January 17, 2023

Disability Determination Services
170 That Rd.
Any Town, ST 77777-7138

Re: Riley Jones
SSN: XXX-XX-XXXX
DOB: X-XX-62

Dear Disability Examiner:

Riley is a 54 year-old woman diagnosed with schizoaffective disorder and personality disorder, unspecified. She is also diagnosed with back pain; fibroid tumors; prolapsed uterus; Wolff-Parkinson-White Syndrome; microalbuminuria and diabetes. Riley is a large, commanding woman, standing 6'2" and weighing 300 pounds. She is grandiose and speaks with a loud voice, often speaking to God and looking toward the sky. At times, she doesn't seem to notice that there's another person in the room; instead she seems to believe that she's alone with her troubles and the Lord. Riley often presents with religious-themed delusions. She can speak for hours in a non-linear, disorganized fashion that is difficult to follow.

This information was gained by self-report, Community Health medical records, medical records from area hospitals, and the state judiciary case search.

Personal History

Riley was born and raised in Any Town in a family with two brothers; they were raised primarily by their mother. She remembers her childhood as a mix of good and bad. She says her mother was hard-working and responsible, but judgmental and not affectionate. She remembers her father as an alcoholic who was irresponsible and often gone from the home for days at a time. Her mother was very proud and wouldn't tell other relatives that she was out of money for food and heating fuel. Riley remembers not getting along with her oldest brother, reporting that he has always been bossy and controlling. She remembers frequently rebelling against him. She believes, "He was put in the family just to diminish my life." She was sexually abused at age 4 by a neighbor's son who was babysitting them. She reports that she was hard-headed as a child and teen, and was often getting in trouble. Her father often said verbally abusive things such as, "You're the dumbest girl in the world" and "You're so stupid!" She says her mother was very direct and often harsh. She remembers, "I was kind of shy and withdrawn." She ran away twice and finally moved out at age 18.

Riley remembers school as both bad and good. She liked some of her teachers, but felt like she didn't belong. She reports that she did well enough in her studies when she applied herself, but she often didn't, and had to attend summer school and night school in order to graduate. She was teased and picked on as a child by her brothers, children in the neighborhood, and others in school for being tall, overweight, and having a birthmark on her ear. Her eldest brother often

teased her to the point of being verbally abusive. She said she tried to fit in, but it didn't work. She frequently cut class to hang out with a few friends, drink and smoke marijuana. By high school, she had a small group of friends but stayed away from most other people.

As an adult, Riley lived with husbands, boyfriends, or her mother. She had her first son in the early '80s, then married at age 23 and had her second son. Her husband was physically and verbally abusive. He was unfaithful and controlling, wanting her to stay in the house all day waiting for him to come home. He would tell her that she was no good, and that she would end up on welfare and in the projects. She would fight back when he was physically abusive. After she left her first husband, she lived on and off with her mother, and lived in Another City for several years. She lived with a boyfriend in the early 1990s who was addicted to drugs and abusive. She has two adult sons, ages 26 and 32, and six grandchildren.

Riley continued to have strained family relations into her adult years. She witnessed the murder of her younger brother and can remember it "like it was yesterday." For several years in the 1990s, while she was using drugs, she lost custody of her children and her mother raised them. In the 2000s, she moved back in with her mother and lived there until her mother's death in 2009. (Her father died in 2000.) She and her older brother engaged in a two-year dispute over their mother's estate. It culminated with her brother gaining the property and Riley moving into a shelter. She has been homeless for the past five years—since her mother died-- living in various places, including with relatives, in shelters, on the street, in cars, and in her storage unit. For the past two years she has lived at the local homeless shelter and she continues to be bitter about this.

