

M1 Basic MAB:

PE: Kathy's Breaking Point...

Situation:

 Our typist clerk Kathy has been struggling with completing her daily tasks at work. She is seen taking lots of breaks, staring into space, and picking her fingernails. When her supervisor asked about the status of the tasks assigned, the Kathy became enraged and yelled at her supervisor, saying I will get it done. Kathy was often observed mumbling to herself and some of her co-workers have overhead her calling her supervisor a stupid B*tch (under her breath) and making threatening statements (under her breath). All of her co-workers are afraid to talk to her, for fear that she will turn her anger on them.



After consulting with HR and County Counsel, the supervisor feels justified in requesting a drug screen and/or fitness for duty evaluation. On a Friday afternoon (thinking that would give the Kathy the weekend to process the bad news), the supervisor approached the Kathy's cubicle and said she needed to discuss something with her in private, and would she please come with her. Upon hearing this, the Kathy violently swept everything off her desk, keyboard, mouse, computer, and started ripping down papers and photos she had pinned up in her cubicle. After giving the clerk space and a few moments, the Kathy slumped into her chair and began to cry.



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Presenting Issues:

- Kathy has worked as a typist clerk in the department for over six years. Initially known
 for her precision and quiet demeanor, she rarely engaged socially but maintained a
 consistent workflow. Over the past few months, however, Kathy's behavior has shifted
 dramatically. She has become increasingly withdrawn, taking frequent breaks, staring
 into space, and engaging in repetitive self-soothing behaviors like picking her
 fingernails and mumbling to herself.
- Kathy's escalating behavior may be rooted in unaddressed mental health challenges, compounded by personal stressors that remain unknown to the team. Her isolation, emotional volatility, and verbal aggression suggest a possible breakdown in coping mechanisms. The lack of early intervention, combined with mounting workplace pressure, may have pushed Kathy into a state of psychological distress.
- Based on Kathy's observed behaviors—frequent breaks, staring into space, mumbling to herself, verbal aggression, and escalating outbursts—possible substance use is one of several concerns that may warrant further evaluation. While these signs alone do not confirm drug use, they align with patterns that could indicate impairment, especially when paired with emotional volatility and workplace disruption.

Presenting Issues:

- According to workplace safety guidelines, reasonable suspicion for drug or alcohol
 testing should be based on specific, contemporaneous, and articulable observations of
 behavior, appearance, speech, or odor. In Kathy's case, the supervisor's decision to
 request a drug screen and/or fitness-for-duty evaluation was supported by:
 - Observable behavioral changes (withdrawal, agitation, verbal threats)
 - Emotional instability (desk-sweeping incident, crying)
 - Co-worker fear and avoidance
 - Inappropriate verbalizations under stress
- However, it's important to note that mental health crises, trauma responses, or personal stressors can produce similar symptoms. Supervisors are not expected to diagnose or confirm substance use—they are responsible for documenting behavior and consulting HR or management before taking action.

