Here for you
With the help of philanthropic support, Providence Swedish nurses continue to answer the call.
In a time of unprecedented uncertainty, Providence Swedish nurses answered the call, putting themselves at risk so our community could endure. And as the contours of this once-in-a-generation global pandemic continued to change almost daily, they responded the way they always have: by putting the health and safety of their patients first.

And donors like you have been there for them. Philanthropy gives them the tools to grow, the encouragement to innovate and the support to respond to adversity—not only for the next global health crisis, but also for the next time you visit Providence Swedish, no matter what brings you through our doors.

They were there for us.
Providence Swedish nurses by the numbers

No matter the challenges, no matter the risks, Providence Swedish nurses show up on the frontlines and at the bedside every day to care for our community. With the help of generous donors like you, we are committed to rewarding their dedication to our patients by offering them the support, education and opportunities to innovate that they need to continue providing high-quality care.

Providence Swedish nurses by the numbers

4,900+
Nearly 5,000 nurses care for patients at our five hospitals and two ambulatory care clinics.

The impact of giving on nurses...

More than 1,200 current Providence Swedish nurses have passed through our residency or fellowship programs and received a degree.

- 72% BACHELOR OF SCIENCE NURSE
- 1% MASTER OF SCIENCE NURSE
- 27% ADVANCED DEGREE NURSE

In 2021...

- 457 nursing residents and fellows received
- 3,074 hours of hands-on training at our 11,000-square-foot simulation center, meticulously designed to look and operate like a real hospital

Combating burnout

Nurses are exceptionally prone to burnout, a complex combination of emotional exhaustion, detachment and decline in personal fulfillment. Our nurses have had the opportunity to attend two-day wellness and self-care retreats at Harmony Hill since 2017. In response to the pandemic, we worked with Harmony Hill’s instructors to create a one-day, on-site workshop that increased annual attendance by 560%.

- 72%
- 1%
- 27%

Nurses who participated in wellness retreats and workshops in 2021

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Kanika and Tyler had a flexible birth plan when they were preparing for the arrival of their first child at Providence Swedish First Hill in December 2021. But even by those loose standards, they weren’t prepared for what came next.

First there was the preeclampsia that reared its head at 38 weeks and prompted a “we need to induce today” order from Kanika’s doctor. Then there was her excruciating back labor, followed by an epidural that sort of worked and another that worked a little too well. And finally, after 40 hours of labor, there was the uterine infection and their baby’s general … reluctance to make an appearance that led to a C-section.

Harrowing as the experience may have been, though, karma responded by introducing Kanika and Tyler to Lauren Foss. As they spent the next four days recovering in our postpartum unit with their healthy, thriving son, Rami, the new parents bonded with the positive, cheerful nurse, whose empathetic approach to care put the new family at ease.

Though every nurse they encountered was “really, really wonderful,” there was something special about Lauren. From recognizing Kanika’s tendency to minimize her own pain to helping the couple navigate the complexities of breastfeeding, Lauren provided exactly what they didn’t know they needed. “Lauren heard us and didn’t have any biases except for making sure the baby was healthy and we were comfortable,” Kanika says.

When donors support our nurses they’re supporting new families like Kanika, Tyler and Rami, too.

Nearly two-thirds of nurses under 35 intend to leave the profession or are considering it. At a time when hospitals everywhere are already struggling to staff their units, that statistic is a stark reminder that retaining talented nurses is just as important as recruiting them.

In 2015 Amanda Hillas, MN, RN, recognized an opportunity to hold on to highly qualified (but potentially unsatisfied) Providence Swedish nurses by helping them explore other roles within the hospital. Following a brief pilot, she officially rolled out the Explorative Learning Program (ELP) in 2016, through which union nurses can use their continuing education funds to shadow a nurse on another unit.

After a two-year pause for COVID, Amanda was excited to relaunch ELP this spring. And she already has ideas for how—with the help of philanthropy—she can expand it to both include nonunion nurses and spread the word about ELP’s advantages to catch more burned-out nurses before it’s too late. “These are highly motivated nurses who care about their career,” Amanda says. “We want to do everything we can to make sure they continue it with us.”
Righting the (leader)ship

Experienced nurses are retiring in record numbers. We have a plan for that.

Nearly half of our nation’s nurses are at least 50. When they retire, they’ll take decades of experience and expertise with them, exacerbating a nursing shortage predicted to only intensify over the next decade. That includes nurse managers, who are essential to providing the highest level of care to our patients.

Not only do they oversee patient care and coordinate nursing team schedules, but they also manage finances and step into clinical duties when needed. The unique blend of skills required—including business know-how—means positions are hard to fill. “Nurse managers are the CEOs of their patient care departments,” says Regional Chief Nursing Officer Kristy Carrington, MBA, RN, BSN. “They must inspire and motivate their nurses to achieve clinical excellence while running the daily operations of complex care environments.”

Administrative fellow Elle Busch, who began her career at Providence Swedish in July 2021, saw firsthand the problems caused by open nurse manager positions. Travelling nurses would fill in for a few months at a time, but at a premium. And the frequent transitions meant that nursing teams had to keep starting over with new leadership at a time when COVID-19 was already straining the system. Luckily, Elle also saw a solution.

Fresh from getting her master’s degree in hospital administration and full of ideas, Elle realized we could train the next generation of nursing leaders the same way she was getting trained: with a comprehensive one-year fellowship. And with support from donors like you, this idea is now a reality.

