

**Intensive Treatment Program Description:  
The Lindner Center of HOPE in Mason, Ohio**  
November 2009

**1. When did you open your program?**

The OCD and Anxiety Disorder Program began when the Lindner Center of HOPE opened its doors in August of 2008. The program started as traditional outpatient treatment for OCD and other anxiety disorders, but then the offerings of intensive outpatient service and an adult residential program (through the Sibcy House) were developed.

**2. Please describe the staff that work at your program in terms of their backgrounds, credentials and experience.**

OCD/CBT Psychotherapists:

*Charles Brady, PhD, ABPP:* Dr. Brady is a clinical psychologist with 18 years of experience on the staff and faculty of the University of Cincinnati's Department of Psychiatry and has completed advanced training in the treatment of OCD and OCD spectrum disorders through the International OCD Foundation's (IOCDF) Behavior Therapy Training Institute.

*Jennifer G. Wells, M.S.W., L.I.S.W.:* Ms. Wells' expertise in Anxiety Disorders and OCD stems from her advanced training at the IOCDF's Behavioral Therapy Training Institute and experience treating hundreds of child, adolescent and adult OCD patients using CBT and ERP.

Psychiatrists and Clinical Nurse Specialists including:

*John Kennedy, MD., MHA.:* Lindner Center of HOPE, Chief Medical Officer; University of Cincinnati College of Medicine, Director of the Institute for Psychiatry and Law and Program Director of the Forensic Psychiatry Fellowship

*Stephen Edwards, MD:* Dr. Edwards is board certified in general psychiatry, child and adolescent psychiatry and board eligible in pediatrics. As Director, Adolescent Psychiatry at Lindner Center of HOPE he oversees the adolescent inpatient and outpatient programs.

Other Staff (Hospital clinical staff for all services):

- *Masters or Doctoral-level Therapists and Psychology interns* provide additional assistance with individual behavioral therapy practice and with group therapy sessions.
- *Primary Care Physicians* provide ongoing monitoring and care for non-psychiatric medical needs.
- *Social Work* staff offer assistance in coordinating a wide range of patient and family needs and concerns.
- *Registered Nurses, Licensed Practical Nurses and Mental Health Specialists* are on-site 24 hours per day to ensure an atmosphere of wellness promoting, safe, effective patient centered care.

- *Dietitian* provides as-needed nutritional evaluation, and ongoing individual nutrition education and meal planning.
- *Employment Specialist* is on-staff to provide assistance with career guidance, job attainment, and job coaching.
- *Spiritual Care Coordinator* is available to provide individual support and monitoring of spiritual needs.
- *Community Psychiatric Support Specialist* helps individuals who require additional assistance in learning the skills needed to live successfully in the community

**3. Is this program devoted entirely to treating individuals with OCD or will other OCD spectrum disorders or anxiety disorders also be addressed?**

The OCD and Anxiety Disorder program has been developed to help individuals learn how to take scientifically proven steps to free themselves from the grasp of numerous anxiety conditions including, obsessive compulsive disorder, panic disorder, social anxiety, generalized anxiety disorder, phobias and other disorders.

**4. Please describe the core treatment components of your program (e.g., use of medication, ERP, group therapy, etc.).**

The OCD and Anxiety Treatment Program utilizes an individually tailored treatment approach combining Cognitive Behavioral Therapy and medication treatment. Cognitive Behavioral Therapy with specific emphasis on Exposure and Response Prevention (ERP) is based on the scientifically proven principle that anxiety and distress (obsessions) can be overcome when someone confronts their fear or distress rather than avoiding it or neutralizing it with ritualistic behaviors (compulsions). The process of utilizing ERP is maximized through one-on-one guidance by expert therapists in a manner that the individual patient guides and controls.

