



Model of Human Occupation

Archived List Serv Discussion

Assessing clients with OCD

April 5, 2011

Hi all,

Just wondering if anyone has had any experience in assessing clients with OCD?? Im interested to know what ax's people have found helpful. I was thinking of taking quite a strengths based approach by using parts of the OCAIRS around personal causation, as well as routine, roles and habits. I also thought it might be good to use the OSA as a self-ax.

The referral is mainly for ADLs (particularly morning routine) however the woman has also had her baby removed from her care due to her inability to care for her.

Any input would be appreciated,

Thanks

Tess

Ps. Please send onto anyone I have missed. Cheers!

April 8, 2011

In my 11 years of working as an OT on the National Unit for Profound and Treatment refractive OCD and BDD sufferers, I used MOHOST (and sometimes the OSA.) I found this tool to be the most succinct and helpful to gain a full picture of the persons level of functioning and needs and would complete it after a structured interview with the patient, observation in groups and feedback from staff. I found the OCAIRS to be quite time consuming, though useful info was gained.

Gus Chandler

Senior Cognitive Behavioural Psychotherapist

April 11, 2011

I am a dual trained OT / CBT working on the Anxiety Disorders Residential Unit - specialising in client's with OCD, BDD and specific phobia of vomit.

I have found the MOHOST is the most useful screening tool as it gives a full picture of a person's functioning, teamed with some of the OCAIRS questions (the selection suggested at the back of the MOHOST manual) which I ask at their initial assessment. Our residents generally have very good insight into their problems, and therefore the OSA has been a useful tool to help with setting treatment planning and goal setting.

Regards,
Lisa Wheble