



The Development of a Perinatal Psychiatry Referral Pathway in Prince George, BC



Location: Prince George, BC
 Project Date: October 2022- June 2023
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Why Perinatal Mental Health Matters

- 1 in 5 will experience mental illness during the perinatal period.
- Depression and anxiety are of the most common pregnancy complications^{1,2}
- Individuals are 22x more likely to have a psychiatric admission in the month following the birth of their child than any other point in their life.³
- Risks of untreated depression – poor prenatal care, suicidality, impaired bonding. Risk to fetus include increased preterm birth, low birth weight.
- Long-term consequences in children – poor cognitive and social functioning, mental health disorders.^{4,5}

The Northern Context:

- Northern and rural patients required to travel to deliver – negatively affects mental health and well-being.⁶
- Indigenous patients have experienced higher rates of peripartum depression than non-indigenous individuals.⁷
- Currently no formal Reproductive Psychiatry Program in Prince George.*
- BC Women’s Reproductive Mental Health Program – located in Vancouver, virtual, current wait-lists 6-9 months*⁸

Objectives

To establish the need for a more formalized Perinatal Psychiatry Program and referral pathway in Prince George, and assess providers (including Family Physicians, Nurse Practitioners, Midwives, Obstetricians, and Psychiatrists) understanding of reproductive mental health services currently available, requests and anticipated needs for services.

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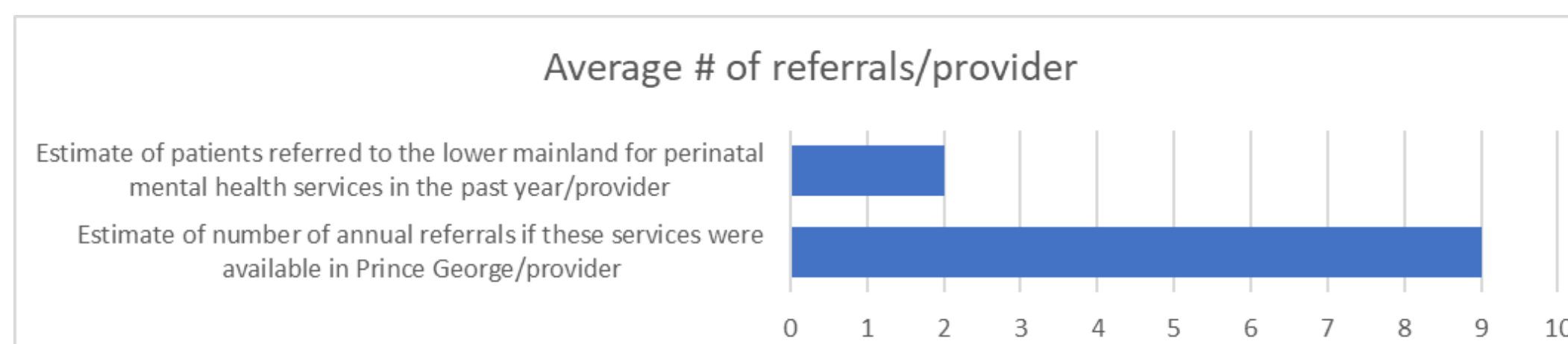
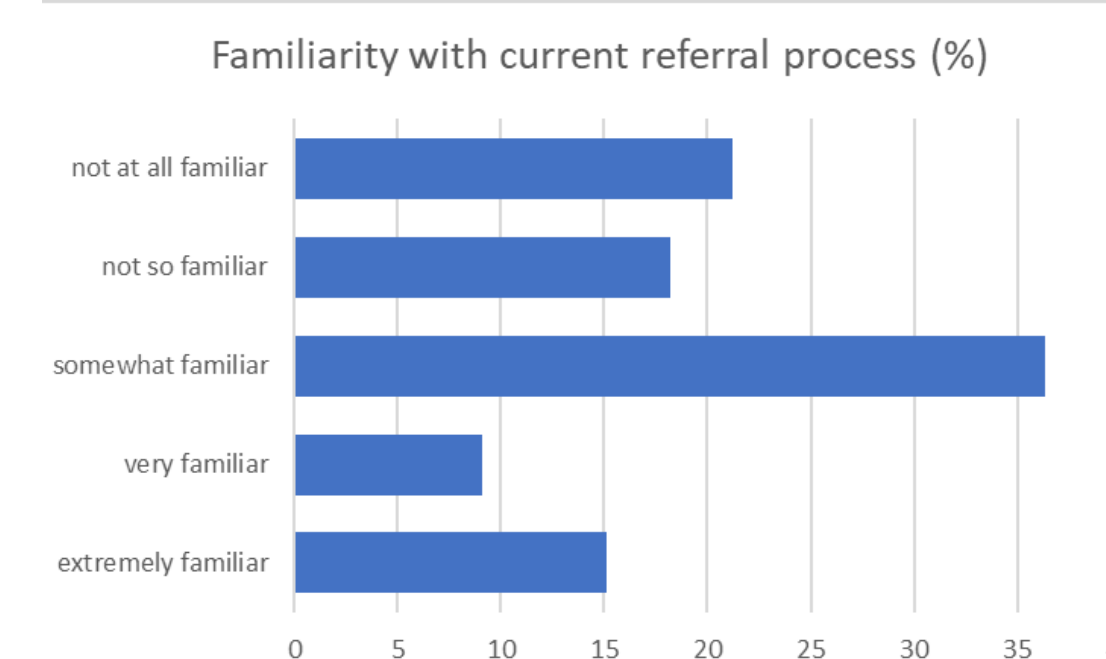
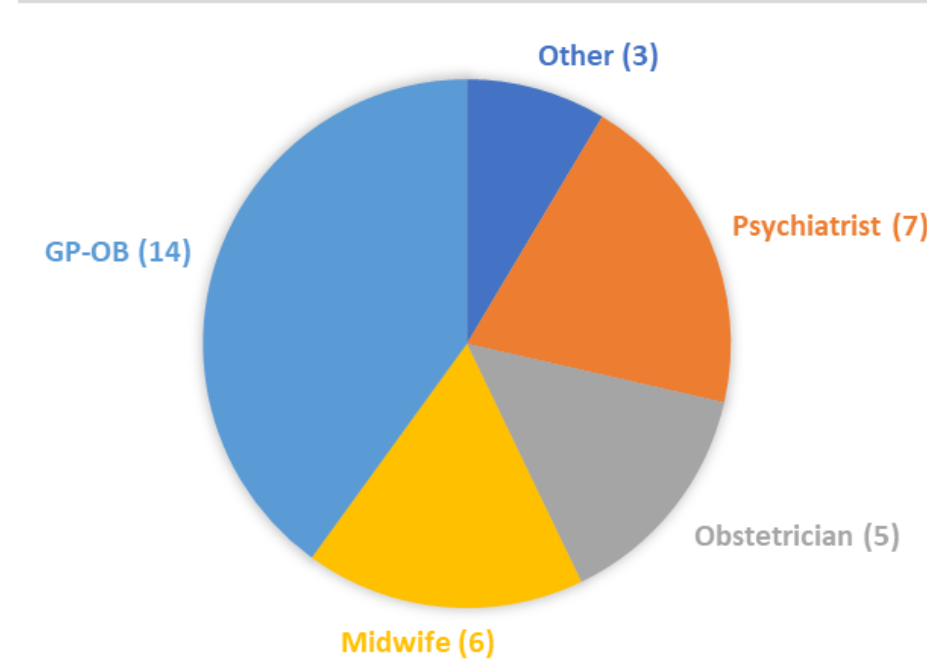
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Methods

