OCD and Related Disorders Clinic Profile



McLean OCD Institute for Children and Adolescents (OCDI Jr.)

Clinic/Program Director: Mark Picciotto, PhD

Founder and Senior Clinical Consultant: Lisa Coyne, PhD

Intake Coordinator: Mark Tucker, LICSW

Phone Number: (774) 419-1182 E-mail: ocdijr@partners.org

Website: www.mcleanhospital.org/programs/ocdi

23 Isaac Street Middleborough, MA 02346

Treatment Providers:

Lisa Coyne, PhD Alyssa Faro, PhD Evelyn Gould, PhD, BCBA-D, LABA Caitlin White, LICSW Peter Adams, MD Charles Moore, MD Tracy Mullare, MD

Payment Options:

Private Insurance Self-pay

Populations Served:

Adolescents Children

Treatment Strategies Offered:

Acceptance and Commitment Therapy (ACT)
Exposure and Response Prevention (ERP)
Family Therapy
Group Therapy
Habit Reversal
Prescribe Medication
Skills Training

Areas of Specialty (in addition to OCD in general):

Body Dysmorphic Disorder (BDD)

Hoarding Disorder
Perfectionism
Scrupulosity
Skin Picking
Tics/Tourettes
Trichotillomania
Autism Spectrum Disorders (ASD)
Violent/Sexual Obsessions

Summary of our services:

The OCD Institute for Children and Adolescents (OCDI Jr.) opened in 2015 as a state-of-the-art residential treatment program for children ages 10-17 with OCD and related disorders. As a McLean facility, we are closely affiliated with the renowned adult OCD Institute that opened in 1997. Our Founder and Senior Clinical Consultant, Lisa Coyne, PhD, has been providing evidence-based assessment and treatment for children and teens with OCD and anxiety for over fifteen years. Our Program Director, Mark Picciotto, PhD, is the Director of Adolescent Services at McLean Southeast, and has been leading residential treatment programming for nearly 30 years.

Treatment Planning Process

At OCDI Jr. we value a collaborative approach with children and families taking an active role as members of the treatment team. Upon admission, each child is assigned a behavior therapist and psychiatrist who are in regular consultation with one another and our broader clinical team. In addition, our staff includes a full-time psychiatric nurse, several licensed clinical social workers, and a large staff of highly trained exposure and response prevention coaches called community residence counselors. We also contract with a licensed teacher who liaises with each child's school and provides several hours of instructional time to all residents. Our twelve-bed facility allows children to live on the premise and receive intensive treatment in both individual and group settings. This program is ideal for children with moderate to severe OCD and comorbid conditions who may not have had access to evidence-based care for OCD, and who have had limited success with past treatment.

Core Treatment Components

OCDI Jr. utilizes evidence-based treatment, including exposure response prevention (ERP), acceptance and commitment therapy (ACT), Cognitive Behavior Therapy (CBT), and medication therapy.

Parents, Family Members, Friends, Teachers, etc. Involvement

Family members are identified as members of the child's treatment team and often collaborate with clinicians and staff. Collaboration also occurs with the child's school, as well as any other outside treatment providers. This is done to ensure a continuum of care across settings and provide the best possible treatment and discharge planning.

Treatment of Co-Morbid Disorders

OCDI Jr. treats individuals with OCD, anxiety, and body focused repetitive behavior (BFRB) disorders. Co-occurring disorders such as depression and high-functioning autism spectrum disorders are also treated alongside OCD symptoms.

Individual Therapy

Residents meet with a behavioral therapist as needed during the week for individual and exposure therapy. Behavior therapists also have regular meetings with parents in person or by phone or using an online video platform. Residents also meet with a psychiatrist I-2 times per week. Towards the end of a resident's stay, parents are invited to stay in the area to participate in observational and in vivo ERP coaching practice to facilitate generalization and maintenance of treatment gains. The treatment team collaborates with the family to ensure continuity of care by finding appropriate providers post-discharge.

Length of Stay

Our program evaluation data suggest that the average length of stay at OCDI Jr. is 58 days; duration of treatment, however, is flexible and depends on the severity of symptoms and the resident's willingness to engage in treatment. We encourage a partial hospitalization step-down to facilitate generalization post-residential care; this ranges from I-4 weeks.

"Census" (i.e., the maximum number of clients seen at any given time) We are a twelve-bed, co-ed facility.

School Facilities

Residents receive two hours of tutoring services a day from a licensed teacher. Instruction is individualized, as residents continue working on the same curriculum they receive at their home school. Our tutor works in close collaboration with each resident's school to make sure they are completing assigned work and not falling behind academically.