Our hospitals are filled with exceptional nurses, including true leaders who have shined during the challenges of the past few years. The supervisors who have seen their hard work and potential now have the option to nominate them for our Nursing Administrative Fellowship.

As they tackle projects and sit in on meetings, they’ll have Kristy and other Providence Swedish leaders as mentors. After completing the fellowship, these nurses, who are already experts at patient care, will be better equipped to handle the challenges of budgeting, hiring and problem solving because they’ll gain a larger perspective on hospital operations, finance, strategy and human resources.

Elle’s mentors gave her “a safe space to think out loud and brainstorm how to approach projects and goals.” This model will not only give nurse fellows the tools they need to succeed, but also connections that will serve them well as they continue in their career in nursing leadership at Providence Swedish. “Growing our own leaders allows us to continue developing excellence in nursing from within, while preserving our culture and values through future generations of leaders,” says Kristy. “This gives our patients greater consistency in their care and experience with us as their health care provider.”

Our first nurse administrative fellow could be leading a team as a nurse manager as soon as 2023.

Philanthropy is helping us train the nursing leaders of tomorrow.
Tending to trauma

How a dedicated nurse is healing thanks to a donor-supported workshop.

Every day, Providence Swedish nurses go above and beyond for our patients and their family. This was especially true in the first wave of the COVID-19 pandemic, during which many nurses from units across our hospitals banded together to care for the extremely sick patients arriving at our doors. But it wasn’t without personal cost, and nurses continue to deal with burnout and trauma from their experiences on the frontlines.

We’re committed to taking care of our nurses, just like they care for our patients. Since 2021, philanthropy has helped us host one-day workshops designed to help nurses process and deal with that trauma. Nurses learn the science behind trauma along with strategies for post-traumatic growth and healing. They also have the chance to talk about their feelings and build community in small groups, something many have missed since COVID-19 policies have limited gatherings.

We asked Cy Soliman, RN, BSN, CMSRN, a nurse who attended one of our first trauma workshops last spring, about her experience and how she’s doing now.

How long have you been with Providence Swedish and what does your day-to-day work look like?
I’ve been at Providence Swedish since 2016, working as a floor nurse at the Swedish Orthopedic Institute. I care for patients after they’ve had orthopedic surgery like joint replacements or spine surgery.

How did that change during the first wave of COVID-19?
When elective surgeries were paused my unit was briefly closed. Then it reopened as a COVID-19 unit to accommodate the large influx of patients. During that time, it felt like my fellow nurses and I didn’t have a home, in the sense that we were filling in wherever we were needed to care for patients with COVID-19.

It was difficult because we didn’t know a lot about COVID-19 and the guidelines were always changing. For example, with personal protective

Cy Soliman, RN
equipment we’d have one type of mask and then hear it wasn’t the right kind. We were scared for our own health. I remember thinking, “Oh my god, I’m going to bring this home and expose my family.” And with no visitors, we were the only link between patients and their worried loved ones. We had an iPad to video call relatives, sometimes while a patient was unconscious and not doing well. It was very emotional.

During that time, a lot of people didn’t believe that COVID-19 was real. That was so frustrating to hear right after losing patients—and we were losing them right and left.

**Why did you decide to attend the trauma workshop?**
A bunch of us who had all been through the same experiences caring for COVID-19 patients ended up going. We were all in the same boat and could be strong for each other, but this workshop gave us a chance to really talk through some of the tough things we’d seen.

**What was the most valuable part of the workshop for you?**
Having a safe space to talk about our experiences, away from the busyness of our work, was valuable, and hearing that it’s okay to feel what we’re feeling. First, you have to acknowledge what you’re seeing and feeling, and then understand how you can best process trauma. It’s different for everyone. I felt very supported and was able to approach my work in a different mindset after attending.

I can’t say it’s a one-time-thing that solved all my problems, but it’s really helped with the burnout and fatigue. Finding a different role within nursing that wasn’t at the bedside has crossed my mind over the past two years, but I’m still here.

**How are you feeling now?**
It’s not a secret that a lot of us nurses are struggling, even beyond the strain COVID-19 has put on hospitals. Patients are getting sicker and requiring more complex care. I wouldn’t hesitate to go to the workshop again, but I’m so thankful to have had the opportunity to participate. This kind of support is so necessary for nurses to keep going and work through stress and burnout. You don’t know how much you need it until you’re there.

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**EVIDENCE-BASED PRACTICE COMMITTEE**

The Evidence-based Practice Council equips our nurses to provide safe, high-quality care by soliciting their questions about best practices, meeting to review current literature and consider multidisciplinary perspectives, and sharing their findings with the entire staff. The council, which is made up of practicing nurses from a variety of specialties who volunteer their time, produces recommendations that inform and empower our nurses to provide excellent, evidence-based care.

- Preventing surgical site infections
- Phenobarbital treatment for alcohol withdrawal
- Guiding principles for palliative care
- Innovative monitoring to detect respiratory compromise in high-risk, acute care patients

**THE EBPC COMPLETED 29 RECOMMENDATIONS FOR PATIENT CARE IN 2021, ON A RANGE OF TOPICS.**
Thank you for investing in the health and well-being of our community.

To learn more about your impact on Providence Swedish nursing, please contact:

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