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**United States Department of Energy  
Office of Hearings and Appeals**

In the Matter of: Personnel Security Hearing )  
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Filing Date: May 4, 2026 )  
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Case No.: PSH-26-0110

Issued: September 30, 2026

**Administrative Judge Decision**

James P. Thompson III, Administrative Judge:

This Decision concerns the eligibility of XXXXXXXXXXXXXXXX (the Individual) to hold an access authorization under the United States Department of Energy's (DOE) regulations, set forth at 10 C.F.R. Part 710, "Procedures for Determining Eligibility for Access to Classified Matter and Special Nuclear Material or Eligibility to Hold a Sensitive Position."<sup>1</sup> As discussed below, after carefully considering the record before me in light of the relevant regulations and the *National Security Adjudicative Guidelines for Determining Eligibility for Access to Classified Information or Eligibility to Hold a Sensitive Position* (June 8, 2017) (Adjudicative Guidelines), I conclude that the Individual's access authorization should be restored.

**I. BACKGROUND**

The Individual is employed by a DOE contractor in a position that requires a security clearance. The DOE Local Security Office (LSO) learned that in October 2025 the Individual was arrested and charged with Driving Under the Influence of Intoxicating Liquor or Drug (DUI), Reckless Driving, Open Container (two counts), and several related traffic offenses. Exhibit (Ex.) 6 at 28, 31.<sup>2</sup> As a result, the LSO requested a DOE-consultant psychologist (DOE Psychologist) to evaluate the Individual. Ex. 10. Based on the information gathered by the LSO, including a February 2026 report produced by the DOE Psychologist (Report), the LSO informed the Individual by letter (Notification Letter) that it possessed reliable information that created substantial doubt regarding his eligibility to possess a security clearance. Ex. 1. In an attachment to the Notification Letter,

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<sup>1</sup> The regulations define access authorization as "an administrative determination that an individual is eligible for access to classified matter or is eligible for access to, or control over, special nuclear material." 10 C.F.R. § 710.5(a). This Decision will refer to such authorization as access authorization or security clearance.

<sup>2</sup> Because the LSO's exhibits and the Individual's exhibits in this case are both numbered, I will refer to the former as "Ex." and the latter as "Ind.'s Ex." References to the LSO exhibits are to the exhibit number and the Bates number located in the top right corner of each exhibit page.

entitled Summary of Security Concerns (SSC), the LSO explained that the derogatory information raised security concerns under Guideline G of the Adjudicative Guidelines. *Id.* at 5.

The Individual exercised his right to request an administrative review hearing pursuant to 10 C.F.R. Part 710. The Director of the Office of Hearings and Appeals appointed me as the Administrative Judge in this matter, and I subsequently conducted an administrative review hearing on August 31, 2026. At the hearing, the Individual provided his own testimony and the testimony of two witnesses: his employer's Fitness for Duty<sup>3</sup> psychologist (FFD Psychologist) and his former romantic partner from whom he is now separated but maintains a co-parenting relationship (Partner). Transcript of Hearing, OHA Case No. PSH-26-0110 (Tr.). The LSO presented the testimony of the DOE Psychologist. *Id.* The Individual submitted eleven exhibits, marked Individual's Exhibits 1 through 11.<sup>4</sup> The LSO submitted thirteen exhibits, marked Exhibits 1 through 13.

## II. THE NOTIFICATION LETTER AND THE ASSOCIATED SECURITY CONCERNS

As indicated, the LSO cited Guideline G (Alcohol Consumption) of the Adjudicative Guidelines as the basis for concern regarding the Individual's eligibility for a security clearance. Ex. 1.

Guideline G provides that "[e]xcessive 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. The SSC first cited that the DOE Psychologist concluded in the February 2026 Report that the Individual met sufficient criteria under the *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, Text Revision*, (DSM-5-TR) for a diagnosis of Alcohol Use Disorder (AUD), Severe, in Early Remission, without adequate evidence of rehabilitation or reformation. Ex. 1. The SSC also cited the October 24, 2025, DUI and related charges of Reckless Driving, Open Container (two counts), No Proof of Registration, No Proof of Insurance, and Speeding. *Id.* Finally, the SSC cited two additional DUIs that occurred in 2004 and 2003, respectively. *Id.* The LSO's allegation that the Individual's alcohol-related incidents outside of work and diagnosis by a duly qualified mental health professional of AUD demonstrates excessive alcohol consumption justifies the LSO's invocation of Guideline G. Adjudicative Guidelines at ¶ 22(a), (d).

