

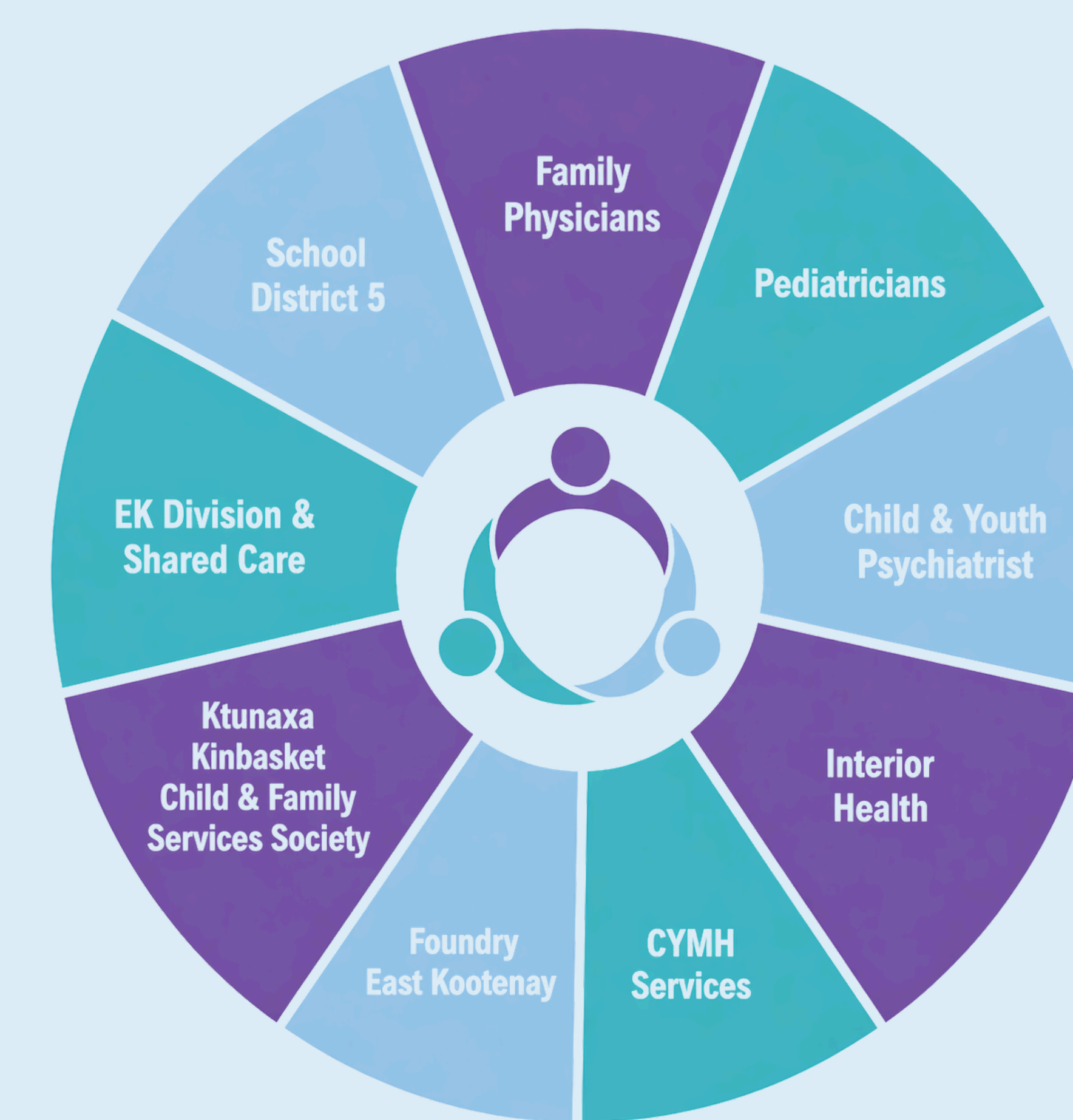
Physician Leads:

Dr. Jade Jensen, Family Physician
Dr. Orits Oshodi, Child & Youth Psychiatrist
Dr. Laura Swaney, Pediatrician

With support from EK Division of Family Practice
Project Lead Micheline Nimmock and
Program Manager Jacqui van Zyl

Project Partners

Led by a steering committee and supported by:



Project Approach & Activities

Key activities included:

- Consultations with collaborators, Indigenous partners, patients, and physicians.
- Defining the role, scope, and processes.
- Developing clear referral pathways/communication.
- Creating practical tools and resources.
- Communication and media relations.
- Primary care provider and physician engagement.

