fishing as a "reset" period, he would work standard business hours but supplement these with extensive business development activities, including cold calling potential customers. Three evenings per week were dedicated to wood milling, and he independently managed all property maintenance including firewood preparation and lawn care.

Current Routine:

Mr. Skinner's current daily routine reflects the significant impact of his accident-related limitations. His role has shifted to that of Business Development Manager for Ontario, working primarily from the company's Barrie flagship location. This position requires him to travel to Barrie on Sundays, returning home on Thursday nights, a schedule that imposes significant physical and cognitive demands.

His workday now requires careful management of his energy levels and cognitive resources. While workplace demands have increased due to growing equipment sales, he finds himself unable to maintain his previous capacity for multitasking and extended work hours. He must complete email correspondence after 5:00 PM when the office environment is quieter, as he can no longer process information effectively amid typical workplace activity levels.

A notable change in his routine is the frequent need for breaks throughout the workday. The previously manageable task of sitting at a computer for extended periods now requires regular interruption, as he cannot sustain the 10-hour days that were once routine. Even with these adaptations, he often returns home physically and mentally exhausted.

Evening activities have been severely curtailed. Upon returning home, he typically has enough energy only for essential tasks such as making dinner and washing dishes before retiring to bed by 9:00 PM. His fatigue levels are such that he frequently forgets to maintain regular communication with his partner, a sharp contrast to his previously high level of engagement in both personal and professional relationships.

Household maintenance activities that were previously integrated into his daily routine have largely ceased. Wood cutting, which he hasn't performed for three years, exemplifies this change. His garden areas are neglected, and routine tasks such as dump runs have become irregular. His wife has noted this dramatic shift, describing his current home life participation as "2%" compared to his previous "50%" contribution to household tasks. The property's three acres, including two acres of grass and one acre of bush, receive minimal maintenance beyond basic grass cutting, which must now be performed in segments due to his limited stamina.

This stark contrast between his pre and post-accident daily routines reflects not only physical limitations but also the complex interaction between his physical symptoms, cognitive challenges, and fatigue levels. The need for frequent rest periods and careful energy conservation has fundamentally altered his ability to engage in both necessary tasks and discretionary activities that previously defined his lifestyle.

ENVIRONMENTAL ASSESSMENT:

Mr. Skinner’s residence consists of a single-story bungalow situated on a three-acre rural property at 1610 Cedar Mills Road, Mississippi Station, Ontario. Assessment of the dwelling reveals a conventional single-level floor plan comprising three bedrooms and one full bathroom. The interior configuration presents no significant mobility barriers, with standard doorway dimensions and minimal transitional thresholds between rooms.

The residence's primary bathroom incorporates standard fixtures, including a conventional tub/shower combination and toilet. No adaptive equipment or modifications have been implemented in this space. The kitchen maintains original configurations with standard-height countertops and conventional appliance placement. Assessment of flooring surfaces throughout the residence indicates hardwood in the bedrooms and main living areas, ceramic tile in the bathroom, and vinyl flooring in the kitchen.

Examination of the exterior property reveals substantial maintenance requirements across all seasons. The grounds encompass two distinct zones: approximately 1.5 acres of maintained lawn requiring regular mowing, and one acre of wooded terrain necessitating periodic management. The property's rural location mandates a wood heating system, creating additional maintenance demands for firewood procurement and preparation.

A detached workshop structure serves as a critical component of the property's functional requirements. This building houses essential maintenance equipment and materials necessary for property upkeep, as well as specialized equipment related to Mr. Skinner's sugar bush operations. The workshop's configuration necessitates frequent access for equipment maintenance and presents specific physical demands related to reaching and lifting from multiple storage levels.

Assessment of maintenance requirements indicates several essential ongoing tasks that directly impact the property's habitability. These include regular mowing of extensive lawn areas, snow removal from a substantial gravel driveway, preparation and storage of heating fuel (wood), and maintenance of sugar bush equipment and infrastructure. Prior to the subject accident, Mr. Skinner independently executed all maintenance tasks. Current observation reveals that the physical demands of property maintenance significantly exceed his present functional capabilities.

While the single-level design of the main residence accommodates basic mobility requirements, the extensive nature of outdoor maintenance demands presents a substantial gap between environmental requirements and Mr. Skinner's current functional status. This disparity necessitates consideration of comprehensive support services to maintain the property's basic functionality and safety.

LIVING ARRANGEMENTS/SOCIAL STATUS:

| Marital Status | Married ☐  Single ☐  Common Law X  Other ☐ |
| --- | --- |
| Living Arrangement | Lives alone with his wife and one dog |
| Children | None living in the home |

ACTIVITIES OF DAILY LIVING (Pre and Post Accident):

Mr. Skinner's ability to perform activities of daily living has undergone substantial changes since the subject accident, with impacts observed across all functional domains. Prior to the accident, he maintained complete independence in personal care while managing a demanding business schedule and extensive property maintenance responsibilities. His high level of function enabled him to balance multiple roles including business owner, property manager, community leader, and active contributor to household operations.

