



Due to the security concerns raised by the Individual's alcohol consumption, the LSO referred the Individual for an evaluation by a DOE-contractor psychologist (DOE Psychologist), who conducted a clinical interview of the Individual in June 2025 and issued a report (the Report) of her findings. Ex. 8. Based on her evaluation of the Individual, the DOE Psychologist opined that the Individual met sufficient diagnostic criteria in the *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, Text Revision (DSM-5-TR)* for a diagnosis of Unspecified Alcohol-Related Disorder, without adequate evidence of rehabilitation or reformation. *Id.* at 52–53.

In August 2025, the LSO informed the Individual, in a Notification Letter, that it possessed reliable information that created substantial doubt regarding her eligibility to hold a security clearance. Ex. 1 at 6–8. In a Summary of Security Concerns (SSC) attached to the Notification Letter, the LSO explained that the derogatory information raised security concerns under Guideline G (Alcohol Consumption) of the Adjudicative Guidelines. *Id.* at 5.

The Individual requested an administrative hearing, and the LSO forwarded the Individual's request to the Office of Hearings and Appeals (OHA). Ex. 2. The Director of OHA appointed me as the Administrative Judge in this matter. At the hearing I convened pursuant to 10 C.F.R. § 710.25(d), (e), and (g), I took testimony from four witnesses: the Individual, the Individual's Personal Counselor, the Individual's Employee Assistance Program (EAP) Counselor, and the DOE Psychologist. *See* Transcript of Hearing, OHA Case No. PSH-25-0198 (Tr.). Counsel for the DOE submitted twelve exhibits, marked as Exhibits 1 through 12. The Individual submitted seven exhibits, marked as Exhibits A through G.

## **II. The Summary of Security Concerns**

Under Guideline G, “excessive alcohol consumption often leads to the exercise of questionable judgment or the failure to control impulses, and can raise questions about an individual's reliability and trustworthiness.” Adjudicative Guidelines at ¶ 21. Conditions that could raise a security concern under Guideline G include: “alcohol-related incidents at work, such as reporting for work or duty in an intoxicated or impaired condition, drinking on the job, or jeopardizing the welfare and safety of others . . . ,” “habitual or binge consumption of alcohol to the point of impaired judgment, regardless of whether the individual is diagnosed with alcohol use disorder,” and a “diagnosis by a duly qualified medical or mental health professional (e.g., physician, clinical psychologist, psychiatrist, or licensed clinical social worker) of alcohol use disorder.” *Id.* at ¶ 22(b)–(d).

In invoking Guideline G, the LSO cited the Individual's admission, in the March 2025 LOI, that in January 2025, her employer “expressed concerns that she smelled of alcohol,” and that from 2012 to January 2025, she would consume “up to four to six drinks of vodka or wine on Thursdays, Fridays and Saturdays.” Ex. 1 at 5. The LSO also cited the DOE Psychologist's opinion that the Individual met sufficient *DSM-5-TR* diagnostic criteria for a diagnosis of Unspecified Alcohol-Related Disorder, without evidence of rehabilitation or reformation. *Id.*

## **III. Regulatory Standards**

A DOE administrative review proceeding under Part 710 requires me, as the Administrative Judge, to issue a decision that reflects my comprehensive, common-sense judgment, made after consideration of all the relevant evidence, favorable and unfavorable, as to whether the granting

or continuation of a person's access authorization will not endanger the common defense and security and is clearly consistent with the national interest. 10 C.F.R. § 710.7(a). The regulatory standard implies that there is a presumption against granting or restoring a security clearance. *See Department of Navy v. Egan*, 484 U.S. 518, 531 (1988) (“clearly consistent with the national interest” standard for granting security clearances indicates “that security determinations should err, if they must, on the side of denials”); *Dorfmont v. Brown*, 913 F.2d 1399, 1403 (9th Cir. 1990) (strong presumption against the issuance of a security clearance).

The individual must come forward at the hearing with evidence to convince the DOE that granting or restoring access authorization “will not endanger the common defense and security and will be clearly consistent with the national interest.” 10 C.F.R. § 710.27(d). The individual is afforded a full opportunity to present evidence supporting their eligibility for an access authorization. The Part 710 regulations are drafted so as to permit the introduction of a very broad range of evidence at personnel security hearings. Even appropriate hearsay evidence may be admitted. *Id.* § 710.26(h). Hence, an individual is afforded the utmost latitude in the presentation of evidence to mitigate the security concerns at issue.

