

# It's Been a Long Time Coming: First Year Patient Outcomes for the OCD and Anxiety IOP

Emily Hemendinger LCSW, MPH, CPH, ACS, Jennifer Fishman BS, & Kensie Funsch BS, MSW Candidate

## Introduction

- Higher levels of care that are individualized, specialized, and affordable are essential in treating acute patients.
- The OCD and Anxiety IOP, originally conceptualized in late 2021, was finally opened in March 2024.
- 12-week program providing comprehensive and culturally-informed interventions for OCD and anxiety disorders for adults, 17 years and older.
- In-person program meets three days a week for 3 hours, providing group therapy, individual check-ins, medication management, case management, and family psychoeducation.

## Methods

### Participants:

- 31 patients** discharged from the OCD and Anxiety IOP from March 2024 through mid-March 2025
- Some participants excluded from data analysis for not completing assessments past baseline or week one (PHQ-9 & GAD-7 → N=26; Y-BOCS & Q-LES-Q-SF → N=24)

### Demographics:

- Ages ranged from 18–60 (M=32.45)
- Most patients (58%) identified as female, 39% identified as male, and 3% identified as nonbinary
- The sample predominantly identified as white (81%) with smaller numbers identifying as Black or African American (3%), Asian (10%), biracial/multiracial (3%), or other (3%)

### Measures:

- PHQ-9 (depression), GAD-7 (anxiety), Y-BOCS (OCD), Q-LES-Q-SF (quality of life)
- A paired sample t-test was used to analyze the data from first to final measurements

## Results

On average, patients who have discharged from the IOP have completed:

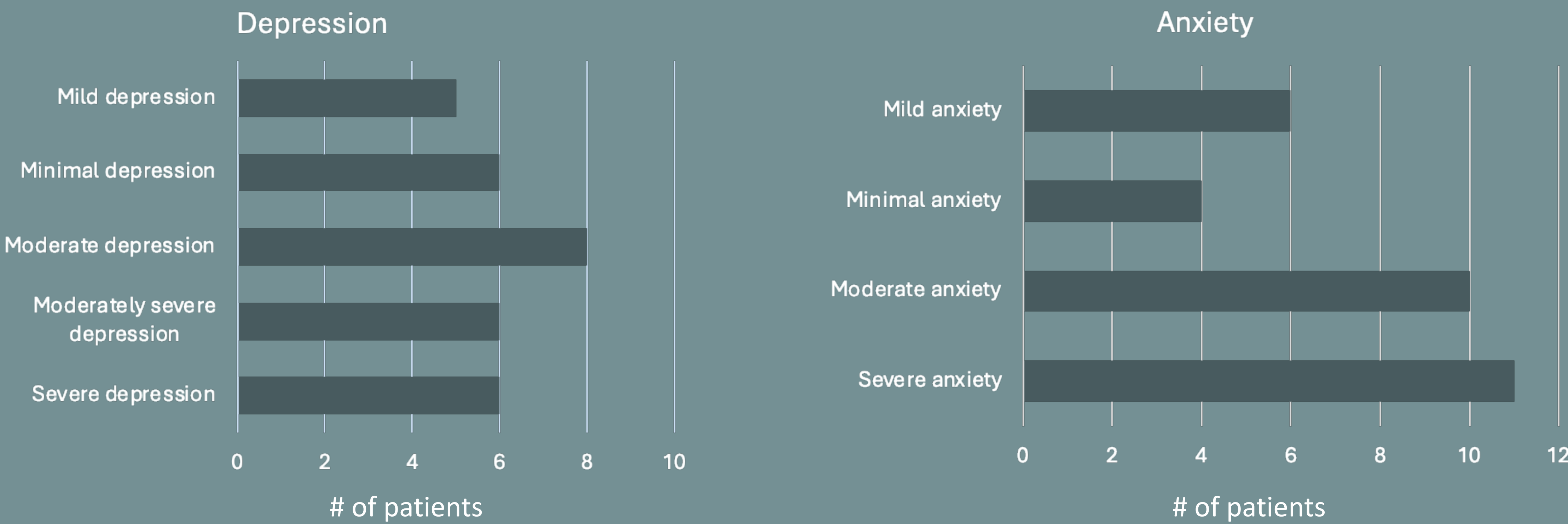
**12** Weeks of Treatment  
Range: 4 - 20

4 patients have discharged early for reasons including scheduling conflicts, other commitments, and disagreement with treatment plan.