## 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 of 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

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<sup>3</sup> As described by the FFD Psychologist, "anyone who's arrested . . . goes into [FFD], which is designed to help them complete, get back on track after the arrest. It's also there to monitor . . . safety and security concerns . . . [I]t's our job to look at those concerns and help mitigate them wherever we can through treatment and recommendations[.]" Tr. at 16.

<sup>4</sup> The Individual's exhibits, except Individual's Exhibit 11, were provided in a single .pdf exhibit workbook. They will be referenced by the exhibit letter and page number within the combined workbook. Individual's Exhibit 11 was submitted as a standalone .pdf and will be referenced by the page numbers therein.

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 his or her eligibility for an access authorization. The Part 710 regulations are drafted 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.

The discussion below reflects my application of these factors to the testimony and exhibits presented by both sides in this case.

#### IV. FINDINGS OF FACT

In 2003, the Individual was arrested for DUI along with his cousin. Ex. 13 at 176. They had both been consuming alcohol, his cousin drove them to a store to obtain more alcohol, and they were stopped by tribal police. *Id.* at 176–77. Tribal police arrested both the Individual and his cousin because, according to the Individual, tribal law allowed an adult passenger riding in a vehicle to be charged with DUI if that passenger permits the driver to operate the vehicle while the driver is under the influence of alcohol. *Id.* at 177; Ex. 2 at 13. The Individual pled guilty to DUI, was sentenced to one week in jail, and successfully completed six months of probation. Ex. 13 at 176–77. Then, in 2004, the Individual was again charged with DUI after he consumed six beers and decided to drive home. *Id.* at 176. He pled guilty to DUI and successfully served six months of probation. *Id.*

After more than twenty years, in October 2025, the Individual was again arrested and charged with DUI. Ex. 6. According to the police report, the Individual was stopped for speeding. *Id.* at 30. The officer immediately detected the odor of alcohol and observed the Individual exhibiting slurred speech and difficulty keeping his balance. *Id.* After attempting to administer field sobriety tests, the officer determined that the Individual was impaired and transported the Individual to the police department to administer a breath alcohol test, which resulted in a blood alcohol content result of 0.18. *Id.*; *see also* Tr. at 65 (Individual testifying that he had been consuming alcohol the entire day, took a nap, and then decided to drive to a casino); Ex. 7 at 35 (Individual’s written statement that he consumed nine alcohol beverages over the approximately four hours prior to his arrest).

During the February 2026 evaluation with the DOE Psychologist, the Individual described his history of alcohol use and the events that led to his 2025 DUI. Ex. 10 at 74. He reported that he had had periods of abstinence between 2010 and 2024, the longest of which lasted approximately six years. *Id.* at 76. In 2024, he began consuming alcohol again. *Id.* In early 2025, the Individual was enrolled in the Human Reliability Program (HRP) and therefore underwent a mandatory

psychological evaluation. *Id.* During the HRP evaluation, he reported consuming “excessive” amounts of alcohol over the 2024 holiday season, which was verified by a Phosphatidylethanol (PEth) test administered as part of the HRP evaluation to determine his recent alcohol consumption. *Id.*<sup>5</sup> As a result, the FFD Psychologist recommended that the Individual complete his employer’s six-week alcohol education and awareness course and meet periodically with an HRP Psychologist. *Id.* at 76; Tr. at 11. The Individual completed those FFD requirements in April 2025. Tr. at 13. However, the Individual reported that shortly thereafter he was drinking to intoxication every weekend to deal with his relationship issues, the death of a close family member, and the death of a friend. Ex. 10 at 76–77 (disclosing that he and his Partner had often argued about his excessive alcohol consumption); *see also* Tr. at 53–54. This pattern of alcohol consumption continued until his 2025 DUI, which resulted in his reentry into the FFD program. Ex. 10 at 76–77.

