Warm Greetings From Bonnie Fryzlewicz, Vice President of Patient Care and Chief Nursing Officer

When I first came to Seattle Children’s as a travel nurse in 1990, I instantly knew there was something truly special about this place. Thirty years later, I still get that same feeling when I come to work each day.

Nurses — our largest workforce — truly embody Seattle Children’s mission, vision and values in every interaction with patients, families and each other. They are compassionate and continually demonstrate their integrity and commitment to caring for the diverse needs of children in our region.

I’m also constantly impressed by the leadership qualities demonstrated by nurses at all levels. Through strong communication and collaboration with teams across Seattle Children’s, nurses have showcased innovative ideas that are leading to better patient outcomes.

Over the past year, we’ve witnessed this through the involvement of nurses in the design of our new electronic health record (EHR) system with Epic and on projects to prevent central line-associated bloodstream infections — the most common type of hospital-acquired infections in pediatric facilities. Read pages 4 and 5, as well as pages 8 and 9 to learn more about these efforts.

In this report, you will also:

• Learn about our new nursing strategic plan goals, which align with and support our organizational strategic plan. These goals were developed based on more than 2,400 ideas submitted by nurses across Seattle Children’s.

• Discover ways we are creating a healthier work environment for nurses by supporting uninterrupted meal and rest breaks and minimizing overtime.

• Find out how our transport team has mobilized to meet the needs of even more children across our region.

I’m so proud of how everyone continues to come together to create a supportive environment where we can all do our best work. This is truly excellence in action!

With great respect and appreciation,

Bonnie Fryzlewicz

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Seattle Children’s
Nursing by the Numbers

140 areas, program and departments supported by nurses

2,202 nurses

280 Nurses involved in house-wide shared governance
  *Supported by Nursing Practice, Professional Development and Innovation (NPPDI) leaders

432 Nurses involved in unit-based shared governance
  *Supported by unit-based nurse leaders

254 nurses who volunteered their expertise, both domestically and internationally

48.82% Specialty certification rate
  *Higher than the national average

31 hold a leadership position in a professional organization

260 advanced practice providers

92 poster and podium presentations

33 publications (papers or book chapter)

Nurses shared innovative projects and research on the local and national stage

*Based on responses to the 2019 Nursing Professional Profile
Nurses Lead Efforts to Zero in on CLABSI

Ensuring patients receive the safest care possible — free of infection — is a commitment Seattle Children’s nurses take very seriously.

In fiscal year 2019 (FY19), Seattle Children’s annual non-mucosal barrier injury (non-MBI) central line-associated bloodstream infection (CLABSI) rate was the lowest since 2014 — 1.13 per 1,000 line days — representing a 14% improvement from the previous year.

“We won’t be satisfied until our rate is zero and stays that way permanently,” says Debra Ridling, senior director and associate chief nurse of Clinical Practice and Research, and co-chair of the CLABSI Oversight Committee.

From serving as CLABSI Champions to helping change policies to improving the cleanliness of the patient care environment, nurses are leading efforts to make care safer.

“We love getting to know the ‘why’ behind some of the interventions we do as bedside nurses,” says Wang. “We try to prevent harm to all of our patients. Learning more about what increases the risk of patient harm and educating my peers has opened my eyes to what nursing quality improvement work can do.”

New structure and focus
Despite efforts to improve the CLABSI rate, Seattle Children’s rate had been above the national average for several years. Ridling and Dr. Danielle Zerr, Seattle Children’s medical director of Infection Prevention, joined forces to try to change that. In fall 2018, they formed the CLABSI Oversight Committee, which includes nursing and physician leaders who help pilot new interventions, drive improvements and empower clinical leaders across every department that cares for children with central lines to focus on CLABSI-reduction efforts.

In 2019, 42 CLABSI Champions conducted more than 3,400 observations.

Simeng Wang, registered nurse on the Medical Unit, serves as a CLABSI Champion. In that role, she not only conducts the observations, she also provides education to her peers and patient families.

“I love getting to know the ‘why’ behind some of the interventions we do as bedside nurses,” says Wang. “We try to prevent harm to all of our patients. Learning more about what increases the risk of patient harm and educating my peers has opened my eyes to what nursing quality improvement work can do.”

A team of experts
When Megan Stimpson stepped into her new role as a clinical nurse specialist on the Vascular Access Service (VAS) in mid-2018, she began reviewing all policies and procedures that addressed how nurses work with central lines to ensure they were in alignment and based on best practices. She took her findings and developed new policies such as the use of chlorhexidine impregnated dressings, no longer using heparin-containing solutions to lock central lines for short periods of time, a new requirement when nurses repair broken central lines, and others.