Employment History

Riley has a very long work history and has held many jobs, mostly for short duration. She started working as an adolescent doing babysitting and chores for neighbors, and by age 14 or 15 was doing office work. She worked at the post office for a few years in 1990s, but lost that job after getting in a vehicular accident and testing positive for drugs. Between the 1980s and 2000s, she worked in a bank, in residential care, as a nursing assistant, and at a local hospital. Her longest job was as a forklift operator in a warehouse from 2001 to 2006. She drove a paratransit vehicle from 2006-2008, and held her last job, driving an airport shuttle bus, in 2010.

She reports always having had interpersonal conflicts with supervisors and coworkers. However, she did not have great difficulty in the workplace until the 2000s, and since then, has quit or been fired from every job due to poor performance or arguing with supervisors. She noticed her problems increasing beginning with the forklift job. She began to have trouble with concentration, learning and remembering instructions, and with feeling overwhelmed and stressed. She says that at the forklift job, she had to work a 12-hour day to complete the equivalent work that others did in 8 hours. At her paratransit driver job, she remembers feeling very stressed. She had difficulty reading maps and got lost on the routes. She held her last job at the airport for only a few months before being fired due to an accident. Since then, she has not worked due to increasing mental health symptoms, although she reports that she wants to work and doesn't want to get disability benefits.

Legal History

Riley has a criminal record, with most of the charges having occurred between 1996 and 2000 while she was actively using. She went to court several times for possession, car theft, theft, prostitution, giving false statements to police, criminal non-support of her children, and writing bad checks. She spent six months in jail for vehicle theft. In 2011 and 2012, in the wake of conflicts with her brother over her mother's property, she received a domestic violence charge and two assault charges.

Substance Abuse

Riley began drinking at age 13 and smoking marijuana at age 14; she says she started using substances due to peer pressure and low self-esteem. In her teens and early 20s, she used only on weekends, but now sees that marijuana was a gateway drug into heavier substance use. She used when she was bored and having money was a trigger. She went through two periods in her life in which she used heavily: the first time was in her 20s, after she witnessed her brother's murder and was sustaining daily abuse by her husband, who believed in voodoo and cursed her in ways she found frightening. She drank alcohol, used cocaine and marijuana because she didn't want to deal with situations in her life that were painful. She was clean for several years in her 30s, then relapsed again for a 4-year period, after hanging out "with the wrong crowd," and getting involved with a boyfriend who was an addict. During this second period, she used cocaine, alcohol, marijuana, heroin, LSD, and pills. "You name it, I did it." Her reasons for using continued to include being abused and picked on, but now included losing custody of her kids. Guilt and shame over using created a vicious cycle and caused her to use more.

She attended several substance abuse programs—including Local Hospital, Recovery Program, and a "Bible-based program," whose name she doesn't remember. She has been clean for the past 14 years, but her mental health symptoms have steadily worsened.

Physical Health

Riley is diagnosed with several medical issues, including Wolff-Parkinson-White (WPW) Syndrome, diabetes, fibroid tumors, uterine prolapse, microalbuminuria, and back pain. She also reports frequent headaches. The gynecological problems, back pain, and WPW Syndrome impact her functioning on a daily basis. She remembers at least four past gynecological surgeries: two therapeutic abortions/D&Cs, a tubal ligation at General Hospital in 1989, and gynecological surgery at University Hospital in 2013. In addition, she has presented to the ERs at Mercy, University Hospital, Memorial Hospital, Community Hospital, Community Health, General Hospital, and Direction Hospital over the past 10 to 15 years for various somatic complaints, including back pain, vaginal bleeding and pain, skin rash, bedbugs, foot pain and swelling. She reports sustaining a serious head injury in her past, but is vague about when it occurred.

Riley experiences lower back pain on a daily basis. She has had back pain for the last 10 to 15 years and it has gotten progressively worse. She takes OTC painkillers for it, such as Motrin, and sometimes uses a heating pad, or spends extra time in a hot shower. She says that these treatments "help a little." Riley said that beginning in the early 2000s, her back hurt a lot by the

end of the workday from standing, sitting and lifting. The last few years she worked she frequently wore a back brace. Her back pain has continued to worsen and she now feels back pain at all times, but especially after sitting and standing.

