



International
OCD
Foundation

OCD and Related Disorders Clinic Profile

NeuroBehavioral Institute (NBI)

Clinic/Program Director: E. Katia Moritz, PhD, ABPP & Jonathan Hoffman, PhD, ABPP

Name of Intake Coordinator: Andrea Bravo

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2233 North Commerce Parkway, Suite 3
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Treatment Providers:

Jonathan Hoffman, PhD, ABPP

E. Katia Moritz, PhD, ABPP

Jason Spielman, PsyD

Wilfredo Rivera, PsyD *Post-Doctoral Resident*

Amrita Singh, PsyD *Post-Doctoral Resident*

Danielle Blocker, PsyD *Post-Doctoral Resident*

Joyce Szentpaly, PsyD *Post-Doctoral Resident*

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

Home Visits

Skills Training

Teletherapy

Treatment for Co-occurring Conditions

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

Body Dysmorphic Disorder (BDD)
Hoarding Disorder
PANDAS/PANS
Perfectionism
Scrupulosity
Skin Picking (Excoriation Disorder)
Tics/Tourettes
Trichotillomania (Hair Pulling Disorder)
Violent/Sexual Obsessions

Summary of our services:

Our program started in 1998 as a Pediatric Obsessive Compulsive Disorder and Related Conditions Program at the Miami Children's Hospital Dan Marino Center in Weston, Florida. Now NBI, our Intensive Treatment Program staff is comprised of licensed clinical psychologists who are trained in the treatment of OCD and related conditions. Dr. Hoffman and Dr. Moritz are the Clinical Directors at NBI. Combined, they have over 40 years of experience treating children, adolescents, and adults with pre-morbid to severe OCD. In addition, NBI offers a wide range of assessments and consultation services. Developmental, psychoeducational, and neuropsychological assessments are available through Academic Options (AO), our affiliated educational consulting practice (www.Academic-Options.com). In addition to our services for individuals with OCD, NBI also offers treatment for Autism Spectrum Disorders (ASDs), Tic Disorders, other Anxiety Disorders, working memory deficits, ADHD, and Mood Disorders.

Our treatment programs are customized for each individual, while maintaining integrity to core Cognitive Behavioral Therapy principles and the available evidence base. NBI staff work collaboratively, emphasizing a team approach whenever feasible. Of note, NBI services often do not end when the intensive program ends. We offer patients a number of follow-up options such as booster sessions/relapse prevention (in person or via phone/videoconferencing, when appropriate).

Treatment Planning Process

The treatment planning process for a general referral to NBI begins with a psychological consultation and evaluation that involves an initial meeting(s) with a licensed psychologist for the purpose of obtaining a professional opinion and recommendations for the adult or child's presenting issues. The core of this part of the treatment planning process is a semi-structured clinical interview that reviews the current situation in detail, past or present treatments, medical and psychiatric history of the identified patient and their family, developmental history, psychosocial history, and patient and/or family goals. In addition, the consultation and evaluation involves a readiness for change evaluation. NBI psychologists will also gather information with formal assessments, and refer for full psychological test batteries when appropriate.

Based on the findings of this process, the psychologist will provide the patient with feedback as well as any diagnostic or prognostic impressions. Treatment recommendations may include referrals for intensive therapy, individual psychotherapy, group psychotherapy, home visits, home and/or school behavioral observations, support groups, psychological testing, or

consultation with another health professional (e.g. psychiatrist, neurologist, occupational therapist, physical therapist, placement specialist). For complex cases or for intensive therapy candidates, NBI clinical staff meets as a treatment team to discuss and plan an individualized treatment program. Throughout the course of treatment, progress is tracked by self-report, often with objective measures. As needed, treatment modality may vary throughout treatment with the addition of services such as home visits.

If the patient was not a general referral to NBI, the treatment planning process for an intensive treatment program begins with a Complete Clinical Diagnostic Evaluation that entails initial meetings with two licensed psychologists, home/natural environment observations, parenting assessment, videotape review, objective assessments, and review of medical and psychological records. Based on this information, a report and recommendations for care for the intensive program and after will be provided.

Core Treatment Components

Our practice emphasizes evidence-based treatments tailored to the specific needs of each patient. In the case of our intensive treatment program for OCD, treatment is designed based on the complete clinical diagnostic evaluation. Treatment regularly includes individual CBT sessions, psychoeducation, exposure and response prevention (ERP) training, ERP in game format, parent training, family therapy, ERP in naturalistic settings, coping skills training, and relapse prevention. When possible, sessions are scheduled with other patients and their parents in order to enhance treatment gains and provide a network of support. Due to the nature of OCD and other neurobiologically-based conditions, medication assessments are often warranted. We have developed a strong working relationship with many psychiatrists and neurologists in the area that specialize in OCD and Related Conditions.

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

Children and adolescents with OCD are often brought for care when family, friends, and teachers are exacerbated by the individual's OCD symptoms such as when the individual with OCD involves family in their rituals or when their inflexibility causes the family much strife. We believe that everyone involved in the individual's life can and will be (as much as they desire) involved in the individual's treatment in order to support them. Education about OCD is important for the family, as OCD affects all concerned. We typically involve parents in sessions with children (and often with adolescents) as much as they are able and willing to participate.

Families can learn specific ways to encourage the person with OCD by supporting the medication regimen and cognitive behavioral therapy. In some instances, family and friends can actually help out as "coaches." In addition, NBI staff have provided a free monthly OCD support group for children, adolescents, and their family members since 1998. We also facilitate or co-facilitate free support groups for adults with OCD in Palm Beach County and Miami-Dade County as well as for children and their families with Tourette's Syndrome.

Treatment of Co-Morbid Disorders

NBI emphasizes the early identification and treatment of children with signs of neurobiologically based conditions such as OCD. Individuals can seek treatment for all OCD spectrum disorders, including Tourette's Disorder, trichotillomania, body dysmorphic disorder, hoarding,

and body-focused repetitive behavior disorders. In addition, NBI offers services for autism spectrum disorders, a variety of anxiety disorders such as panic disorder and generalized anxiety disorder, other neurobiologically based conditions such as attention deficit (hyperactivity) disorder, and childhood conditions such as oppositional defiant disorder.

Individual Therapy

All treatment is individualized for each patient. We inform patients after their initial consultation of the appropriate treatment dosage, be it once a week or 5 times a week. Depending on the patient's symptom severity and their schedule, we collaboratively schedule a treatment plan. Individual sessions may run from 45 minutes to multiple hours. For an intensive treatment program, multiple 90-minute sessions are typically scheduled per day with different NBI psychologists.

Length of Stay

Although our typical intensive treatment program runs between two to eight weeks, the program is designed to meet each individual's needs that may necessitate additional days or weeks. A typical program is scheduled between three to five days a week for a minimum of 3 hours each day. We discuss at length with each patient and their family the rationale for the recommended length of treatment and expectations for treatment.

“Census” (i.e., the maximum number of clients seen at any given time)

None