The Individual reported that during his recent FFD, he underwent monthly PEth testing, which started in December 2025. *Id.* at 77. He was also required to attend intensive outpatient treatment (IOP) for twelve weeks, couples counseling, and individual therapy through a substance abuse program. Ex. 7 at 36. He began participating in the IOP in December 2025. *Id.*; Ind.’s Ex. 10 at 56 (IOP Certificate of Completion). He completed the IOP in March 2026. Ind.’s Ex. 10 at 56. In addition to the IOP, he attended counseling for six weeks through his employer’s Employee Assistance Program (EAP) before transferring to an outside agency to continue receiving counseling. Ex. 10 at 77. He acknowledged that his alcohol consumption had increased when he experienced stress related to grieving the loss of his family members and friends, and he credited the IOP and counseling with helping him develop coping skills for his grief and relationship issues. *Id.*; *see also* Ind.’s Ex. 6 at 13–15 (letter from his counselor dated July 10, 2026, describing his continuing treatment as covering, *e.g.*, relapse prevention, cognitive-behavioral interventions, and “[a]cceptance-based strategies to process grief and relationship loss”). The DOE Psychologist requested that the Individual undergo a PEth test during the evaluation; the result was negative, and the DOE Psychologist therefore interpreted it, along with the results from the FFD testing, as being consistent with the Individual’s assertion that he had been abstinent since his October 24, 2025, arrest for DUI. *Id.* at 78.

As a result of the evaluation, the DOE Psychologist concluded that the Individual met sufficient criteria for a diagnosis of AUD, Severe, based on his history of alcohol-related arrests, repeated alcohol-related conflict in his relationship, multiple unsuccessful attempts to reduce or eliminate alcohol consumption, and removal from HRP due to excessive alcohol use. *Id.* at 79. The DOE Psychologist recommended that the Individual could demonstrate rehabilitation or reformation of the AUD if he were to abstain from alcohol for at least one year, complete IOP aftercare and thereafter attend Alcoholics Anonymous or a similar program twice a week with a sponsor, and continue undergoing monthly PEth testing for a total treatment period of one year. *Id.* at 80.

During the hearing, the FFD Psychologist testified that she conducted the assessment of the Individual back in October 2025, met with him monthly throughout his participation in FFD, and recommended the IOP and individual therapy he had participated in. Tr. at 16, 19. She explained that the IOP includes individual treatment and group classes and teaches relapse prevention and

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<sup>5</sup> According to the laboratory test report, “PEth levels in excess of 20 ng/mL are considered evidence of moderate to heavy ethanol consumption.” Ex. 10 at 91. The Individual provided a PEth test result of 551 ng/mL, significantly over the 200 ng/mL threshold for being disqualified from the HRP. Tr. at 12.

refusal skills after assessing the participant's substance use, in detail, to determine "triggers and how [to] address them." *Id.* at 18. The Individual's monthly PEth testing while enrolled in FFD concluded in April 2026, but his last FFD-administered test occurred in late June 2026. *Id.* at 19 (testimony from FFD Psychologist that the June 2026 test was provided because she "knew [the Individual] was coming up on his DOE hearing"); Ex. 8 at 17–47 (PEth test results indicating that monthly testing was administered in December 2025 and January, February, March, April, and June 2026). All test results were negative. Ex. 8. The FFD Psychologist testified that the Individual had done very well in the program. Tr. at 19–20. She opined that the Individual demonstrated that he had learned a lot from the IOP, that he had completed approximately eight or more months of "intensive treatment," and she viewed favorably the fact that he had continued on to aftercare and then joined his employer's group-based EAP class<sup>6</sup> to continue to "work on his sobriety with support[.]" *Id.* at 22, 24. She testified that he had therefore completed the FFD recommended treatment program and aftercare for his alcohol use. *Id.* at 27.

The Individual's Partner testified that since undergoing treatment the Individual had become more involved in his children's lives, and his relationship with them had improved. *Id.* at 31 (also testifying that the Individual no longer leaves for days at a time and is willing to address issues that arise rather than "shut down" or avoid them). She testified that the Individual had explained that his past alcohol use was the result of childhood trauma and unresolved family issues, and that he is addressing these issues in counseling. *Id.* at 36. She also testified that she had not observed the Individual consume alcohol since his October 2025 arrest date. *Id.* at 32. She testified that they had discussed his future intentions regarding alcohol, and the Individual stated that he intended to remain sober and continue counseling. *Id.* at 35.

The Individual testified that at the time he reported his excessive consumption during the HRP evaluation, he was dealing with a lot of stress related to loss and grief regarding friends and family. *Id.* at 58–59 (describing his consumption as more than twelve beers every weekend). He testified that although he completed the initial six-week EAP course, it did not make a significant impact on him, and he resumed drinking alcohol after it ended. *Id.* at 62. He testified that he had abstained from alcohol since his DUI arrest. *Id.* at 69, 89. He testified that he intended to remain sober for the rest of his life and that he recognizes how alcohol caused him a lot of trauma and problems. *Id.* at 71. He explained that he is more resilient because he can depend on his Partner and treatment providers, like the IOP and EAP counselors, and he is not afraid to ask for help. *Id.* at 75, 85. For example, he testified that he would reach out to his Partner if he experienced triggering emotions. *Id.* at 83. He testified that he intends to continue with the post-aftercare EAP courses and to receive monthly individual counseling to support his sobriety. *See, e.g., id.* at 77, 86.