#### **IV. Findings of Fact and Hearing Testimony**

In October 2024, the Individual's employer received reports that the Individual smelled of alcohol in the workplace and referred her for Phosphatidylethanol (PEth)<sup>3</sup> testing. Ex. 8 at 43. The result of the Individual's PEth test was positive at a level of 529 ng/mL, which indicated “excess alcohol consumption.” *Id.* at 43–44, 72–73. Based on the Individual's October 2024 PEth test result, the Individual's employer placed her in their Fitness for Duty (FFD) program, which “evaluates an employee's ability to work safely and reliably due to medical, behavioral health, or substance use concern[s].” Ex. E; Ex. 8 at 43. As part of her employer's FFD program, the Individual was required to undergo alcohol testing, weekly. Ex. 8 at 44; Tr. at 68. The Individual was also required to meet with a therapist (FFD Therapist), who encouraged her to obtain alcohol treatment. Ex. 8 at 44. The Individual successfully completed her employer's FFD program on December 3, 2025. Ex. C; Ex. E.; Tr. at 69.

During her June 2025 psychological evaluation, the Individual told the DOE Psychologist that as of October 2024, she typically consumed one and a half bottles of wine and “two mixed drinks” per night, on Thursday, Friday, and Saturday evenings. Ex. 8 at 45. She reported that she last consumed alcohol on January 13, 2025, when she drank a full bottle of wine. *Id.* The Individual reported that since January 2025, she was participating in alcohol classes provided by her employer's EAP, and that she was seeing her Personal Counselor. *Id.* at 46. As part of the evaluation, the DOE Psychologist had a telephone consultation with the Individual's FFD Therapist, who told the DOE Psychologist that the Individual had accepted responsibility for her actions, and had gained significant insight into her alcohol use through her participation in the alcohol classes via her employer's EAP. *Id.* at 44.

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<sup>3</sup> The DOE Psychologist's Report indicates that PEth “detects any significant alcohol use over the past three to four weeks.” Ex. 8 at 51. “PEth levels in excess of 20 ng/mL are considered evidence of moderate to heavy [alcohol] consumption.” *Id.* at 69.

As part of the psychological evaluation, on June 6, 2025, the Individual underwent PEth testing, the result of which was negative. Ex. 8 at 51, 68–69. The Report also indicates that as part of her employer’s FFD Program, the Individual underwent Ethyl Glucuronide (EtG)<sup>4</sup> and PEth testing, the results of which supported that she had abstained from alcohol since April 2025. *Id.* at 44.<sup>5</sup> The DOE Psychologist opined that although the Individual appeared to be abstaining from alcohol, her previous level of alcohol consumption, in October 2024, was high, led to workplace intervention, and led to the initiation of clinical monitoring by her employer. *Id.* Therefore, the DOE Psychologist diagnosed the Individual with Unspecified Alcohol-Related Disorder. *Id.* at 52. Although the Individual was receiving alcohol treatment and had demonstrated abstinence from alcohol since April 2025, the DOE Psychologist opined that she was still “early in her recovery” and that she had not achieved rehabilitation or reformation from her Unspecified Alcohol-Related Disorder. *Id.* To show adequate evidence of rehabilitation or reformation from her Unspecified Alcohol-Related Disorder, the DOE Psychologist recommended that the Individual abstain from alcohol for one year, supported by monthly PEth testing, complete the 12-week substance abuse class provided by her employer’s EAP, and attend either Alcoholics Anonymous (AA), another evidence-based peer support group, or continue to participate in her employer’s EAP alcohol classes. *Id.* at 53.