Psychiatric History

Riley is diagnosed with schizoaffective disorder, depressive type and personality disorder, unspecified. She received no mental health treatment as a child or teenager. She was first told she might have bipolar disorder in her 20s by her son's therapist. In the 1990s, she saw a therapist for the first time and was diagnosed with bipolar disorder. She went to the ER in the 1990s because she was "having a nervous breakdown." Also in the '90s she reported psychiatric hospitalizations at Community Hospital and Crisis Center. She attended a few months of outpatient mental health treatment at Community Services in 2006. In 2012, her brother had her "psychologically evaluated" [emergency petitioned] at University Hospital. "They took me in handcuffs in a paddy wagon." Her records also show a visit to the ER at University Hospital in 2012 for depression.

She has poor insight about her mental health, reporting either, "I don't have a mental illness" or "I deal with depression." She experiences severe symptoms of depression and psychosis daily. Riley's psychotic symptoms are bizarre and characterized by religious delusions, thought disorder, visual and auditory hallucinations, and paranoid ideations.

Riley's religious delusions began in her 20s or 30s. She says things such as, "When I first stopped drugs, I had my first divine encounter. The Lord visited me, and let me know I'm special to him." She says she has been specially "anointed" or "appointed" by the Lord as an angel or messenger, and he bestowed her "with the prophecy." She also says that God gave her "financial blessings," by which she means the ability to send monies to people, churches, and causes that need and are deserving of money. She also believes that a church, at some point, became unhappy with her and has been interfering with her life: sending evil her way, making her live in bad circumstances, such as in homelessness, in the shelter, with very little money, and without work. She blames this church with causing the Lord to become unhappy with her and keeping her children and grandchildren from her. "I need to stay away from them, or I will bring the evil on them."

Records from her hospitalization found Riley to be extremely psychotic, believing people were programming her and out to get her. During her 2013 hospitalization at University Hospital for gynecological surgery, staff noted that, "Pt states people are being programmed with things off the internet at the shelter." Medical records continued to note severe psychosis, "Pt states she is under spiritual warfare. 'They want to take my mind but they can't have it.' During her stay, she endorsed ideas of reference stating 'on the airwaves they torture me because of what they believe in. I'm not crazy.'" When at University Hospital for surgery in 2013, staff noted, "Pt has preoccupation with religious thought, spiritual warfare and states, 'It's like modern day slavery. This may sound crazy but it is spiritual warfare!'"

Riley has several persistent delusions that impact her daily. As noted above, she believes that she is engaged in spiritual warfare with others around her. She is extremely paranoid about the

shelter and believes the staff and other residents are out to harm her. “God healed me, but when I went into the shelter, the spiritual warfare destroyed it all. I’ve been fought on every side for the love of money. I'm not under the world's system; I'm under the kingdom of the Lord. I don't love money but I do need it to survive. I feel taken advantage of on every side.”

In addition to her pervasive delusional thought processes, she experiences ongoing auditory hallucinations. She reports that she hears voices inside her head of “wicked spirits. They said I'm worthless." She reports these voices occur daily. She also hears voices, which she attributes to the spiritual world. "Didn't I tell you there was spiritual warfare? I hear the voices every day."

Riley also believes that Satan is working against her and trying to sway her actions. "I know Satan can do a lot of things except kill me." She reports these thoughts invade her mind, but "I try to send them right back out."

Riley experiences paranoia. She believes that various people and institutions are evil and bringing evil into her life. Sometimes she seems to be saying that they are in collusion with the church that is against her; at other times this is unclear. She believes that when she and her brother argued about her mother’s estate, he “opened up all the windows to let evil spirits come in.” She also believes that evil things have been done to her by shelter staff, SSA, Community Health, and the medical staff at University Hospital during her recent surgery. She recently had a bad experience at a local drop-in center, so is no longer trusting of Local Charities. When asked to sign a release of information for Local Charities, she refused. Her distrust of systems makes it difficult to get treatment. She often refuses to go places or do things due to her paranoia. While she has not yet received SSI, she believes it is being stolen by "the others."