The DOE Psychologist testified after considering the hearing testimony and exhibits in the record. *Id.* at 90. He opined that the Individual had made positive progress in his treatment and complied with treatment recommendations crafted to provide coping skills and relapse prevention. *Id.* The DOE Psychologist also viewed favorably the testimony of the FFD Psychologist regarding the Individual's successful progress in treatment. *Id.* at 91. The DOE Psychologist testified that while the Individual's previous periods of abstinence were unsuccessful, he had not yet had the benefit of alcohol use treatment. *Id.* at 90–91 (distinguishing the present treatment from the alcohol

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<sup>6</sup> The FFD Psychologist testified that this group-based program is something employees can continue to participate in indefinitely to support their recovery. Tr. at 24.

education the Individual had previously received). The DOE Psychologist also noted that while the Individual had not yet undergone the recommended twelve PEth tests, any concern derived therefrom is mitigated by the evidence of the Individual's significant progress in treatment and his support system. *Id.* at 94. Consequently, the DOE Psychologist opined that the Individual had demonstrated reformation and rehabilitation of the AUD, and he gave the Individual's condition a good prognosis. *Id.* at 91, 96.

## V. ANALYSIS

### A. Guideline G Considerations

Conditions that can mitigate security concerns based on alcohol consumption include the following:

- (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.

I conclude that ¶ 23(b) and ¶ 23(c) apply to resolve the Guideline G security concerns. Given that my conclusion is based on much of the same evidence and reasoning under both conditions, I will analyze the factors together. First, the Individual unquestionably acknowledged his pattern of maladaptive alcohol use by testifying that his past alcohol use had negatively impacted his relationships and career. While he entered treatment to overcome the problem because it was required by the FFD program, his realizations therein regarding his triggers for his alcohol consumption, coupled with his progress during treatment, establish that his acknowledgement is sincere. He also provided significant evidence of the actions he has taken to overcome the problem. He enrolled in and completed the recommended twelve-week IOP, he enrolled in and continues to receive monthly individual counseling targeted at supporting relapse prevention, he enrolled in and completed the recommended IOP aftercare, and he enrolled in and continues to participate in his employer's EAP relapse prevention program—the latter which he plans to attend indefinitely. He also provided corroborating evidence to establish that he has been abstinent for ten months. In addition to the testimony of his Partner that he has remained abstinent since October 2025, he

provided monthly PEth test results that cover December 2025 through June 2026, with the exception of May. While the Individual did not obtain a May PEth test because he had completed the FFD program, and therefore they were no longer being administered as a matter of course, he underwent a June 2026 PEth test requested by the FFD Psychologist that, like the others, was negative and therefore corroborated his testimony that he has continued to remain sober. And while he did not undergo testing in July and August 2026, I rely upon the Individual's continued participation in counseling and his employer's EAP group-based program throughout the same period, along with his demonstrated progress in treatment thus far, to credit his testimony that he continued to remain abstinent to the hearing date. The DOE Psychologist concluded the same in giving the Individual a positive prognosis and offering the opinion that he had rehabilitated and reformed from the AUD diagnosis, notwithstanding that he had not demonstrated a full twelve months of abstinence. And the FFD Psychologist essentially concluded the same, opining that the Individual had successfully completed the treatment regimen recommended by FFD. I therefore find that the Individual has demonstrated a clear and established pattern of abstinence in accordance with treatment recommendations. Furthermore, I conclude that the Individual is making satisfactory progress in his treatment. While he certainly has relapsed in the past after receiving alcohol education, I agree with the DOE Psychologist's opinion that education is not treatment and the Individual therefore does not have a history of relapse after treatment. Given the above, I conclude that the Individual has resolved the Guideline G concerns.

## **VI. CONCLUSION**

In the above analysis, I found that there was sufficient derogatory information in the possession of the DOE that raised security concerns under Guideline G of the Adjudicative Guidelines. After considering all of the relevant information, favorable and unfavorable, in a comprehensive, common-sense manner, including weighing all of the testimony and other evidence presented at the hearing, I find that the Individual has brought forth sufficient evidence to resolve the security concerns. Accordingly, I have determined 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.

James P. Thompson III  
Administrative Judge  
Office of Hearings and Appeals