



**Errol, 35 and married**, began counselling with his **Employee and Family Assistance Program (EFAP)** to address issues pertaining to his depressed mood. Errol's employer had authorized the Depression Care™ program which meant that Errol was screened by his counsellor for depressive symptoms using the program's validated diagnostic tool. Screening results indicated that Errol would benefit from Depression Care™, and he opted into the program.

## Assessment and care plan

Through the Depression Care™ assessment process, Errol's results revealed severe levels of depression-related symptoms, self-medication with alcohol (suggesting substance abuse) and high levels of anxiety. Errol also reported taking prescribed medication to address panic attacks, but was not taking any anti-depressants.

Errol's assessment and medication were reviewed by a consulting psychiatrist who recommended the following care plan to be implemented by the Depression Care™ counsellor:

- **Monitoring and addressing risk of suicide, including safety planning**
- **Monitoring and addressing abuse of alcohol, including education about healthier coping techniques**
- **Prescription of anti-depressant medication to augment the therapeutic process**

The counsellor also provided the recommended care plan to Errol's physician so they could work together to ensure the optimal pharmacological treatment was being used along with counselling. A combination of cognitive behavioural therapy (CBT) and medication is best practice in the treatment of depression or anxiety.

## Care and treatment

Errol and his counsellor worked on the following together:

- Developing a safety plan for Errol when experiencing thoughts of self-harm
- Education about depression, anxiety and their relationship to alcohol
- Encouragement to resume attendance at self-help programs in the community for alcohol abuse
- Practice of CBT strategies to change problematic patterns of thinking and behaving

Errol's counsellor also arranged for a psychiatric assessment via his physician and he was prescribed an anti-depressant.

## Case closure

Prior to case closure, Errol was again assessed with the Depression Care™ diagnostic tool. Errol's level of depression was dramatically reduced compared to the onset of his involvement in the program.

## Outcomes

Over the course of 12 sessions with this counsellor, a psychiatric assessment and new medication, Errol's involvement in the Depression Care™ program resulted in:

- No suicidal ideation
- Over six weeks of sobriety, supported by weekly involvement in a self-care program in the community
- Involvement in an out-patient psychotherapy group
- Daily use of various CBT-based tools and strategies, including a daily mood and thought monitoring log to enhance awareness and prompt the immediate use of healthy coping strategies such as deep breathing and identifying cognitive distortions and replacing with realistic thoughts
- Renewed and new social connections

## Workplace Support Programs

Depression Care™ is part of our Workplace Support Programs - specialized mental health and addiction prevention/intervention programs designed to reduce costs for organizations with faster diagnosis, sustainable recovery and incidence of short and long-term disability.

Call [1.866.991.4954](tel:1.866.991.4954) or visit [morneaushepell.com](http://morneaushepell.com).

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