Additionally, VAS nurses began rounding on all patients with a central line during the night shift at least once a week as part of a pilot program to offer an extra layer of safety. VAS nurses have expertise in managing peripheral IVs and caring for central lines.
Caring for our smallest patients
In the Neonatal Intensive Care Unit (NICU), a team of clinical nurses worked together over the past year to introduce a new sterile process for full central line tubing changes, which occur at least every 96 hours. Nurses put on sterile gowns, masks, hats, gloves and use a sterile drape on the work surface when changing the lines.

To reduce the risk of infection, the team also performs special bathing practices for babies prior to them getting a line placed or going to the operating room. Additionally, the NICU now requires all staff members to wash their hands with soap and water for 30 seconds at the start of their shift, and has a policy that sets a standard for all care team members to not have any clothing or jewelry below their elbows. All NICU staff members also use a UV light machine to clean their phones at the start of each shift.

Back to basics
Hector Valdiva, clinical nurse specialist in the Pediatric Intensive Care Unit (PICU), and other team members introduced a new requirement last year that inpatient nurses wipe down at least four high-touch areas in patient rooms at least once during each 12-hour shift. The high-touch areas — bed rails, IV pumps, monitors and the computer on wheels — have a high risk of carrying organisms that may lead to an infection.

Since the majority of patients with cancer require a central line, the Cancer Care Unit rolled out a new process in September 2019 to move patients to a new room every 30 days to improve the cleanliness of the patient care environment.

“Families who are here a long time accumulate a lot of stuff in their room and it’s hard to get a really thorough clean,” says Caitlin Siegfried, nurse consultant for unit-based clinical quality on the Cancer Care Unit. “What we’ve learned is we don’t have to do anything really fancy to try to reduce infections. It’s about getting back to the basics with good patient hygiene and good cleanliness around the room.”

2019 CLABSI Prevention Facts and Stats
- Average number of patients with a central line at Seattle Children’s: Nearly 100 at any given time
- Central line days in FY19: About 37,000 central line days, which is the number of days a central line is in place for patients in Seattle Children’s inpatient units.
- Nurses participating in CLABSI-prevention initiatives: About 1,500
- CLABSI Champions: 42
- Observations by CLABSI Champions: More than 3,400
About House Bill 1155

On Jan. 1, 2020, House Bill 1155 took effect. Key changes for Seattle Children's nurses include:

- Nurses must receive uninterrupted, prescheduled meal and rest breaks during each work period. There are a few exceptions in unforeseeable emergent circumstances.
- All overtime will be voluntary except in unforeseeable emergent circumstances. This means there is no longer required on-call or mandatory overtime in most settings.
Modeling good behaviors
Like DeKerlegand, Rhiann McDonald is accustomed to change. She has worked as a registered nurse on the PBMU her whole five-year nursing career. As co-lead of her unit’s staffing committee, she worked with her fellow nurses to devise a plan for scheduling — and taking — breaks. This was a practice the PBMU had been working on prior to the new law.

McDonald believes nurses need to model good behaviors so patients make healthy choices in their own lives.

“We are trying to teach kids self-care by taking care of their minds and bodies,” she says. “If we’re not doing it ourselves, then we aren’t putting our best selves forward.”

Trusting your peers
DeKerlegand has been a nurse at Seattle Children’s for 16 years. No matter how much she compartmentalizes in order to care for sick children and their families, she says the work can be emotionally and physically draining.

A couple of years ago while working in the CICU, she recalls the moment when she heard a patient’s mom make a call to her mother to let her know she was going to have to remove her child from life support. Although she’s dealt with many similar instances during her career, this case really stuck with her.

“It was so gut-wrenching to hear her almost revert back to a child when talking to her mom,” says DeKerlegand, who recalls needing to take a break after hearing the conversation. “No matter where you are at Seattle Children’s, it can be a very emotional place. You need breaks to clear your mind.”

By taking a break, she says her peers are showing that they trust each other to cover their workload.

“It’s hard to give up some control, but it’s not about giving anything up,” she says. “In my opinion, my fellow nurses are trained just as well as I am. If families I’m caring for need help and I’m not right there, I trust that my co-workers will help them.”

The team in the CICU implemented “break buddies” a couple of years ago so nurses knew who would cover them during each shift. In fall 2019, they made the “break buddies” system more visible by writing the name of their buddy and their prescheduled break times on a white board outside of each patient room. The process is going smoothly so far, says DeKerlegand.

