



International
OCD
Foundation

OCD and Related Disorders Clinic Profile

Behavior Therapy Center of Greater Washington/ OCD & Anxiety Disorders Program

Clinic/Program Director: Charles Mansueto, PhD

Name of Intake Coordinator: Michael Lent, PhD

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11227 Lockwood Dr
Silver Springs, MD 20901

Treatment Providers:

Charles Manusetto, PhD

Ruth Golomb, LCPC

Jennifer Kessler, PhD

Noah Weintraub, PsyD

Payment Options:

Self-Pay

Sliding fee available

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

Prescribe Medication

Skills Training

Home Visits

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

Body Dysmorphic Disorder (BDD)

Hoarding Disorder
Skin Picking (Excoriation Disorder)
Trichotillomania (Hair Pulling Disorder)
PANDAS/PANS
Treatment of Co-occurring Disorders
Autism Spectrum Disorders (ASD)
Tics/Tourette's
Perfectionism
Scrupulosity
Violent/Sexual Obsessions

Summary of our services:

The Behavior Therapy Center of Greater Washington offers behavioral and cognitive behavioral treatment for children, adolescents, adults, couples and families. Established over 30 years ago by the director, Dr. Charles Mansueto, BTC is nationally recognized as a leading center for treatment of obsessive-compulsive disorder and other anxiety disorders. BTC also provides state-of-the-art care for a full range of other psychological disorders.

The Center is staffed by psychologists, clinical social workers, and professional counselors with diverse skills and backgrounds. The team treatment approach at BTC provides unique opportunities for clients to work with one or more BTC staff members over the course of their therapy. Therapists work in close collaboration with local medical professionals when medication is a component of treatment.

Treatment Planning Process

The intensity of our outpatient treatment services, which includes the number of clinicians involved on the treatment team, frequency and duration of sessions, and length of treatment, is determined during our initial intake and assessment sessions and revised as necessary during the course of treatment. Factors considered are the client's financial and time resources, co-occurring disorders, severity of symptoms, commitment and readiness for treatment, and preferences and needs of the client. During treatment, the client's progress and needs are frequently communicated between treating providers, and discussed with the entire team in our weekly meetings.

Core Treatment Components

When medication is a component of treatment, while BTC does not have psychiatrists on staff at BTC, we collaborate closely with local medical professionals.

An evidence-based practice, we employ our wide range of skills and capabilities, including the following:

ERP
Interoceptive Exposure
DBT (including emotion-regulation skill-building groups)

ACT

Behavioral Activation

CBIT/Habit Reversal

Comprehensive Behavioral (ComB) model for BFRBs

Contingency Management

Token Economy Based Behavior Plans

Differential Reinforcement

Mindfulness-based interventions

Social Effectiveness Therapy (SET) groups

Goals OCD Support Group

Parenting groups for managing disruptive behaviors

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

At BTC, we consider the multiple systems of the client as part of the treatment team. We frequently include primary and extended family members, significant others and friends in treatment, particularly to educate loved ones about the sufferer's condition, ways they can help, and to address treatment interfering behaviors common among loved ones (e.g., excessive family accommodation). Further, we frequently consult with teachers, coaches, tutors, clergy and other essential people within the client's social system.

Treatment of Co-Morbid Disorders

We treat (1) OCD-related conditions, including Tourette's Disorder/tic disorders, Hair Pulling Disorder (Trichotillomania), Skin Picking Disorder, Body Dysmorphic Disorder (BDD), and Hoarding; (2) Anxiety Disorders, including Specific Phobias, Panic Disorder, Agoraphobia, Social Anxiety, Selective Mutism, Generalized Anxiety Disorder (GAD), and Health Preoccupations; (3) and other common co-occurring conditions, including Depression, Anger Problems, Family Conflict, Children with Special Needs, and Disruptive Behavior Disorders. Treatment targets are prioritized based on associated level of impairment, distress, and interference with OCD treatment.

Individual Therapy

While BTC meets the needs of many conditions, our primary population suffers from OCD or related disorders.

Length of Stay

The determined length of treatment at BTC varies depending on the client's needs, and is revised as necessary during the course of treatment.

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

As BTC has 17 clinicians who all have expertise in OCD treatment, we typically serves approximately 300 clients at any given time.

Other Resources for Outpatients

- GOAL OCD Support Group
- Child Management Training and Parent Support Group (for parents of children with both OCD, a tic disorder, and/or an anxiety disorder AND disruptive behaviors)
- Disruptive Behavior Management Program (for children with both OCD, a tic disorder, and/or an anxiety disorder AND disruptive behaviors)