

January 17, 2023

Disability Determination Services
170 That Rd.
Any Town, ST 55555

RE: Joan Howard
SSN: 999-99-9999
DOB: 04/27/70

To Whom It May Concern:

Introduction

Joan is a 45-year-old woman of medium height and is somewhat overweight. Her clothes are usually soiled and she is often malodorous. She is diagnosed with bipolar disorder, borderline personality disorder, and many medical conditions. During discussions, Joan interrupts conversations constantly to get the attention of others who may be in the same room. Because of this she requires frequent redirection to the topic at hand. If she does not receive the attention she is seeking, she will often explode into angry outbursts and episodes of excessive crying. Her social functioning is extremely impaired due to borderline personality disorder and she continually struggles in her relationships.

Personal History

Joan is guarded about most details of her life. She was raised in Any Town by both of her parents and comes from a large family of eight children. Joan is the youngest. Her parents are deceased and she has strained relationships with other family members. When asked more about her upbringing, she states that she does not like her family because they are always trying to take advantage of her and they cannot be trusted. Joan has never married. She has three children, a 26 year old daughter and 22 year old twins, a son and a daughter, and two grandchildren. She has never spoken about her children's fathers.

Joan's relationship with her children has always been strained and the center of the difficulties is that Joan is completely focused on having her needs met - regardless of what that means to the others around her.

Joan did not complete high school and says that her inability to finish school is another example of "How I am really just not good enough". She reports having struggled in special education classes while in school. She had difficult relationships with peers and teachers. She reports that school was hard and she did not enjoy it, which is why she dropped out.

Employment History

Joan participated in Job Corps and Welfare-to-Work Programs. Joan tells us that she has very little work history. She states that she's rarely held a job outside the home beyond a few weeks. To my knowledge, the only job Joan has ever held for more than a couple of days was for about a year and a half in the mid 1990's. Joan worked at the Department of Social Services as a receptionist under welfare-to-work arrangement. It should be noted that she was able to perform these functions only with the job supports available to the program—job coaching, on-site supervision and supportive encouragement. Joan experiences significant problems working in an office setting due to her inability to focus for more than a short period of time on a given activity. In addition, she usually needs to take extra breaks and can often not make it through the day without needing to leave early. Often she was unable to complete tasks even if the instructions were repeated a number of times and they only included one or two steps. Joan is impulsive and unable to stop and think things through before acting, both verbally and behaviorally. She has difficulty following procedures and does not understand how her actions impact others. When she did make mistakes she was usually unable to identify what the mistake was and how it happened. When it was pointed out to her, she usually became verbally combative.

Legal History

As a result of her struggles with memory, Joan has experienced a lot of legal trouble over the years. Often, Joan either forgets her court dates or does not follow through on getting a public defender. She tends to request and be granted a postponement but then forgets to go to the rescheduled court date. The judge then issues a bench warrant, and Joan is arrested if she attracts the attention of law enforcement.

She has mostly served brief sentences (three to six months) but these sentences have disrupted her Medicaid benefits, Food Stamps, and caused her to lose housing. When her children were younger, Joan's arrests meant that they were suddenly without a responsible parent and any means of economic support.

Substance Use

Joan began using alcohol early in life, her mother allowed her to drink at the age of 13. She drinks when she feels "overwhelmed" and stressed out by her symptoms. When asked how drinking impacts her symptoms, Joan replies, "I can't deal with none of this, drinking helps me forget." When drinking, she presents as teary eyed and resentful of others. During other occasions, she reports that drinking helps her get through the day and ignore the stressors in her life. When asked how she feels when she is not drinking, she answers, "Everything is so much worse...I just can't deal with it." Joan is currently in treatment with an addictions counselor at CHC who evaluated Joan multiple times while she was sober. Her treatment also includes group therapy. Joan struggles with getting along with the others in group - most recently she got into a huge argument with group members after she had shared their personal business with others who were not in the group. According to her addiction counselor - "Because she violated the other group members like that, they are having a hard time trusting her". In addition, she seems to struggle listening to others in group and is only interested when she is the center of attention. He

also documented that Joan displays a “high level of anxiety, rapid speech, and tangential thought patterns” and “needs continuous redirection” while in treatment sessions even when sober.

Physical History

Joan is diagnosed with diabetes, hypertension, arthritis and experiences lower back pain. She is unable to control her diabetes and often makes inappropriate food choices which impact health and safety. Her arthritis makes doing everyday tasks challenging. She injured her back when walking down the street - falling into an open manhole. She cannot lift items more than ten pounds. Her back pain combined with her arthritis makes walking, sitting, and lifting challenging. She can only walk for 2-3 blocks without taking a break. When sitting, she shifts in her chair uncomfortably asking “Are we done yet?” both due to her symptoms as well as pain.