In January 2025, the Individual took a six-week alcohol education class, provided by her employer’s EAP. Tr. at 29. The EAP Counselor testified that she is a facilitator for the six-week alcohol education class. *Id.* at 46. Each class meets weekly, for one hour. *Id.* at 43. The EAP Counselor explained that the six-week class educates its participants on the amount of alcohol in a standard drink, a medical provider informs the class about alcohol’s effects on the body, and a psychologist provides information about alcohol testing. *Id.* at 51. She explained that the Individual was an active participant in the class and attended the class weekly. *Id.* at 48–49. The Individual explained that while attending this class, she realized that she had a drinking problem. *Id.* at 29. The Individual testified that during this class, she realized that she did not know what a “standard drink” was. *Id.* at 47–48. She also testified that she did not realize how many ounces of alcohol she consumed when she had previously consumed alcohol at home but estimated she was consuming anywhere from four to six ounces of alcohol at one time and that she had “an over-pouring problem.” *Id.* at 29, 31, 47–48, 58–59. The EAP Counselor testified that the Individual successfully completed the class. *Id.* at 46–47.<sup>6</sup>

After completing the six-week alcohol education class, on March 20, 2025, the Individual began a 12-week class focused on substance abuse provided by her employer’s EAP. Tr. at 51–52. The

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<sup>4</sup> EtG “is a metabolite of ethyl alcohol that is present in the urine for up to 80 hours after any alcohol beverage is consumed.” *Personnel Security Hearing*, OHA Case No. PSH-24-0154 at 6 (2024) (citing definition of EtG contained in the report of a DOE-consultant psychologist). A negative test “provides strong medical evidence that the subject was abstinent from alcohol during the three days prior to the sample collection.” *Id.*

<sup>5</sup> The Report indicates that, as part of the FFD Program, the Individual “underwent random EtG testing, with three positive results recorded between December 2024 and January 2025.” Ex. 8 at 44. A March 6, 2025, PEth test was positive at a level of 35 ng/mL, which indicated that the Individual “consumed alcohol sometime within the preceding two to three weeks.” *Id.* at 44, 52, 74–75. PEth tests taken on April 4, 2025, and May 13, 2025, were both negative. *Id.* at 44, 76

<sup>6</sup> The Individual submitted a Certificate of Completion for the six-week class, which indicated she successfully completed the class on February 27, 2025. Ex. A. at 1. However, the EAP Counselor’s records indicated that she completed the class on March 6, 2025. Tr. at 46; Ex. F.

EAP Counselor testified that she also serves as a facilitator for this class. *Id.* at 43. She explained that the 12-week class is designed as a support group, where the participants talk to each other about their experiences with alcohol and other substances, so they feel less isolated. *Id.* at 52. This class requires that its participants abstain from alcohol, but it does not conduct alcohol testing and relies on the participants to self-report that they are not consuming alcohol. *Id.* The EAP Counselor explained that the Individual was an active participant in this class, she was engaged, she shared her history with alcohol, and she interacted with other participants. *Id.* at 53. The Individual testified that the camaraderie of this class raised her self-esteem and made her realize that she is a strong person. *Id.* at 65. The Individual completed this class on August 28, 2025, and submitted a certificate of completion. *Id.* at 52; Ex. A at 2. The Individual also submitted a letter from the EAP Counselor, which corroborated her testimony, as to the Individual's completion of the six-week and 12-week alcohol classes and that she was an active participant in both classes. Ex. F.

After completing the 12-week substance abuse class, the Individual continued to attend the group sessions. Tr. at 31. The EAP Counselor also testified that as of January 22, 2026, the Individual had attended her 19<sup>th</sup> group session. *Id.* at 54. The Individual testified that the group meetings help her with her anxiety because she gets to talk to people and the other group members listen to her stories. *Id.* at 31.

Since March 2025, the Individual has attended 24, 30-minute, therapy sessions with her Personal Counselor. Tr. at 12. At the hearing, the Individual's Personal Counselor testified that the Individual's treatment plan included developing awareness of her triggers to drink, and the Individual admitted that she drank due to boredom and being alone. *Id.* at 14–15, 24, 38–39. The Individual also learned coping strategies to avoid drinking in the future, and developed communication skills so she can be assertive in resisting offers to drink alcohol. *Id.* at 14–15, 24. The Personal Counselor also testified to teaching the Individual about “distress tolerance, emotional regulation, and interpersonal skills,” which raised the Individual's self-esteem and helped her set boundaries with others. *Id.* at 20. He stated that the Individual did “an excellent job” adhering to the treatment plan, including using the tools she has learned to avoid relapsing. *Id.* at 16. He explained that the Individual recently lost her pet and had used the material he gave her on how to cope with difficult situations by seeking support from family and friends without consuming alcohol. *Id.* at 17, 19. He stated that the Individual was committed to remaining abstinent from alcohol. *Id.* at 18–19. As of the hearing, he was meeting with the Individual once a month. *Id.* at 16. Their last session was approximately four weeks before the hearing. *Id.* He believed the Individual was very “strong” in this stage of her alcohol recovery, and that she knows that her goals do not involve the use of alcohol. *Id.* at 21–22. The Individual also testified that these sessions helped her successfully set boundaries with people who previously encouraged her to drink. *Id.* at 17–18. The Individual's Personal Counselor also submitted a letter, which corroborated his testimony as to the details of his therapy sessions with the Individual, and indicated that she is making good progress. Ex. D.