Riley has also experienced some paranoia regarding her current treatment provider, Community Health Care (CHC). When she came back into treatment recently, her therapist approached her to discuss reengaging in care. Riley put her hands up as to defend herself stating, “I don’t want no trouble.” even though there is no history of problems or tension between her and her therapist. After one session, she was willing to reengage in treatment with her therapist, but remains suspicious of her and other providers at CHC. Twice providers at CHC have assisted Riley with housing vouchers, however, on both occasions her severe paranoia has prevented her from obtaining housing. She refused to share her birth certificate for the process, concerned with what would be done with it. Without the birth certificate, she was unable to access housing.

She also feels persecuted by her family for the mental health emergency petition several years ago. She resents the fact that she cannot live in the family home and has expressed persecutory beliefs about her family and her church. She said at one time, “You want to see what they did? I'll take off my wig and show you.” It was unclear what she was referring to in this instance.

Riley experiences ongoing symptoms of depression. She has lost interest in activities and finds it difficult to get out of bed. She reports that most days she wants to stay in bed all day and doesn’t want to talk to anyone. She loves music, cooking, reading and doing puzzles; however, when depressed, she has little interest in any of these. She reports she can’t concentrate to read or do puzzles. She states, "I feel so empty." During sessions she slumps in her chair, doesn’t make eye contact and cries throughout the session. When depressed, she says she feels worthless and

hopeless for not working, living in a shelter, and being separated from family members. She reports feeling very unhappy with herself. Medical records from CHC note, “Client is tearful at almost every appointment, often wailing hysterically to God over how horrible her life is.” She feels guilty over losing her storage unit which contained many family photographs and mementos. She feels that if she had been working, she could have paid for it and kept everything. She often feels she should be doing so much more with her life, that she’s worthless and stuck.

Riley reports an increased appetite when depressed. She notes, "It’s the highlight of my day. I use food as my drug." She has gained weight in recent months. Records confirm that she overeats to make herself feel better.

Riley reports significant sleep disturbances. She wakes up on and off throughout the night and only sleeps for 3-4 hours, “because of crazy stuff going on in my eargate.” It appears “eargate” is another delusion surrounding individuals attempting to read her mind. During sessions, her lack of sleep is apparent as she will fall asleep multiple times while working on paperwork. She also reports waking up frequently due to nightmares.

Riley denies any suicide attempts, however, she does exhibit passive suicidal ideation. She often wonders, “Why am I still here?” When overwhelmed, she has prayed to God to take her life. “Sometimes I think weird things like I wish I could be done with this life.” She has a history of suicidal ideation leading to hospitalization.

Riley has symptoms of personality disorders, including histrionic behavior, grandiosity, and difficulty interacting with others. She is very dramatic and has inflated expectations for herself. For example, wanted to know this therapist’s religious beliefs because she believed she could help save me. "I think I should become a missionary and just go around the world. I could be a blessing to others."

She said she doesn't want to have to live in a one-bedroom apartment in a subsidized building because she's an "eagle that needs to soar”. She's waiting for God's word about when and how this will happen. She doesn't want to make any concrete plans because she wants to be ready when God shows the way.

Functional Information

Understand, Remember, or Apply Information
Riley has significant memory deficits. She often misses appointments at CHC. She misplaces items, forgets appointments, and forgets where she has spent money. She gets confused easily and often worries about getting lost.

Riley has trouble following directions. She is easily distracted, but often believes she knows the right ways to do things. She cannot follow verbal instructions as she becomes confused and forgetful. Written instructions are also difficult for her, she becomes suspicious of why she is doing something a certain way.

Riley does not handle stress well. She becomes agitated, paranoid and distrusting. She does not cope well with changes to her routine. She refers to herself as "a creature of habit" and finds it difficult to adjust to new things. Changes make her feel tense and unsure of herself.