“It’s not just a law; it’s for our health,” she says. “We need to take time for ourselves and log out of everything for a few minutes to clear our heads and feel refreshed. It makes a difference.”
Nurses Bring Unique Perspective to Design of Electronic Health Record

Although Adam Turner is relatively new to nursing, his fresh perspective and firsthand glimpse into the issues clinical nurses tackle on a daily basis have proven beneficial to the development of Seattle Children’s new single, integrated electronic health record (EHR) system through Epic over the last year.

He is one of more than 150 Seattle Children’s nurses who are part of the multidisciplinary team helping design the new system, which will go live in May 2020. Epic is expected to improve the patient family experience, and the quality and safety of the research and care provided at Seattle Children’s by streamlining information sharing and processes.

“We are trying to create more efficiencies in our daily work so we have more time with our patients,” says Turner, who has served as a registered nurse on Seattle Children’s Vascular Access Service and the Acute Care Float Pool for about two years. “To do this, it’s really important to have the people using the system influencing the changes.”

Here’s a snapshot of a few of the ways nurses offered their expertise to the Epic project in 2019.

Efficiencies at the bedside
Austin Curry, registered nurse on the Pediatric Intensive Care Unit, and Turner represent their units as subject matter experts on the Epic project.

Last year, their workgroup offered input to help customize an avatar in Epic, which is an electronic illustration of a child’s body that shows the location of lines, drains and airways for easier documentation. Using the avatar, the care team will also be able to see if a patient has a wound that requires assessment or a dressing change.

“Tools like this promote patient safety and help organize the data much more efficiently.”

Efficiencies in the clinic
Nurses from Seattle Children’s ambulatory clinics also played an integral role in the Epic project over the past year because of their innate ability to examine how changes will impact care across the patient continuum, says Danica Pytte, senior director and associate chief nurse for the ambulatory division.

Ambulatory nurses are masters at care coordination behind the scenes. They often speak with families by phone to facilitate and manage discussions with the provider about a patient’s symptoms or medications, and complete countless school forms, letters and notes to outside providers.

Longtime nurses Andrea Bakke and Dawn Albin serve as nurse informaticists for the ambulatory clinics. They examine how all aspects of Epic will impact the ambulatory care team and help ensure documentation remains standardized across all medical and surgical specialties.

Whitney Hull, nurse manager at Seattle Children’s South Clinic in Federal Way, represents the nurses at regional clinics across Washington, Alaska, Montana and Idaho by participating in various Epic workgroups. She ensures workflows meet the needs of the entire care team, including nurses.
Since nurses in the regional clinics provide care across multiple specialties — 18 in Federal Way alone — this poses challenges when accessing the information they need electronically. Hull worked collaboratively with Epic analysts to define a centralized location within the system where nurses can find templates for notes, letters and school forms for all specialties.

She also worked on the In Basket tool — one of the new secure message systems within Epic — which will receive and route messages sent by families through MyChart to the correct care team. This will simplify communication at all clinics, including the regional sites. The In Basket tool will be used across much of the organization, and will streamline communication with families, and between providers, departments and locations.

“I’m hoping some of the back-office work we do is going to be easier because we will be able to find the things we need more efficiently in the system,” says Albin, registered nurse in the Surgery Clinic at Seattle Children’s hospital campus.

Caring for the whole child
In late 2019, nurses from Seattle Children’s Odessa Brown Children’s Clinic (OBCC) began working on a pilot project that will use the Social Determinants of Health module within Epic’s Healthy Planet tool.

Through the module, families will be asked questions that address the social and environmental factors that may impact their child’s health, like housing, safety, education, nutrition and other basic needs. By taking time to understand families more holistically, the team at OBCC can address all patient needs — beyond just what brought them in for the clinic visit.

Creating one source of truth
Mary Field is the clinical practice manager on the Cancer Care Unit but also serves as the divisional lead for her department, which includes the Cancer and Blood Disorders Center and related research work. The role of divisional lead is seldom held by nurses in other facilities adopting Epic.

“I am part administrator, part informaticist, part project manager and part nurse, which gives me a unique perspective,” says Field. “I am bringing my intimate knowledge of what patients will require from an inpatient nurse, an outpatient nurse, a care coordinator and a research nurse to make sure I am representing all of those stakeholder groups throughout the Epic project.”

Field and the team have worked to move chemotherapy orders from paper to the electronic system, which will give nurses in inpatient and ambulatory clinic settings the ability to see the patient’s entire treatment plan.