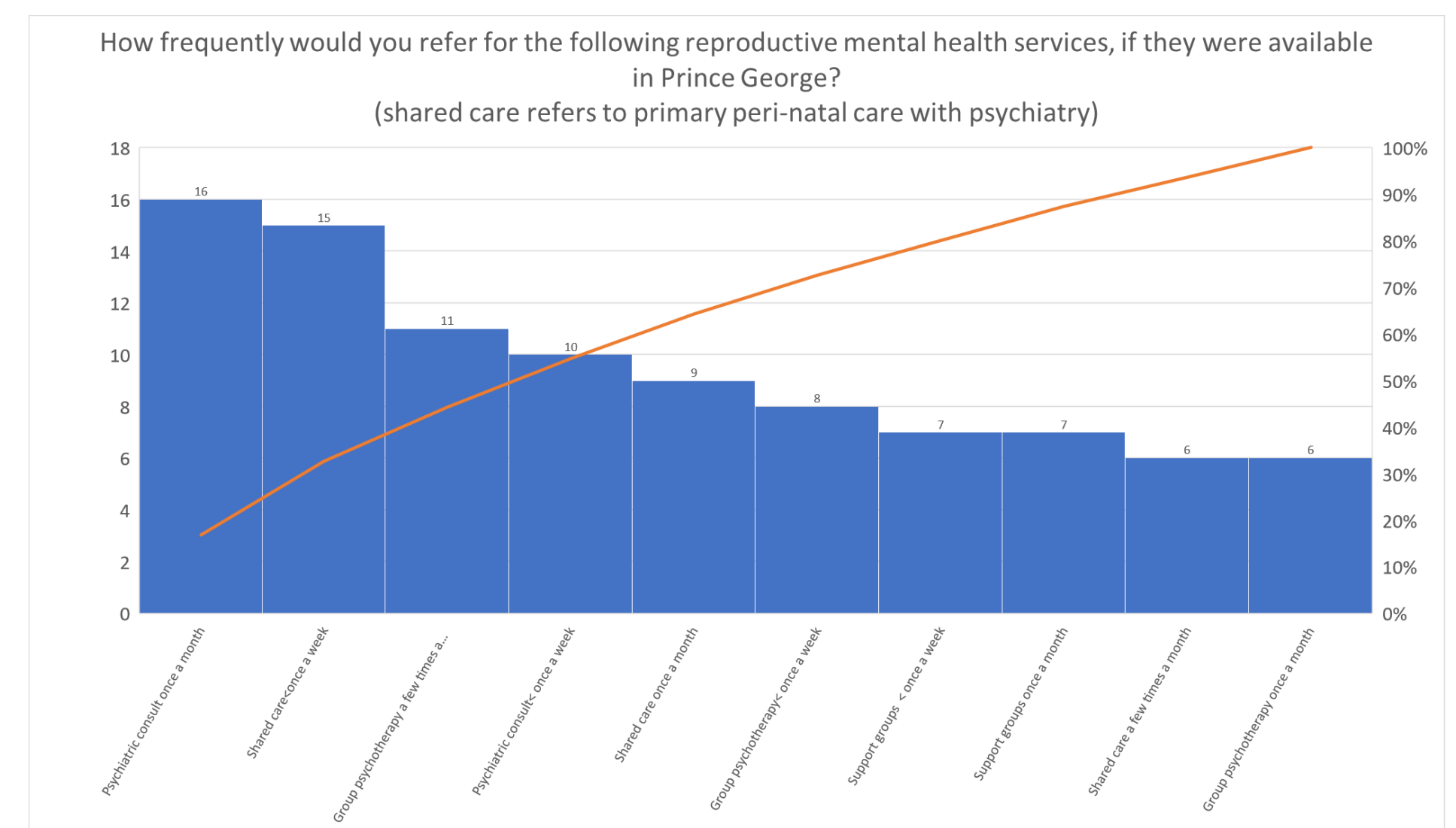
A qualitative survey was created with support from the Northern Health Evaluation team and sent to applicable care providers. Providers included midwives, GP-obstetricians (GP-OBs), Nurse Practitioners, Obstetricians, and Psychiatrists. The survey also investigated awareness and understanding of the current reproductive psychiatry resources in the north, their reproductive psychiatry needs via their indication of past and prospective referrals, the numbers of patients they have referred to BC Women’s Reproductive Psychiatry Program in the past, and their requests for anticipated services should a formalized program be developed i.e., consultation, treatment, follow-up, and groups. Specific measures from this survey on familiarity with referral pathways, and comfort of prescribing in the pregnancy and breastfeeding period will be monitored over time via subsequent surveys following education sessions to determine if improvements are occurring.

Results

The survey received 35 responses, the majority were from GP-OBs. Most respondents were only ‘somewhat familiar’ with current referral processes. Providers estimated they would make more referrals if a service were available in Prince George, and 82% expressed that a local referral pathway would be ‘extremely helpful’



In response to comfort levels in prescribing psychiatry medications to patients who are pregnant or breast feeding, no respondents were ‘extremely comfortable’. 64.7% were either very or somewhat comfortable prescribing to pregnant patients, while 55.9% were either very or somewhat comfortable prescribing to breastfeeding patients. With respect to types of referrals, there was interest in psychiatric consultation, shared care, group psychotherapy and support groups. As far as frequency, the strongest interest is for Psychiatric consult once a month, shared care <once a week, and group psychotherapy a few times a month. Qualitative responses indicated further requests for support for fetal loss and grief, along with treatment for concurrent disorders.



Next Steps

The Prince George perinatal psychiatry service opened in the summer of 2023; and improvements to the referral form and pathway are ongoing. The potential for new group psychotherapy services, could range from Cognitive Behavioral Therapy (CBT) Skills groups, to support, to psychodynamic therapy. Given this was highlighted as a need, we will ensure establishing groups is a priority as we continue to develop the Perinatal Mental Health Program.