

Handout: Sample Letter of Support of a Claim for Psychiatric Disability

Threshold
PO Box 11706
Durham, NC 27703

May 21, 1997

Disability Determination Services
PO Box 243
Raleigh, NC 27602
ATTN: Ms. Jane Doe, Disability Specialist 26/787

Re: Emma Consumer
SS# 123-45-6789

Dear Ms. Doe:

I am pleased to respond to your request for information on the above claimant. With the claimant's valid consent, allow me to submit the following.

Ms. Consumer is a (client) member of Threshold, a psychiatric rehabilitation program for adults with serious mental illness and accompanying disability in Durham County. Threshold offers prevocational training, supported employment, social/recreational opportunities and supported education. Threshold is accredited by the NC Division of MHDDSAS as a psychosocial rehabilitation program, licensed by the NC Division of Facility Services and is certified by the International Center for Clubhouse Development as a clubhouse model program. Threshold is a contract affiliate of the Durham County Mental Health Center and a proud member agency of the Triangle United Way.

Ms. Consumer was referred to Threshold in June of 1996 upon discharge from John Umstead Hospital in Butner. Both the hospital and the clinical treatment team at the Durham County Mental Health Center felt that the referral was necessary, as Ms. Consumer's previous post hospitalization periods had gone poorly, resulting in numerous readmissions. Ms. Consumer presented with a desire to "get restructured and readjusted" now that she was out of the hospital. Ms. Consumer further requested assistance in reducing her isolation and making new friends. Ms. Consumer was subsequently admitted to services here and remains active in our programs of rehabilitation to date.

At the time of admission to services at Threshold, Ms. Consumer maintained a diagnosis of Schizophrenia, Paranoid Type (DSMIV, 295.30) on Axis I. Threshold's experience with Ms. Consumer since this time has been consistent with this diagnosis. Ms. Consumer continues to present with symptoms of auditory hallucinations on a daily basis. Ms. Consumer's hallucinations consist of several different voices that provide a running commentary on her behavior and thoughts, frequently taking on an overtly negative tone. There is resulting dysfunction in social and occupational functioning. Ms. Consumer presents with many negative symptoms known to accompany a diagnosis of

Schizophrenia, Paranoid Type. These include a frequent tendency to isolate, apparent lack of motivation and apparent lethargy. These negative symptoms, along with the positive symptoms of the auditory hallucinations and the poor functioning in social and occupational roles were the reasons for the referral to Threshold.

Ms. Consumer has been a regular participant in Threshold's programs of disability rehabilitation since June of 1996. There have been several periods where Ms. Consumer did not attend programming and was, instead, alone and isolating in the community. The longest of these periods was several weeks with the shortest lasting several days. Each time, extensive outreach was performed by Threshold, resulting in the return of Ms. Consumer to the program. Ms. Consumer's pattern of attendance, aside from the above periods, has been almost daily. Accordingly, Threshold has had ample opportunity to assess her functioning in several areas.

Ms. Consumer has been a part of Threshold's prevocational day program since admission. This program engages members in the day-to-day operations of the clubhouse. Ms. Consumer has been a regular participant in the Kitchen Unit since her admission. I have "worked" with her on this unit many, many times. Ms. Consumer's ability to perform basic work related functions such as concentrating on the task before her, completing said task in a timely manner and following simple instructions is significantly impaired. With consistent staff supervision and support, Ms. Consumer struggles with these limitations and occasionally perseveres. Frequent breaks are often needed to provide Ms. Consumer with respite from the obvious stress that she is experiencing. She cites the auditory hallucinations as the chief barrier to her performing these work related functions better. A headset radio provides some attenuation to these symptoms, but also aggravates a related area of poor functioning, social and interpersonal skills.

The tendency to isolate and ruminate with and about her voices is a significant barrier to Ms. Consumer's socialization and participation in activities here at Threshold. Ms. Consumer's use of the headset radio provides some relief from (interference with) the voices. It also adds to her isolation from others. Ms. Consumer is willing to not wear the headphones while engaged in unit activities, but immediately dons these when not so engaged. Ms. Consumer is easily distracted in conversation, making the successful beginning, middle and end of a conversation unlikely. To her credit, Ms. Consumer struggles with these issues and genuinely seeks to overcome them. With consistent staff support and guidance, these efforts are periodically rewarded.

Ms. Consumer has attempted to participate in Threshold's supported employment programs on 2 occasions since admissions. In both instances, stress and the symptoms of paranoia were aggravated and resulted in both jobs lasting only a day. Staff support, job coaching and other interventions were insufficient to overcome the stress and the resulting recurrence of symptoms.

Ms. Consumer receives her clinical care at the Durham County Mental Health Center. Information regarding this care may be obtained directly from them. I find that Ms. Consumer is vested in her treatment and rehabilitation and is largely adherent to it.

There is a process of coming to terms with the implications of a disabling illness and limitations imposed by it that is underway with Ms. Consumer.

I hold a Master of Science in Social Work degree from the University of Texas at Arlington and have over twenty years of experience in the treatment and rehabilitation of adults with serious mental illness. I am a licensed clinical social worker by the North Carolina Social Work Certification and Licensure Board and a Certified Psychiatric Rehabilitation Practitioner by the International Association of Psychosocial Rehabilitation Services. I provide the above pedigree information, as I understand that it is helpful in establishing the credibility of a medical exhibit.

I trust that the above information will be useful in evaluating Ms. Consumer's claim for disability benefits. I would be happy to provide additional information upon request. Best wishes.

Very truly yours,

Jonathan R. Beard, LCSW, CPRP
Executive Director