



# **Neurobehavioral Institute**

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## **Treatment Providers:**

Jonathan Hoffman, PhD, ABPP E. Katia Moritz, PhD, ABPP Jason Spielman, PsyD Wilfredo Rivera PsyD Danielle Blocker, PsyD Lissette Cortes, PsyD Michelle Bechor, PhD Michelle Stoyell- Conti, PsyD Denise Hardt Pires, CHMP, RBT, PhD (Brazil) Liz Machado, MS Jillian Armstrong, BA Yaneth Beltran, RD, LDN

## **Payment Options:**

Self-Pay Offer a Sliding Fee

# **Populations Served:**

Adults Adolescents Children

## **Treatment Strategies Offered:**

Acceptance and Commitment Therapy (ACT) Cognitive Behavioral Therapy (CBT) Exposure and Response Prevention (ERP) Family Therapy Group Therapy Habit Reversal **Skills Training** 

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

Body Dysmorphic Disorder (BDD) Perfectionism Scrupulosity Violent/Sexual Obsessions Hoarding Disorder PANDAS/PANS Skin Picking Tics/Tourettes Trichotillomania (hair pulling disorder)

#### Summary of our services:

We are able to provide a variety of Intensive Treatment Program (ITP) services in English, Spanish, or Portuguese, as well as comprehensive testing services.

NBI's Intensive Treatment Program (ITP) is staffed by highly experienced clinicians who are specifically trained in the treatment of OCD and Related Disorders for all age groups. The majority of direct intervention services are provided by doctoral level practitioners. Drs. Hoffman and Moritz are the Program Directors and have been treating OCD and Anxiety Spectrum Disorders for decades. NBI is an APPIC approved postdoctoral program site, providing advanced specialized training for psychologists in diagnosing and treating OCD and Related Disorders.

NBI's ITP for OCD and Anxiety Related Disorders is well-established and allows for both fullday and half-day options, with separate pediatric, teen, and adult tracks. NBI staff work together as a true clinical team from admission to discharge. ITP treatment plans are highly individualized, while maintaining fidelity to core CBT principles. The NBI clinical staff members are well experienced in providing services to individuals from diverse geographical locations and cultures, both local and international. NBI is recognized as an exempt Health Care Clinic by the State of Florida and patients have had success with insurance reimbursement for Intensive Outpatient Program (IOP) and Partial Hospitalization Program (PHP) codes.

NBI has a variety of specialty tracks and programs to meet the diverse clinical needs of our patients. Specialty tracks include OCD overlapping with disorders of eating and combined CBT and Applied Behavioral Analysis for individuals with co-occurring OCD and Autism Spectrum Disorder (ASD). Further, some ITP patients benefit from working with our staff executive function coach to improve their organizational, planning, and prioritization skills. In order to meet patient medical needs, NBI has curated a network of psychiatrists and other physicians who work closely and collaboratively with NBI's clinical staff.

Certain ITP patients reside at the nearby NBI Ranch while undergoing treatment. The NBI Ranch+ITP option is ideal for those individuals who have been unable to make therapeutic progress while residing at home. Additionally, NBI Ranch+ITP is often recommended for severe

and complex clinical presentations that do not require hospitalization or restrictive settings. Patients are also referred to NBI Ranch+ITP as a step-down from other higher levels of care.

At NBI Ranch, residents have an opportunity to acquire and improve life skills, practice what they are learning in ITP, and participate in numerous progress-supporting activities, e.g. equine therapy, all while incorporating some fun in the process! Although NBI Ranch is an unlocked setting and promotes independent functioning as much as possible, a Residential Counselor (RC) is always on premises to assist residents 24/7. Additionally, an NBI staff dietician provides individually customized nutritional and meal preparation guidance to each resident.

## **Treatment Planning Process**

It all starts with an initial consultation to establish eligibility for ITP. The aim of this process is to review background material, clarify reasons for referral and current symptomatology, identify obstacles and strengths, assess readiness for change, and formulate an initial treatment plan. At this time, information is gathered from referrers or other involved professionals whose expertise and perspectives are invaluable to designing the best care plan possible right from the start. We endeavor to stay in regular contact with referrers throughout the patient's course of treatment.

Applicants for admission to our ITP as well as NBI Ranch are asked to complete a variety of intake forms. In some cases, a three-day extended evaluation may be indicated to further assess suitability for ITP or NBI Ranch. This evaluation may include extensive psychological testing.

Throughout the course of treatment, patient progress is monitored and discussed in team meetings utilizing real-time data from individual and group sessions, as well as behavioral observations. This allows our clinical team to continuously modify the treatment approach and quickly address barriers to progress.

Planning for a successful discharge is integral to patient success. As needed, family members or other professionals such as referring educational consultants may be included in determining the best "next steps."

Following discharge, we provide a comprehensive written summary of the ITP process for each patient that includes our observations, case formulation, and recommendations.

# **Core Treatment Components**

The ITP utilizes an evidence-supported treatment approach, modified according to the patient's individualized needs and goals. CBT is the ITP's primary theoretical framework and Exposure and Response Prevention (ERP) is the major treatment element. ERP is supported by other core treatment components including Cognitive Therapy, Acceptance and Commitment Therapy (ACT), Motivational Interviewing (MI), DBT-informed interventions, and Relapse Prevention.

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

Family intervention, guidance, and support is a fundamental part of our program. We define "family" as often including all caregivers and supports that the patient needs. Upon patient

consent, this may include grandparents, co-workers, teachers, and friends. Families that increase their knowledgeability about OCD and the treatment approach their relative is receiving are in a better position to offer constructive support. We always seek to establish a collaborative relationship with our patient's families.

We also strongly encourage family psychoeducation and involvement. We have a regular therapeutic multi-family group and provide family members with information about relevant websites, books and articles, and helpful organizations.

## Treatment of Co-Morbid Disorders

Obsessive-Compulsive Related Disorders such as Body Dysmorphic Disorder (BDD), Hoarding Disorder, Excoriation (Skin-Picking), Trichotillomania (Hair Pulling).

OCD Co-morbidities including, but not limited to, Nonverbal LD, ADHD, Executive Functioning Deficits, Tourette's and Tic Disorders, Body Focused Repetitive Behaviors (BFRB), Eating-Related Disorders (e.g., dysorexia), Substance Use Disorder (SUD).

Autism Spectrum Disorder (ASD) including evaluation, treatment and ASD-related obsessive-compulsive behaviors.

Other: PANDAS/PANS, Anxiety Disorders, Depression, Perfectionism, Scrupulosity, Harm-OCD.

Comprehensive testing services including psychological, psychodiagnostic, and psychoeducational evaluations as well as ASD evaluations.

## Length of Stay

A typical ITP runs between two and eight weeks, but this can vary case-by-case. We discuss with each patient and their family the reasons and rationale for recommending certain lengths of stay.

Typical stays at NBI Ranch range between thirty and ninety days. However, shorter stays may be appropriate as a booster for managing a symptom flare-up or for step-down transitional purposes, e.g. returning home after a period of hospitalization or more restrictive care.

"Census" (i.e., the maximum number of clients seen at any given time) We have a rolling admission policy, but generally we accept no more than 10-20 ITP patients concurrently.

NBI Ranch has beds available for a maximum of eight residents at one time.