In terms of self-care, Mr. Skinner maintains basic independence but requires significantly more time and energy to complete routine tasks. Morning routines that were previously accomplished efficiently now require careful pacing and frequent position changes. While he can complete personal hygiene and grooming independently, these activities consume considerably more energy and often require rest breaks, particularly during tasks requiring sustained forward postures such as washing his face or brushing teeth. Dressing activities, though still independent, have been modified to accommodate his physical limitations. He now sits for lower body dressing tasks that were previously performed standing, and activities requiring sustained bending or reaching often result in increased pain and fatigue.

The most dramatic changes are evident in his household management capabilities. Prior to the accident, Mr. Skinner was an equal partner in household operations, managing approximately half of indoor housekeeping duties while independently maintaining their extensive three-acre property. He regularly prepared meals, participated in routine cleaning, and handled all aspects of outdoor maintenance. This high level of domestic engagement complemented his professional responsibilities, demonstrating remarkable energy and organizational capacity.

Current household participation has diminished to what Mr. Skinner estimates as "2%" of his previous contribution, a decline his wife has noted with concern. He rarely cooks now, finding the combined physical demands of standing and cognitive requirements of meal preparation overwhelming. Complex meal preparation has become particularly challenging due to difficulties with multi-step planning and sustained attention. Kitchen activities that were once routine, such as preparing advance meals for busy periods, are no longer feasible within his current capabilities.

Property maintenance has been especially impacted given the scope of their land holdings. Their three-acre property, comprising two acres of grass and one acre of woodlot, previously received meticulous attention under Mr. Skinner's care. Now, even basic lawn mowing must be segmented into smaller tasks with mandatory rest periods between sessions. He has not cut firewood for three years, a task that was previously a regular part of his routine, and his son has assumed responsibility for all wood splitting activities. Garden areas have become largely neglected, and the sugar bush lines that were once central to their business operations are now managed entirely by his wife.

The cumulative effect of these changes extends beyond mere task completion to impact fundamental life roles. Mr. Skinner's position as Vice President of the Carp Farmer's Market and board member of the Lanark and District Maple Syrup Producer Association reflected his deep community involvement and professional leadership. These roles required energy and cognitive resources that are no longer consistently available to him. His capacity for business networking and community engagement has diminished significantly, requiring careful energy conservation and advanced planning for any activities beyond basic daily requirements.

Financial management and business planning have also been affected by his cognitive challenges. While he maintains involvement in financial decisions, his previous ability to manage complex business forecasting and expansion planning has been notably reduced. The ambitious plans for expanding their sugar bush operation have been curtailed, limited by both his physical capabilities and cognitive stamina.

This comprehensive alteration in activity performance has necessitated a fundamental shift in Mr. Skinner's daily routine and life roles. The transition from highly independent business owner to requiring increased supervision and support represents a significant change in his functional status. His reduced capacity to maintain property owner responsibilities and diminished ability to participate in professional organizations has altered not only his daily activities but also his sense of identity and purpose. The necessity of carefully managing energy levels and cognitive demands has transformed previously routine tasks into activities requiring deliberate planning and pacing, fundamentally changing his engagement with daily life.

These pervasive changes in functional capacity demonstrate the significant impact of Mr. Skinner's injuries on his overall independence and quality of life. The consistent pattern of decline across all activity domains suggests a substantial and lasting alteration in his ability to engage in both necessary and discretionary activities that previously defined his lifestyle.

Vocational Activities:

Mr. Skinner's vocational trajectory has undergone significant changes since the subject accident, with substantial modifications to both his work capacity and role responsibilities. Prior to the accident, he operated as a highly successful, self-directed sales professional in the maple syrup equipment industry, working 50-60 hours weekly while maintaining multiple concurrent business operations. His pre-accident work routine demonstrated remarkable cognitive and physical stamina, routinely managing complex customer interactions, equipment specifications, and business operations with minimal need for written documentation or external support.

The immediate post-accident period resulted in complete work cessation for five months, followed by a two-month attempt at part-time work from home. Despite intentions to return to full-time duties by May 1, 2022, Mr. Skinner was unable to resume his previous role due to ongoing physical and cognitive limitations. This forced transition led to significant business disruption and eventually required him to seek alternative employment arrangements.

During his recovery period, Mr. Skinner attempted to maintain some level of occupational engagement by working as a loader operator at a gravel pit for two seasonal periods. This position, while allowing him to remain professionally active, represented a significant step back from his previous level of responsibility and earnings capacity. The physical demands of this transitional role, though different from his previous work, still proved challenging within his post-injury limitations.

