Applying to the OCD Program

To apply, you need to submit a detailed referral letter from your doctor (GP and preferably Psychiatrist) to the program.

Once received, the OCD Program Coordinator will place you on a wait list, with an assessment to follow.

Following the assessment, the treating team will carefully assess your suitability for the program.

To be considered suitable, applicants must:

- Have a formal diagnosis of OCD made by a health professional.
- · Be motivated and ready for change.
- Be assessed as low in "risk" at commencement of the program to allow for unaccompanied leave to participate in behavioural tasks.
- Not be in a crisis situation. If in crisis, the individual is recommended to seek appropriate support and treatment, and to consider joining the OCD Program when the crisis has been managed.
- Commit to completing the three week program (or two week version if available).
- Be able to participate appropriately in a group setting. This includes working cooperatively and respectfully with staff and group members.
- Have adequate comprehension and literacy skills to engage in various reading and writing tasks, as well as group presentations and discussions.

Once your application has been approved, you will be contacted to determine a suitable starting date based on availability within the program.

If you have a referral to the OCD Program or related queries, please contact the team by emailing tmcocdteam@healthscope.com.au or calling 03 9420 9246.





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Obsessive-Compulsive Disorder (OCD) Program

Information for patients, carers, family and support persons



Community of Care



What is Obsessive-Compulsive Disorder?

Obsessive-Compulsive Disorder (OCD) is a mental health disorder that involves obsessions and compulsions, and affects approximately 2% of the population.

Obsessions are recurring and intrusive thoughts, images, or impulses, that feel out of one's control and lead to intense and uncomfortable feelings such as fear, disgust, and guilt.

Compulsions are repetitive behaviours or thoughts that a person uses to neutralise, counteract, or get rid of their obsessions and uncomfortable feelings in the short term.

Compulsions can also involve avoiding situations to prevent triggering obsessions.

The following are common examples of obsessions and compulsions in OCD:

Obsessions:

- Contamination (e.g. body fluids; germs; HIV; chemicals; dirt)
- Harm (e.g. harming yourself or others)
- · Illness (e.g. cancer, illness not borne from germs)
- Losing control (e.g. fear of stealing things; acting on impulse)
- Superstitious (e.g. lucky or unlucky numbers, words, colours)
- Unwanted sexual content (e.g. forbidden or perverse thoughts; obsessions about homosexuality; children; incest; aggressive sexual acts).

- Perfection (e.g. things being orderly; even, exact, symmetrical; making decisions)
- Religious (e.g. offending God; blasphemy; right/ wrong; morality)
- Relationship (e.g. partner being unfaithful).

Compulsions:

- · Avoiding situations that might trigger obsessions
- Checking (e.g. that you didn't lose something, make a mistake, forget something, or harm someone; checking your body)
- · "Confessing" or asking for reassurance
- Mental compulsions (e.g. mentally replying; reviewing events; counting or saying words under your breath; "cancelling", blocking, or pushing away thoughts; praying excessively)
- Ordering (e.g. arranging clothes, stationary, books a certain way)
- Repeating (e.g. re-reading, rewriting; standing/ sitting; walking through doorways; body movements such as tapping, blinking)
- Washing and cleaning (e.g. hands and body, clothes, furniture, surfaces)

For individuals with OCD, these obsessions and compulsions can be distressing, time-consuming and significantly get in the way of living one's life.

There are many variations of OCD symptoms and severity (e.g. mild symptoms with little impairment; severe symptoms with considerable impact), and in some cases, the OCD symptoms may be related to another condition.

Because OCD can be a complex disorder, a careful assessment by a professional experienced with OCD is recommended before it is diagnosed.



The OCD Program at The Melbourne Clinic

The OCD Program is a specialised adult inpatient group program at The Melbourne Clinic. It runs for three week periods throughout the year and houses up to eight individuals at a time.

The OCD program is designed to help individuals with OCD, and related disorders, gain the skills and knowledge to deal with their symptoms.

The treatment approach is based on Cognitive Behaviour Therapy (CBT) principles for dealing with OCD. There is an emphasis on graded Exposure and Response Prevention (ERP), which is considered a "gold-standard" method in treating OCD.

It is a structured group program that includes detailed education sessions.

The program is delivered by a highly experienced team, including a consultant psychiatrist, allied health professionals (e.g. clinical psychologists, occupational therapist), and program nurses.

Together, they offer a supportive environment for participants to make positive changes in their life.

Participants of the program stay as inpatients within The Melbourne Clinic during the course of the program.