Interact with Others

It can be difficult to interact with Riley due to her being extremely tangential and labile. She speaks at length about her religious and psychotic beliefs, which makes conversation very difficult. She requires redirection and limited information can be gathered. She provides disjointed accounts of events. She is tearful, loud and "tired of being around cursing and bad behavior in the shelter." She feels like she is "being tested by God" and says she is fighting for her sanity.

Riley has tumultuous relationships with her family. She is in intermittent contact with her youngest son and has no contact with her eldest son. She feels persecuted by her brother for the mental health emergency petition and being charged with assault. She has no contact with her grandchildren because she doesn't want to bring evil on them for "disobeying the Lord." She also feels abandoned by much of her family. While she often reports feeling persecuted or attacked by her family, she also expresses remorse for her lack of contact with her children and grandchildren. She feels very alone, especially living on the street, but insists she cannot see her family because, "I want them to stay protected."

Riley has very few friends and keeps those at a distance. She has always had trouble with other women. She does not like groups; she tends to sit in the back, not share, and worries about others' motivation for learning about her. She has a history of altercations at the shelter. She feels that others are out to get her; however, it appears that she is often the aggressor.

When she worked, Riley had trouble relating to supervisors and co-workers. She felt that supervisors played favorites by promoting other individuals over her. At her most recent job, she was there for only one day before being told to leave, but says she doesn't know why. She volunteered in the laundry room at the shelter, but quit shortly after starting due to altercations with the staff working there. Riley says she gets really angry very easily, and fights people.

Concentrate, Persist, or Maintain Pace

Riley has difficulty focusing on and completing tasks. She has always liked to read, but loses concentration within a few minutes. Being alone helps her concentrate, but she still has to reread something several times in order to comprehend it. She also finds her mind wandering when watching TV. Her thoughts tend to jump around going from subject to subject making it difficult to focus. Her lack of focus is evident during sessions and she requires frequent redirection.

As previously mentioned in this report, Riley experienced difficulty in maintaining pace in previous work settings. She states that she began to have trouble with concentration, learning and remembering instructions, and with feeling overwhelmed and stressed. She says that at the forklift job, she had to work a 12-hour day to complete the equivalent work that others did in 8 hours.

Adapt or Manage Oneself
Riley has significant deficits in managing her own self-care. She seems uncaring about how she looks, she doesn't shower or maintain appropriate hygiene, preferring to stay in bed all day due to depression. She stays in pajamas for days and won't shower when "under a spirit of depression." When depressed, she reports "letting things go" and not caring about completing chores or other housework.

Although Riley tends to overeat when depressed, she does not prepare meals for herself and would struggle to do so. She is dependent on food kitchens and the shelter to provide meals, or she buys ready-made food. She would have difficulty completing a recipe. In addition, she struggles in a grocery store, she feels persecuted and that people are watching her. Due to symptoms of her illness, her bizarre behaviors are also disruptive to other shoppers.

Riley struggles with public transportation. She doesn't like crowds and it bothers her to be around others on the bus. "I don't want to be involved in no confusion." She gets into altercations easily and does not like being in a confined space. Riley also struggles with budgeting; when she is depressed she spends her money and doesn't realize she's spent it.

Summary

Riley is a 54-year old woman with schizoaffective disorder and personality disorder, unspecified. She is also diagnosed with multiple somatic conditions. She experiences serious mental health symptoms on a daily basis, including low mood, tearfulness, poor concentration, difficulty in interactions with other, grandiosity, histrionic behavior, auditory and visual hallucinations, paranoia, religious delusions, and disordered thought. Although she has a long work history, over the past 10 to15 years, her ability to work has steadily decreased, and she has not held a job since 2010.

Thank you for your time and attention to this matter. If you need more information or have questions, please contact Jill Smith at 444-555-6666 or Dr. Mary Marshall at 444-555-6777.

Sincerely,

Jill Smith

Dr. Mary Marshall