Currently, Mr. Skinner has secured a position as Business Development Manager for Ontario with a maple syrup equipment company, based primarily out of their Barrie flagship location. This role, while within his industry expertise, requires significant modifications to accommodate his ongoing symptoms and functional limitations. His work week now involves Sunday travel to Barrie with return trips on Thursday nights, a schedule that imposes considerable physical and cognitive demands.

The nature of his work has changed substantially. Where he previously managed multiple customer interactions simultaneously, often taking 4-5 calls while driving and maintaining detailed equipment specifications in memory, he now requires written documentation for all customer interactions and struggles with recall of basic product details. His difficulty with multitasking has necessitated a more structured approach to work activities, with email correspondence relegated to quiet periods after 5:00 PM when reduced office activity allows for better concentration.

Mr. Skinner's current position involves providing quotes to customers and dealers throughout Ontario, a task that becomes increasingly challenging due to his cognitive limitations and fatigue levels. His employers have implemented additional oversight of his work, with colleagues checking his quotes and specifications - a level of supervision that was unnecessary in his previous role. He expresses uncertainty about managing the full scope of job responsibilities once he receives his company vehicle, anticipating difficulties with the combined demands of travel, customer interactions, and technical specifications.

The impact on his work capacity is further evidenced by his reduced stamina for computer-based tasks. Previously able to manage extended periods of computer work, he now requires frequent breaks and cannot sustain the 10-hour days that were once routine. His workday is punctuated by regular rest periods, and he reports significant fatigue by day's end, often affecting his ability to maintain regular communication with customers and colleagues.

These vocational changes have had substantial financial implications. The loss of his independent business operations, particularly the planned expansion of his sugar bush facility, represents a significant reduction in both current earnings and future earning potential. The necessity of working under closer supervision with reduced responsibilities marks a fundamental shift in his professional capacity and career trajectory.

The cumulative effect of these changes suggests a significant and likely permanent alteration in Mr. Skinner's vocational capabilities. While he has managed to maintain employment within his industry, the modifications required to accommodate his limitations and the reduction in his ability to function independently represent a marked decline from his pre-accident vocational status. The ongoing need for additional supervision and support, combined with his reduced capacity for complex task management, indicates a substantial change in his occupational function and future employment prospects.

Leisure Activities:

Prior to the accident, Mr. Skinner maintained an active lifestyle that seamlessly integrated business and leisure activities. His recreational pursuits were closely tied to his property and sugar bush operations, where he found significant satisfaction in activities that combined physical work with business development. He maintained a traditional annual fishing trip as a "reset" period after each busy season, demonstrating his ability to effectively balance work and leisure time.

Current leisure participation has diminished substantially. The physical demands of sugar bush maintenance now exceed his capabilities, and activities requiring sustained physical effort or complex planning have been largely abandoned. His fishing trips, while still attempted, now require a three-hour afternoon nap - a level of fatigue never experienced pre-accident. This need for extensive rest periods has transformed previously enjoyable activities into physically and mentally demanding tasks that require careful energy management and extended recovery time.

Community Access:

Before the accident, Mr. Skinner demonstrated extensive community mobility and engagement. He moved freely throughout his community, effectively combining business travel with social engagement and professional networking. His regular presence at the Carp Farmer's Market and active participation in industry events facilitated consistent community interaction and leadership opportunities.

Current community access is severely restricted by both physical limitations and cognitive fatigue. Simple outings now require careful planning and energy conservation. His 25-year commitment to the Carp Farmer's Market has been significantly impacted, with his participation markedly reduced. The cognitive demands of social interaction, combined with physical symptoms such as noise sensitivity and fatigue, have made community events particularly challenging to navigate. Even basic community access requires careful planning and often results in extended recovery periods.

Volunteer Activities:

Mr. Skinner's pre-accident volunteer activities were primarily integrated into his professional and community roles, centered around two key positions:

* Board member of the Lanark and District Maple Syrup Producer Association
* Vice President of the Carp Farmer's Market

While these positions were technically volunteer roles, they represented significant community contribution and professional leadership, allowing Mr. Skinner to maintain strong connections within his industry and local community.

His current capacity for volunteer engagement has been severely curtailed by the combination of:

* Physical limitations affecting his ability to participate in events
* Cognitive fatigue impacting his ability to engage in meetings and decision-making
* Reduced energy reserves affecting his overall participation capability
* Social interaction challenges due to noise sensitivity and fatigue

The cumulative effect of these changes across all three domains has fundamentally altered Mr. Skinner's lifestyle and sense of community connection. His current pattern of activity shows significant social isolation compared to his pre-accident level of engagement. The need to carefully manage energy levels and cognitive demands has transformed previously routine social and leisure activities into potentially overwhelming challenges requiring careful planning and extended recovery periods.

CLOSING COMMENTS:

Sincerely,



\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sebastien Ferland OT Reg.(Ont)

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*.*