The fact that she is unable to trust her doctors makes benefiting from medical care very difficult. Her medical records indicate that she is extremely leery of doctors and has a hard time trusting them with her care.

Psychiatric History

Joan is diagnosed with bipolar disorder and borderline personality disorder. She is seen by a psychiatrist, addictions counselor, and social worker at Community Health Care (CHC). Joan’s medical records at CHC note that she often presents as disheveled, anxious, inappropriate, and demonstrates poor judgment. She has also experienced paranoia during interactions with her treatment team. Joan is prescribed psychiatric medications, but does not take them on a consistent basis. She believes that she can manage her own symptoms and she does not need pharmaceutical assistance. In the past, Joan has had some behavioral challenges at the pharmacy. She has accused others of stealing her medications, which has resulted in the manager asking her to leave and calling the police.

Joan is unable to stay still. She experiences hyperactivity many days a week. She is easily distracted and difficult to redirect back to the task at hand. She experiences psychomotor agitation, anxiety, frequent pacing and flees a situation when her demands are not met.

When Joan transitions from her manic episodes to depression, she experiences decreased energy and increased sleep. During these times, Joan sleeps wherever she wants—on the street, across a row of chairs in the waiting room, on a park bench. She is dramatic and demanding about these naps and becomes irritable and aggravated if asked to move. She has difficulty concentrating on and following through with tasks and often withdraws from the treatment team.

At CHC, where Joan is well known, she will leave my office and wander through the waiting room to the front of the building, asking staff and clients for cigarettes. She is unable to understand why this behavior is objectionable. Nothing matters to Joan other than meeting her immediate desire. Even when redirected, “Joan, you said you wanted to work on getting your ID. Where are you going? Can the cigarette wait for a few minutes?” Even in the face of social cues, Joan will not alter her behavior. These behaviors make it difficult for her to maintain employment.

Functional Impairments

Understand, Remember, or Apply Information - As evidenced by her inability to remember her court dates, Joan often forgets important details related to managing her life. In interviews to complete this application process, often she was completely unable to answer questions related to simple details about her life like the names of people who are close to her. In addition to forgetting to attend appointments, at times she misses them because she cannot remember or follow the directions to get to the location - even if it is very close by.

Interact with Others - Joan's social functioning is significantly impaired. Joan has no respect for authority or appreciation for law and order. Her inability to follow rules has led to frequent run-ins with authority figures such as security guards, police officers, treatment center staff, etc. which has led to several arrests.

Joan is unable to get along with others, as evidenced with her failed relationships with people in her treatment group and with her own children.

Joan has no support system. Her parents are deceased and she has rocky relationships with her three children. Joan was unable to consistently care for them as children due to her mental illness and addiction. They were raised by Joan's sisters who resent Joan's frequent begging for money, attention and transportation.

Joan's children love her but don't trust her. Many times, Joan has begged to stay with them and then stolen from them. She has stolen their rent money, food, bus passes, and jewelry. Joan has difficulty understanding why her children are angry with her and doesn't think she deserves their hostility. She does not experience guilt or remorse, but becomes resentful of her children's response.

Concentrate, Persist, or Maintain Pace - Joan is often forgetful and demonstrates memory deficits in many areas. For example, she often forgets to take her medication. Joan has great difficulty holding still and focusing her attention. She will abandon a conversation with a provider to go in search of a cigarette (or a soda, or a chicken sandwich) until her need is satisfied. As discussed earlier in the document, in her one work setting she was often unable to complete tasks because she could not remember the instructions.

Adapt or Manage Oneself - Joan often views providers in her life as 'people who just boss me around and make me do what they want'. She is often completely unable to manage her symptoms, specifically her inability to focus on tasks when other ideas pop into her head. For example, she would be in the middle of our interviews and would get up and bolt out of the room. When asked where she was going, she would get mad and cry, stating "I just wanted to say hi to my friend." When asked if she has goals in life, she says that her main goal is to get out of treatment so she can start her life as a veterinarian and make millions of dollars. As stated in the document above, she usually displays poor hygiene and often has to be reminded to take care of her hygiene issues.

Summary

Joan is a 45 year old female with significant mental health and substance use issues. While Joan's addictions and mental health issues are entwined, her treatment team believes that even if her addiction were to disappear, she would continue to have severe mental health impairments. Her severe manic episodes result in an inability to focus her attention and complete tasks. In addition, borderline personality disorder has destroyed familial relationships and significantly limits her ability to form relationships and interact with others.

If you have any additional questions and/or concerns please contact John Smith at 444-555-6666 or Dr. Mary Marshall at 444-555-6777.

Sincerely,

John Smith

Dr. Mary Marshall