Since March 2025, the Individual has seen a psychiatrist. Tr. at 67. At the hearing, the Individual testified that she initially saw her psychiatrist weekly, but as of the hearing, she was seeing the psychiatrist monthly. *Id.* at 68. She explained that these sessions initially focused on her alcohol consumption, but more recently, the sessions have focused on her personal development, and how she can maintain her sobriety by managing her anxiety. *Id.*

At the hearing, the Individual testified that she takes pride in being a clearance holder, that her job is the most important thing in her life, and that she is committed to proving that she can stop drinking alcohol. Tr. at 29. She submitted documentary evidence, to support her testimony concerning her abstinence from alcohol. *Id.* at 70–72. From April 2025 to February 2026, the Individual took 12 PEth tests,<sup>7</sup> the results of which were negative. Ex. 8 at 44, 68; Ex. B at 1–12; Ex. H. She also explained that she reserves time to talk to members of her support system: her family and close friends. Tr. at 72.<sup>8</sup> She also follows the recommendation of her Personal Counselor and goes out to meet people more often. *Id.* at 73. She explained that since she has stopped drinking alcohol, she has lost 55 pounds, she is more outgoing, and she participates in more craft activities. *Id.* at 39, 73. She also stated that she can shop at grocery stores, which sell alcohol, and go out to dinner with her friends and family, without purchasing and drinking alcohol. *Id.* at 37.

The DOE Psychologist testified that after listening to the testimony provided during the hearing and reviewing the Individual’s exhibits, the Individual had shown adequate evidence of rehabilitation from her Unspecified Alcohol-Related Disorder. Tr. at 86–87. She explained that the Individual received professional alcohol treatment, including individual treatment sessions with both her Personal Counselor and her psychiatrist. *Id.* at 87. She also stated that the alcohol classes provided by the Individual’s employer’s EAP were sufficiently like AA and other alcohol support group programs so as to satisfy her recommendation. *Id.* The DOE Psychologist concluded that the testimony provided during the hearing showed that the Individual learned about her triggers to drink alcohol and how to maintain behavioral changes to avoid drinking alcohol in the future. *Id.* Furthermore, the DOE Psychologist explained that the Individual’s PEth test results, from April 2025 to February 2026, demonstrated that she had abstained from alcohol for eleven months. *Id.* at 89. Although the Individual was one month shy of the 12 months of abstinence the DOE Psychologist recommended, the DOE Psychologist explained that she did not need to see an additional month of abstinence, and she felt confident in opining that the Individual was successfully rehabilitated from her Unspecified Alcohol-Related Disorder. *Id.* at 89–90.

Finally, as for a prognosis, the DOE Psychologist opined that the Individual’s prognosis was excellent because she followed her treatment recommendations, she showed an ongoing commitment to alcohol treatment by continuing to attend her EAP classes, she continued to see her psychiatrist, and she maintained contact with her support group, which consisted of her friends and family. *Id.* at 91. She explained that the Individual is at a low risk of relapse because the death of her pet was a “significant emotional event,” and she was able to cope with that event without drinking alcohol. *Id.* at 92.

## V. Analysis

The Adjudicative Guidelines provide that conditions that could mitigate security concerns under Guideline G include:

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<sup>7</sup> The Individual underwent PEth testing on April 4, 2025, May 8, 2025, June 7, 2025, June 12, 2025, July 9, 2025, August 19, 2025, September 10, 2025, October 15, 2025, November 14, 2025, December 1, 2025, January 2, 2026, and February 3, 2026. Ex. 8 at 44, 68; Ex. B at 1–12; Ex. H.