**Adult Residential (Sibcy House):** The Lindner Center of HOPE's adult residential program through the Sibcy House is a 4 week treatment program for individuals seeking to recover from OCD or other severe anxiety disorders (e.g., Panic Disorder, Generalized anxiety Disorder, Phobias, etc...). Each resident will participate in 2-5 hours of daily ERP with daily monitoring of medication. Residents will complete 15-20 individual 90 minute sessions with the Center of HOPE's OCD/CBT psychotherapists. These sessions will be bolstered by an additional 2-4 hours of ERP with assistance from CBT trained Center of HOPE staff. In addition to ERP and medication treatment, residents will be able to participate in the Center of HOPE's offerings of the following:

- Off-site ERP practice
- Cognitive Therapy Groups
- Illness Management and Recovery Groups
- Mindfulness Training
- Yoga
- Spirituality/Wellness Groups
- Patient and family education
- Vocational Services

- Nutritional counseling

**Intensive Outpatient Program:** The adult intensive outpatient program allows for a higher dosing of ERP to help individuals who may require more direct guidance, direction and practice to reap the benefits of treatment. The patient would meet 3-5 times per week with a licensed clinician with expertise in treating OCD and anxiety disorders. These sessions would include the initial evaluation, individual psychotherapy, and family psychotherapy. The patient would meet 3-5 times per week with a psychology intern for extended exposure and response prevention sessions. The patient, if needed, has the opportunity for a medication evaluation with and LCOH MD or CNS to evaluate and adjust medication treatment. The MD or CNS may then follow-up weekly or bi-weekly as appropriate for optimal patient care.

**Traditional Outpatient Services:** The traditional outpatient services offers outpatient sessions with the Center's seasoned CBT therapists and medication consultation through the Center's physicians and clinical nurse specialists. Individual and family psychotherapy sessions are offered on a regular basis according to each patient's need. Patients learn the use of therapist assisted and self-directed ERP and inter-session exercises are developed to optimize the recovery process.

**5. Please describe the treatment planning process at your program.**

A thorough treatment plan is developed, in collaboration, with every patient at the Lindner Center of HOPE. With a model that views the patient as the head of their treatment team, each clinician contributing to the individual's treatment provides input into the treatment plan which is reviewed and signed by the patient. In addition to the Sibcy House treatment team that meets weekly, the LCOH OCD and anxiety treatment team meets weekly to enhance communication, review and plan care.

**6. If someone has a co-morbid condition, can he or she participate in your program? Will there be treatment for the co-morbid condition? If so, can you give an example?**

Individuals with co-morbid conditions are welcome. The Lindner Center of HOPE also provides specialized care for persons with eating disorders or co-occurring substance abuse disorders.

**7. Are parents, family members, friends, teachers, etc. included in the treatment? If yes, please describe how.**

The Lindner Center of HOPE prides itself in providing patient-centered and family-centered care. We encourage all of our patients to include family members in as much of their recovery as they will allow. Our staff is trained and experienced in helping family members learn how to assist their relative's management of their anxiety more effectively in a humane, caring and recovery-enhancing manner. Family members are welcome to participate in treatment planning, educational sessions, and therapy sessions. There may be times where a family member's presence may serve as an anxiety-fueling form of reassurance. When this occurs staff will help

the patient and families recognize this pattern and work towards a solution that enhances the patient's ability to master their anxiety.

Similarly, when patients consent, teachers, employers or other significant individuals are included in the treatment dialogue to enhance the individual's ability to apply the gains they make in the program to their natural day-to-day life.

We are also thrilled to serve as the host site for a monthly support group for parents of children, teens or young adults with OCD. This group is open to family members, regardless of whether their relative is receiving treatment at the center.

**8. How often do patients in the program meet with staff individually? How long are these individual sessions?**

*Traditional outpatient:*

Weekly or every other week meetings for 50 to 90 minutes.