Evaluation Methods

- Medical record audit
- Physician survey (n=79)
- Post event evaluation (n=13)
- Pathways analytics
- Patient experience survey for children, youth (n=50)
- End-of-project participant survey & interviews (n=10)

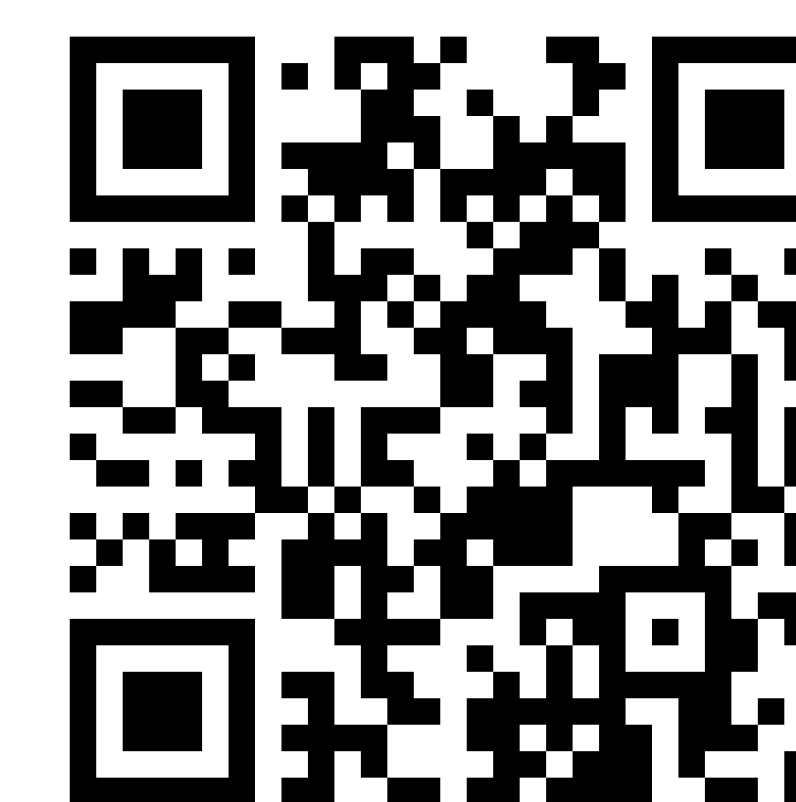
Results

- 191 estimated new referrals received between Oct. 21, 2024 to Dec. 31, 2025.
- 75% (n=55) of family physicians (FPs) had referred to the service by mid-project; this increased to 81 FPs and all five pediatricians by project close.
- Among FPs who referred and saw patients again, most agreed care was: coordinated (76%); appropriate (79%); supported by a shared treatment plan (79%).
- Awareness gap: 46% of FPs were not aware of an existing referral form at mid-project.
- Among those who used the referral form 100% found it simple to complete, 100% said it included necessary information, 75% found it clear on required attachments, 92% viewed it as a valuable resource.
- FPs who interacted with the clinic reported stronger agreement across quality measures, including: improved access to timely urgent and non-urgent care; reduced travel burden; better care coordination; reduced reliance on both primary care and emergency services.
- 90% of parents and 81% of youth reported the overall help received was good ('Certainly true').

Integrating Pediatric Psychiatry East Kootenay



*Read the Press Release
welcoming Dr. Oshodi.*



*East Kootenay Primary Care
Child & Youth Psychiatry
Referral Process*

The Integrating Pediatric Psychiatry Project's aim was to create and implement clear pathways for children requiring psychiatric services by enhancing local communications, building relationships amongst providers, and creating effective collaboration and referral processes.

Timeline: May 2024 – April 2026

How it Started

A survey to stakeholders in 2024 confirmed children and youth in the East Kootenay faced challenges accessing timely psychiatric care. Prior to 2024, there was no resident child and youth psychiatrist in the region, resulting in fragmented referral pathways, long wait times, and limited communication between providers.

The recruitment of the region's first resident child and youth psychiatrist in 2024 created an opportunity not only to improve psychiatry access for local children and youth by developing clear pathways and fostering connection among health-care providers and teams, but to intentionally explore how specialist services can be effectively integrated into a rural health system. In rural communities, integrating a new specialist brings added challenges, including unclear roles, limited system capacity, geographic distance, and the risk of isolation or overload without coordinated supports.

The Goal

To integrate the Child and Youth Psychiatrist into the regional health-care community and create and implement clear, coordinated pathways for children and youth requiring psychiatric services by:

- Clarifying pediatric psychiatry scope and process
- Strengthening communication between health-care providers
- Building collaborative relationships across the system
- Supporting shared care and consultation models

The goal was to ensure children and youth receive the right care, at the right time, from the right provider, closer to home.