<sup>8</sup> The Individual submitted a letter from a co-worker, who wrote that she has known the Individual since 2014, and that when they socialize outside of work, the Individual does not drink alcohol. Ex. G.

- (a) So much time has passed, or the behavior was so infrequent, or it happened under such unusual circumstances that it is unlikely to recur or does not cast doubt on the individual's current reliability, trustworthiness, or judgment;
- (b) The individual acknowledges his or her pattern of maladaptive alcohol use, provides evidence of actions taken to overcome this problem, and has demonstrated a clear and established pattern of modified consumption or abstinence in accordance with treatment recommendations;
- (c) The individual is participating in counseling or a treatment program, has no previous history of treatment and relapse, and is making satisfactory progress in a treatment program; and
- (d) The individual has successfully completed a treatment program along with any required aftercare, and has demonstrated a clear and established pattern of modified consumption or abstinence in accordance with treatment recommendations.

Adjudicative Guidelines at ¶ 23.

Based on the evidence before me, I find that the Individual has mitigated the security concerns related to her alcohol consumption under ¶ 23(b) and ¶ 23(d) of the Adjudicative Guidelines. The DOE Psychologist's Report indicates that during her participation in the FFD Program, the FFD Therapist found that the Individual accepted responsibility for her excessive alcohol consumption. The Individual admitted that as of October 2024, she was consuming one and a half bottles of wine, and two mixed drinks, per night, on Thursdays, Fridays, and Saturdays. She also admitted that while participating in the six-week alcohol education class, she realized how much alcohol she was consuming and that she had a drinking problem. Therefore, I find that the Individual has acknowledged that her maladaptive alcohol use was a problem.

After meeting with the FFD Therapist, the Individual spent 12 months taking actions to overcome her problematic alcohol consumption. Between January 2025 and August 2025, the Individual successfully completed two alcohol education classes provided by her employer's EAP. The EAP Counselor testified to the Individual's active participation during both classes, and stated that the classes focus on both triggers to drink and the standard amount of alcohol in a drink. Since March 2025, the Individual has seen her Personal Counselor, who testified that the Individual did an excellent job adhering to her treatment plan and using the tools she learned to avoid consuming alcohol. Her Personal Counselor also found that the Individual's ability to cope with the death of her pet, without consuming alcohol, supports that she was very strong during this stage in her alcohol recovery and demonstrates her commitment to using the tools she learned during her sessions to abstain from alcohol. The Individual also testified that she meets with a psychiatrist monthly, and that the sessions focused on her alcohol consumption and how to maintain her abstinence by managing her anxiety.

The Individual submitted 12 negative PEth tests, dated from April 2025 to February 2026, which demonstrates a clear and established pattern of abstinence from alcohol for approximately eleven months. After reviewing the Individual's evidence and the testimony provided during the hearing, the DOE Psychologist opined that, although she recommended that the Individual abstain from alcohol for 12 months, she did not need to see evidence of an additional month of abstinence to

have confidence that the Individual was successfully rehabilitated from her Unspecified Alcohol-Related Disorder. Finally, the DOE Psychologist testified that because the Individual continued to participate in the EAP group class, continued to see her psychiatrist, and testified to using her friends and family as a support network, she had an excellent prognosis for her continued recovery.

I conclude that the Individual has acknowledged her pattern of maladaptive alcohol use, has provided sufficient evidence she successfully completed the treatment program recommended by the DOE Psychologist, and has demonstrated a clear and established pattern of abstinence sufficient to mitigate the stated Guideline G concerns. Adjudicative Guidelines at ¶ 23(b), (d).

## **VI. Conclusion**

For the reasons set forth above, I conclude that the LSO properly invoked Guideline G of the Adjudicative Guidelines. After considering all the evidence, both favorable and unfavorable, in a comprehensive, common-sense manner, including weighing all the testimony and other evidence presented at the hearing, I find that the Individual has brought forth sufficient evidence to resolve the concerns set forth in the SSC. Accordingly, the Individual has demonstrated that restoring her security clearance would not endanger the common defense and security and would be clearly consistent with the national interest. Therefore, I find that the Individual's access authorization should be restored. This Decision may be appealed in accordance with the procedures set forth at 10 C.F.R. § 710.28.

Diane L. Miles  
Administrative Judge  
Office of Hearings and Appeals