



International
OCD
Foundation

OCD and Related Disorders Clinic Profile

Rogers Behavioral Health – Minneapolis

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Treatment Providers:

Tracey Lichner, PHD, LP

Payment Options:

Private Insurance

Self-Pay

Populations Served:

Adults

Adolescents

Children

Treatment Strategies Offered:

Cognitive Behavioral Therapy (CBT)

Exposure and Response Prevention (ERP)

Family Education

Group Therapy

Habit Reversal

Medication Management

Skills Training

Treatment for Co-occurring Conditions

Areas of Specialty in OC-spectrum:

Body Dysmorphic Disorder (BDD)

Hoarding Disorder

Scrupulosity

Skin Picking (Excoriation Disorder)

Tics/Tourettes

Trichotillomania (Hair Pulling Disorder)

Violent/Sexual Obsessions

Summary of our Services:

Rogers Memorial Hospital has provided OCD programming since 1997. Over time, our level of services has evolved and grown into Rogers Behavioral Health, a system which provides comprehensive specialized services to communities across the country where an evident need is present. Rogers is the largest provider of OCD services and one of the most respected in the United States. **Rogers Behavioral Health–Minneapolis offers partial hospital programs (PHPs) for children, adolescents and adults with OCD, OC-spectrum and related anxiety disorders, which provide treatment six hours per day, five days per week.** These treatment options allow our caring and experienced staff to match the intensity of intervention to the severity of a patient’s disorder, ensuring that patients obtain symptom reduction. Our OCD treatment approach is based on cognitive behavioral therapy (CBT) with an emphasis on exposure and response prevention (ERP). This intensive treatment plan combines medication management and evidence-based therapies to help patients reduce their OCD symptoms to a manageable level. Evidence-based therapies have been proven to be the most effective for OCD as documented by numerous research studies. Behavioral specialists are trained internally at Rogers’ “CBT University,” an intensive training process involving didactic classroom lectures, reading lists and shadow shifts led by elite medical staff, including Bradley C. Riemann, PhD, a leading expert in CBT, ensuring that new staff members are prepared to provide the exemplary level of specialized care that Rogers’ offers. Rogers’ extensive history and experience treating OCD and related disorders has allowed countless individuals and their families to place their trust in our programs. Supported by the Rogers’ treatment experience, children teens and adults coping with mental health concerns from coast to coast and internationally have rediscovered a life worth living.

Treatment Planning Process:

After contacting admissions, children, adolescents and adults receive a free screening assessment that is reviewed by medical staff to determine the appropriate level of programming. The over-the-phone assessment includes administering a self-rating scale called a CY-BOCS (child) or Y-BOCS (adult) to help assess the severity and type of symptoms. Once enrolled, a psychiatrist will complete a thorough, in-depth psychiatric assessment. Before programming, the patient and his or her behavioral specialist will develop a detailed individual exposure hierarchy. A patient will work to achieve as many challenges in their hierarchy as possible, with a goal of completing a predetermined percentage of the hierarchy system.

Core Treatment Components:

Rogers uses intensive evidence-based treatment for all therapy programs. Our treatment approach is based on cognitive behavioral therapy with an emphasis on exposure and response prevention. Treatment includes individual and group therapy, as well as family education, medication management and community outings to ease a patient’s transition back into the community.

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

Since OCD is a disorder that greatly affects the functioning of the whole family, family members play an active and vital role in the treatment process at Rogers. The treatment team works with the patient and his or her family to foster insight and develop effective coping strategies to use

once the patient returns to their usual daily environment. Any necessary family education is completed within program hours and may include other community members, such as teachers (with patient consent). Rogers' treatment programs help individuals work through the real-world challenges they face in the community, such as struggles in school or family relationships.

Treatment of Co-Morbid Disorders:

The child, adolescent and adult partial hospital programs treat OCD, OC-spectrum disorders and anxiety disorders. Rogers has the ability to successfully treat co-occurring conditions, such as major depressive disorder (MDD), and other OC-spectrum or anxiety disorders. If an individual has a co-occurring condition, he or she is assessed to determine the level of their disorder and treated with an individualized therapy plan. Treating patients dually for their disorders improves the likelihood symptoms will be decreased to a manageable level.

Individual Therapy:

Each patient receives an individualized treatment plan which includes regular meetings with social workers, psychiatrists, behavioral specialists and experiential therapists, depending on his or her required level of care.

Length of Stay:

Length of stay is dependent on a patient's level of need. On average, a patient's length of stay in a partial hospital program is about five to seven weeks.

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

The partial hospital programs have a maximum census of eight children/adolescents and adults.

School Facilities:

An education therapist is available for children and adolescents in the partial hospital program for five hours per week, one hour per day. Children and adolescents participate in a simulated school setting to address school refusal, perfections or assigned school work. This treatment approach is also based in CBT with an emphasis on ERP.