BRITISH COLUMBIA PEDIATRIC FEEDING SERVICE PROVIDERS

FRASER VALLEY

| LOCATION | CENTRE/AGENCY COORDINATES AND CONTACT INFORMATION | SERVICES AND MANDATE AVERAGE WAIT TIMES | SERVICES AND PROGRAM TEAM MEMBERS | REFERRAL PROCESS AND REFERRAL FORMS |
|------------------------------------|---|--|--|--|
| Regions: - Fraser Health Authority | Centre / Agency Surrey Memorial Hospital, Child / Youth Services, Feeding Team Address 13750 96 th Avenue Surrey, BC V3V 1Z2 Contact person - Kim Breitkreutz, OT - Donna Hartmann, SLP Contact information Phone: (604) 585-5666 x 778709 Fax: (604) 585-5568 Email: kimberly.breitkreutz@fraserhealth.ca donna.hartmann@fraserhealth.ca | Ages 0 to 16 years Mandate - Patients must reside within Fraser Health boundaries or be admitted to SMH - All inpatients with feeding difficulties. Outpatients with feeding difficulties who do not have a diagnosed developmental delay (including autism). Average waitlist times - Will be prioritized according to urgency and level of risk. | Services / Programs - Clinical feeding assessment and ongoing follow-up - Telephone consultation. - Liaison with and referrals to external services Team may consist of: - Occupational therapist - Speech-language pathologist - A dietitian may be accessed if needed through the outpatient pediatric nutrition clinic | Referral form N/A Referral process - A physician referral is not required at this time Completed referrals should be faxed. |
| | Website N/A | | | |

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|-----------------|---|--|---|--|
| Regions: | Centre / Agency | Ages | Services / Programs | Referral form |
| - Fraser South: | The Centre for Child Development, | 0 to 19 years | - Primarily centre-based team assessment and consultation | https://the-centre.org/wp- |
| Surrey, White | Eating Skills Team | | but ability for therapists to do home-based consultations | content/uploads/2021/03/CDC-Referral-Form.pdf |
| Rock, Langley, | | <u>Mandate</u> | when indicated | |
| North Delta, | <u>Address</u> | - Infants and children with developmental | - Provide assessment and consultation support to a | Referral process |
| South Delta | 9460 140 th Street | disabilities with significant swallowing | primary clinician / therapist, usually an OT or SLP, who | - Physician referral clearly stating reason for referral |
| | Surrey, BC V4G 1K2 | safety issues, nutritional concerns or | will provide ongoing intervention for swallowing | and/or question is required. |
| | | transitioning from tube to oral feeding | concerns. | - Pertinent medical and therapy reports are |
| | Contact person | - Infants and children must be referred to | - If a primary therapist is not yet in place, the team | required. |
| | - Andrea Rowan, SLP | The Centre for Child Development OT or | provides follow-up in the interim. | |
| | - Alison Laswick, MD | SLP services, or receive one of these | | |
| | | services (preschool and school age) | Team may consist of: | |
| | Contact information | | - Consultant developmental pediatrician | |
| | Phone: (604) 584-1361 | Average waitlist times | - Occupational therapist | |
| | Fax: (604) 583-5113 | - 2 to 8 weeks once physician referral has | - Speech-language pathologist | |
| | Email: | been received | - Registered dietitian | |
| | andrea@the-centre.org | - Emergency spots are available in urgent | - Social worker – family services support as required | |
| | alison@the-centre.org | cases | - Psychology support as required | |
| | Website | | | |
| | https://the-centre.org/eating-skills/ | | | |