*Intensive outpatient:*

- 3-5 times per week with a licensed clinician with expertise in treating OCD and anxiety disorders for 50-90 minutes per session.
- 3-5 times per week with a psychology intern for extended exposure and response prevention sessions 90 -120 minutes

*Residential (Sibcy House):*

- 15-20 individual 90 minute sessions with the CBT psychotherapists.
- 2-4 hours of ERP with assistance from CBT trained staff

**9. Is there a set time period for a patient's treatment in the program? What is the overall time commitment to the program (for example, attend daily for three weeks)? How much flexibility is there in extending someone's stay if needed?**

The intensive outpatient program is designed for a 4-6 week duration and the Sibcy residential program is designed as a 4 week program. Flexibility exists in both programs to extend the stay in treatment if the specific circumstances suggest that the patient will benefit as a result.

**10. Is there a homework or "self directed" component to the treatment?**

In all facets of the OCD and Anxiety Disorders Program at the Linder Center of HOPE, homework and self-directed exposure are seen as essential components of recovery from anxiety. In order to maximize the learning and freedom from anxiety, the individual benefits most from seeing themselves as mastering their anxiety in as independent fashion as possible. Homework is developed in collaboration with the patient to increase likelihood of success and enhanced self-worth that occurs through successful self-directed ERP.

**11. Please describe the relapse prevention strategies you use in your program.**

Individuals are instructed on how to observe for early warning signs of OCD and anxiety and are coached on techniques that can be used intermittently over time to reduce the chance for relapse. Each patient is encouraged to develop a Victory Log that chronicles their successes over the anxiety which they can refer to in the future for renewed confidence and to remind themselves of past successful strategies.

**12. What kind of follow-up do you do for those who complete your program? Will the members of your treatment team be in contact with or willing to consult with the individual's regular treatment provider(s)?**

Once the resident completes the residential or intensive outpatient program, a member of the individual's treatment team staff will contact each patient 3 times within the 6 months after treatment to help sustain continued successful recovery. In addition, a treatment summary and phone call to the individual's non-Center of HOPE mental health treatment provider will be offered to ensure continuity of care. Members of the resident's treatment team remain available for consultation calls with all aftercare providers.

**13. Do you offer a sliding fee scale or scholarships for those who cannot afford your program?**

Lindner Center of HOPE accepts all major insurance plans including Medicare. Unfortunately at this time we do not have scholarships available for this program and only a limited sliding fee scale for a certain portion of our programming. Discounts that are available are based on the patient/family income compared to Federal Poverty Guidelines. Patients are evaluated on a case by case basis and within the guidelines of the Lindner Center of HOPE charity care policy.

**14. Does your program only work with individuals who are local or are there arrangements for those who come from farther away (for example, lodging arrangements)?**

Patients who participate in the clinical and research programs at the Lindner Center of HOPE include local residents as well as those who have sought treatment from across the country and from other nations. For those patients who come from farther away, the Lindner Center of HOPE is located with easy access to the Cincinnati-Covington International Airport, and is located within a few minutes of several quality hotels where patients and/or families can stay.

**15. Please add any information you think would be helpful in describing the unique aspects of your program if this has not been covered in the questions above.**

The Lindner Center of HOPE is the newest, freestanding mental health treatment facility in North America and is built on an innovative, scientifically-based model that provides comprehensive mental health services. The Center itself is an award winning facility where patients, families and clinicians work together in a family-centered atmosphere. We have a distinguished and diverse clinical team that includes psychiatrists, psychologists, neuropsychologists, addictive disorder specialists, advanced practice nurses, dietitians, family

therapists, licensed independent social workers and licenses professional clinical counselors. We have internationally recognized experts in depression, bipolar disorder, suicide and neurocognition, and two of our psychiatrists are amount the top 10 most cited scientists publishing in psychiatry and psychology every year since 1996.

All patients who come to Lindner Center of HOPE benefit from the depth our clinical expertise, our research and the breadth of our services, technology and programming. As part of our comprehensive services, our OCD program is considered a specialty track, and our clinicians bring decades of experience and real hope to caring for our patients.