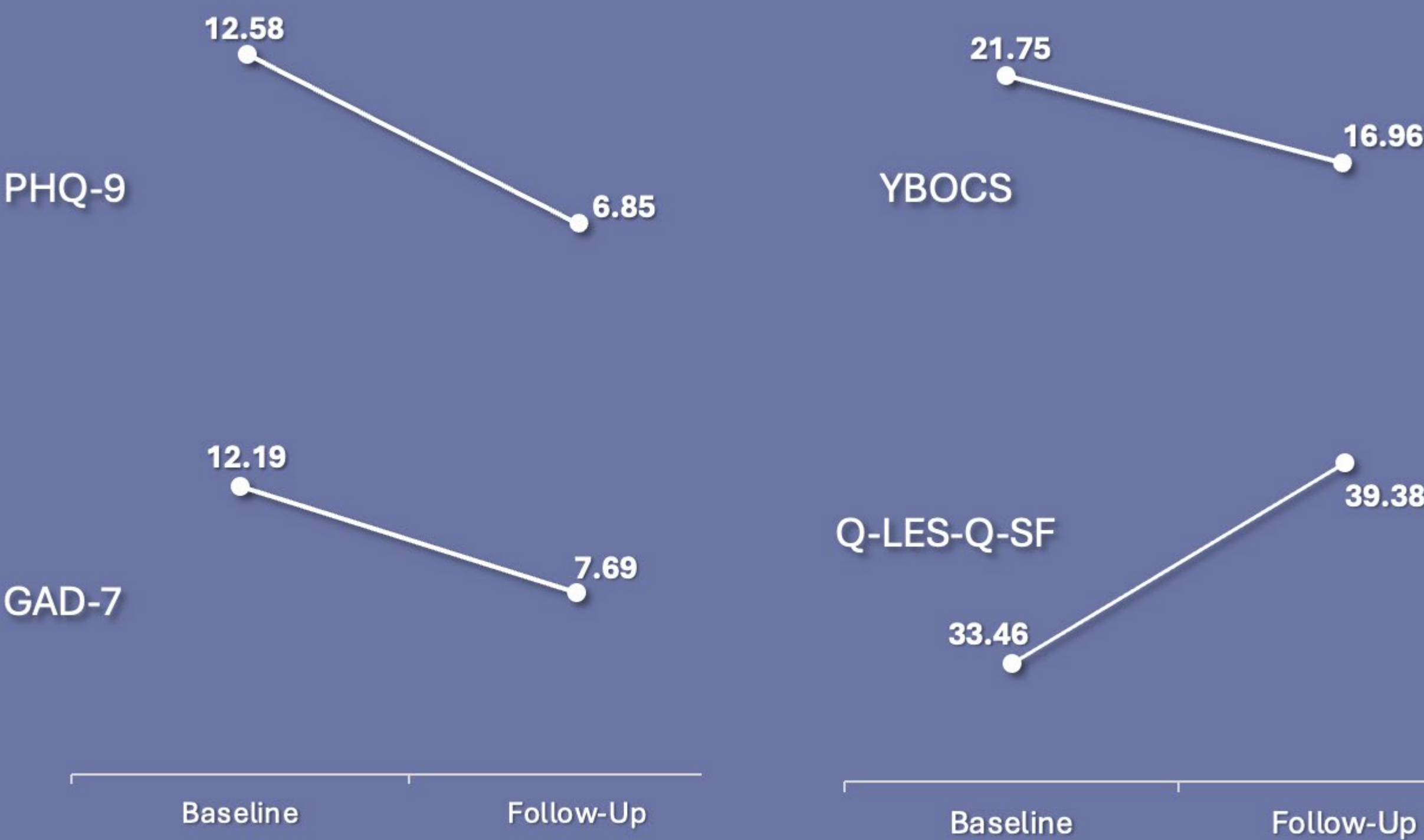
**31** Treatment Sessions  
Range: 9 - 46

Patients missed an average of 4 sessions, with a range of 0 -9 and a mode of 0.

### Symptom Severity at Baseline



### Change in Clinical Measures



### Comparison of Measures at Baseline and Follow Up

Measure	t(df)	p	Cohen's d
PHQ-9	4.147 (25)	<.001	0.813
GAD-7	3.409 (25)	.002	0.669
YBOCS	3.761 (23)	.001	0.768
Q-LES-Q-SF	-4.525 (23)	<.001	-0.924

## Discussion

- The majority of patients admitting to IOP reported moderate levels of depression and moderate to severe levels of anxiety
- Statistically significant decrease in depressive symptoms anxiety symptoms and OCD symptoms after completion of IOP**
- Statistically significant increase in quality of life after completion of IOP**
- This data can be used to advocate for increased access to affordable and specialized mental health care at the IOP level of care. This data can be presented to legislators and insurance companies/payors.

### Limitations:

- Small sample size
- Varying completion rates across patients
- Varying gaps of time between baseline and week one scores, potentially leading to large differences in these scores.
- The final measurement recorded did not always align with discharge dates for patients, so it is possible that some scores do not fully encompass patient outcomes

## Future Directions

- Increase standardized protocol for completion of assessments (e.g., weekly on Tuesdays at beginning of group)
- Continue to advocate for increased access for patients; contract with more insurance providers
- Family Days programming to start March 2025

## Acknowledgements

- Thank you, Katie Sinsko, Erin LeBeau, Orah Fireman, Jacob Gadbow, Harper Gillard, Cate Rush, Jen Fishman, Kensie Funsch, Ambey Clark, and Lydean Collins for the work you do and support. We couldn't do it without you!
- Thank you to Kathy White and Mary Kozloski Nyquist, for the help along the way in getting this up and running.
- Thank you to Rachel Davis for trusting me to develop and run the program.
- Thank you to the fellow IOP leaders, Matt Desrosiers, Kelly Glaze,, Karen Longenecker, and Eleanor Todd for being in it with me.