



International
OCD
Foundation

OCD and Related Disorders Clinic Profile

Center for Psychological & Behavioral Science

Clinic/Program Director: Steven J. Seay, PhD
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Payment Options:

Self-pay

Populations Served:

Adults
Adolescents
Children

Treatment Strategies Offered:

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

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

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

Summary of our services:

Our intensive outpatient program (IOP) for OCD opened in September 2011. We utilize the latest scientific advances in the treatment of OCD to develop a personalized, compassionate treatment plan tailored to help you reach your goals. Dr. Steven Seay, Director of the Center for Psychological & Behavioral Science (CPBS), is a licensed psychologist in Florida and Missouri.

In addition to completing a postdoctoral fellowship focusing on OCD treatment, Dr. Seay has completed both the Behavioral Therapy Training Institute (BTTI) offered by the International OCD Foundation and training offered by the Trichotillomania Learning Center. He has been involved in OCD treatment for over 10 years.

The staff at the CPBS believes in personalizing treatment to suit your specific needs. Depending on the nature of your symptoms, some of your treatment will likely occur outside of traditional office settings. We believe the closer your exposures reflect real life situations, the easier it will be to translate treatment gains to your daily life.

Of note, some individuals find that it is helpful to maintain regular contact with our office in some capacity for several months after the completion of our program in order to troubleshoot any transitional issues that might arise. Follow-up options include weekly/biweekly/ monthly office visits or telephone/video-conference based visits.

Treatment Planning Process

Treatment planning begins with a brief initial phone consultation during which you will discuss your current symptoms and treatment goals. If this brief phone consultation indicates that intensive treatment might be helpful, you will be asked to schedule a formal in-person consultation in our office. During this consultation we will obtain comprehensive information about your symptoms and previous treatment history. We also utilize a variety of standard measures to assess symptoms of OCD and comorbid conditions including the Y-BOCS, CY-BOCS, and specific measures focusing on OCD-related cognitions and behaviors. This information is then integrated to develop a formalized exposure and response prevention (ERP) based treatment plan.

Core Treatment Components

Our intensive treatment program for OCD is evidence-based, time-limited, and designed to help you make rapid progress in reducing your symptoms. Treatments are tailored to be interactive and developmentally appropriate for individuals of all ages including kids, teens, and adults. Our goal is to empower you to stand up to your OCD and take your life back. We will work with you to understand your symptoms, clarify your treatment goals, and give you the tools you need to recover and gain control over your OCD.

Individuals enrolled in our program complete many “exposures” over the course of their treatment. However, we believe that the right preparation for exposure and response prevention (ERP) is also a vital component to treatment success. Early components of our program focus on psychoeducation about OCD, which emphasizes an in-depth understanding of obsessions, compulsions, and avoidance behaviors. We will discuss the neurobiology of OCD and what learning theory has taught us about how OCD develops and is maintained over time. We will also identify maladaptive beliefs and behaviors that perpetuate avoidance and maintain your symptoms. We will then help you develop more effective coping skills that will make you more resilient such as the use of coping statements, motivation scripts, and mindfulness-based strategies.

The next stage of treatment integrates all previous stages and is the largest component of your

intensive OCD treatment program. Using information from the assessment phase and what you've learned about OCD, we will develop a graduated exposure hierarchy that will allow you to confront and overcome your OCD symptoms in a systematic way. Because exposure without good response prevention will be ineffective, we will also develop response prevention guidelines tailored to your symptoms. We will then begin the process of exposure. Initial exposures will be low to medium-level exposures while we gradually work up to completing even the most challenging items on your hierarchy. As treatment progresses, you will develop more autonomy in designing and implementing exposures to target your remaining symptoms. Whenever possible, you'll complete exposures in "real-life" situations.

Optional components of treatment include medication management and group therapy. Although we do not have a psychiatrist on staff, we work closely with several local psychiatrists who specialize in treating OCD. Some of these psychiatrists treat adults, while others specialize in treating children and adolescents. Group therapy may be offered depending on patient interest and the availability of other patients with similar symptom profiles;. However, our IOP for OCD typically involves individual therapy only.

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

We believe that treatment success can be greatly enhanced by building the right "treatment team." This treatment team often includes parents, family members, friends, teachers, healthcare professionals, and other important people in your life. It is important that these individuals become knowledgeable about factors that can either strengthen or weaken your OCD. These individuals also can support your recovery by providing assessment-related information or by giving you encouragement as you actively face your symptoms. Sometimes family and friends may participate directly in your exposures. For our younger patients, parents and other family members are involved in treatment whenever possible. As noted previously, some individuals may also benefit from supplementing individual therapy with family sessions, couples sessions, or parenting sessions.

Teachers often provide assessment data that is used in treatment planning. At your request, we can also educate your teacher about OCD and recommend classroom-based strategies that can help support your child's recovery.

Treatment of Co-Morbid Disorders

Our intensive treatment program for OCD is designed to treat adults, adolescents, and children with all forms of OCD. We specialize in treating compulsive hand washing and checking, as well as OCD subtypes that involve primarily mental rituals or a combination of behavioral and mental rituals (e.g., "Pure-O," scrupulosity, "ROCD," "HOCD," hit-and-run OCD, harm obsessions, sexual obsessions, and maladaptive perfectionism).

In addition to our IOP for OCD we offer separate treatment tracks for OCD-spectrum disorders and other severe anxiety disorders. Examples of these programs include intensive treatment of panic, hoarding, social anxiety, agoraphobia, body dysmorphic disorder (BDD), generalized anxiety disorder (GAD), separation anxiety, post-traumatic stress disorder (PTSD), specific phobias, and BFRBs such as trichotillomania (hair-pulling disorder) and dermatillomania (skin-picking disorder).

Individual Therapy

Because OCD affects each person differently, our intensive OCD treatment program is based around individual therapy sessions scheduled in 1-hour increments. Licensed doctoral level clinical psychologists conduct all therapy. Our typical intensive program involves 2-4 hours of active therapy time 5 days per week. However, your treatment program will be designed to address your specific needs. Weekend sessions may be arranged and/or recommended in some situations. Although group therapy is not a standard component of our OCD treatment program, group/joint treatment sessions may be arranged at your request if we have other individuals currently enrolled in our program who have similar symptom profiles.

Length of Stay

In our experience individuals improve significantly over the course of approximately 3-4 weeks on average. Some individuals may make more rapid progress and achieve symptom reduction more quickly than this whereas others may require more extended treatment to reach their therapeutic goals. Your total length of stay is flexible and can be extended per your individual needs.

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

Census for this program is 4.