Epic will also effectively integrate clinical care and research across Seattle Children’s by providing greater visibility into research protocols, orders, and charting for clinical and research staff members.

“As much as possible, we are putting all of the information into one system so there will be one source of truth for the patient and will prevent a lot of rework,” says Field.

Ongoing work
Carol Shade, director of Nursing Informatics, has witnessed the commitment of nurses to doing the right thing for patients, families and their peers throughout the Epic journey.

“I’ve been amazed by the innovative ideas from nurses and how they always keep patient safety at the forefront,” says Shade.

The work will not stop at go-live. Nurses will continue to serve on the clinical informatics shared governance council and the multidisciplinary team to look at optimizing Epic to further meet the needs of patients and staff members.

Curry looks forward to May when he and his fellow nurses can begin using the new Epic.

“I’m excited for everyone to use the system,” he says. “I think it’s going to make our lives better at work.”

Nurse Involvement in Epic — 2019

- Nurse informaticists: 9
- Nursing subject matter experts (SMEs): More than 150
- Nurses and nurse leaders involved in various Epic workgroups: More than 200
- Hours nurses spent on Epic projects: Around 1,000 hours on average per week
Leadership and Governance

Planning for the Future: A Look at Seattle Children’s New Nursing Strategic Plan

Stephanie Easley’s desire to go into pediatric nursing began at a young age while witnessing the in-home care her best friend’s sister received to help her breathe.

“When I was around 10, I remember watching the nurses and asking them a lot of questions,” says Easley, registered nurse on the Medical Unit. “That put a bug in my ear that this would be a cool career path and I just stuck with it.”

She is glad she did.

Easley has been a nurse at Seattle Children’s for about seven years. In that time, she has not only provided clinical care to patients, she has also served on several unit-based and housewide shared governance councils. In January, she completed her stint as chair of Nursing Assembly.

“There’s something unique about shared governance because you have a 50/50 partnership with leadership to initiate change,” she says. “You have the voice of the nurse who has the closest relationship to the patients and families giving their opinion on how things should best be done.”

In October 2019, Easley was one of about 30 clinical nurses, nursing leaders and advanced practice providers (APPs) who gathered at a retreat to identify goals for the 2020-2022 Nursing Strategic Plan based on the ideas submitted by nurses across the organization through an online survey and in-person meetings.

From 2,400 ideas to nine solid goals

Developing the new strategic plan was a months-long process. Debra Ridling, senior director and associate chief nurse of Nursing Practice and Research, read all of the nearly 2,400 responses and organized the ideas into 60 different categories. Retention, staffing, education/training/competency, autonomy/top of scope of practice, and collaboration were the five most common categories identified.

The retreat last fall included the housewide shared governance council chairs, shared governance leadership mentors, Nurse Executive Practice Council members and co-chairs of the newly formed APP Council Steering Committee. The team narrowed the list of ideas down to nine goals that promote the value of nursing, align with the organization’s strategic plan, and demonstrate how nursing is advancing Seattle Children’s mission, vision and values.

Like Easley, Natalie Rejto was happy to offer her ideas and expertise at the retreat. She is a registered nurse on the Post-Anesthesia Care Unit (PACU) and the new chair of Nursing Assembly.

“It was extremely important that every nurse was involved and able to provide input and feedback,” says Rejto. “No matter where we work, we all have really valuable perspectives.”

View the graphic on page 11 to learn more about the nine goals identified in the 2020-2022 Nursing Strategic Plan.

Next steps

Some work has already begun to address the ambitious goals laid out in the strategic plan, with more to come in the months ahead that will involve nurses at all levels across Seattle Children’s.

Easley and Rejto are both excited to learn more about the mental health goal, which aims to increase a nurse’s ability to care for the mental health needs of patients.
“We cannot solely care for our patients’ medical diagnoses; we have to take care of the whole patient,” says Easley. “Since mental health issues are increasing among our patients, this goal shows that the organization hears our concerns and is going to try to help us be the best nurses we can be.”

Ridling was amazed by the responses from nurses throughout the strategic planning process and looks forward to seeing their ideas come to life.

“We nurses do amazing work every day and it is so important that we all take time to listen to each other’s ideas, embrace what makes us unique and have access to the tools we need to further our professional development,” says Ridling. “We have translated many of the ideas from our nurses into strategic goals that we hope will improve the experiences of patients, families and our entire workforce.”

### Nursing Strategic Plan 2020-2022

**Seattle Children’s Mission:**
We provide hope, care and cures to help every child live the healthiest and most fulfilling life possible.

**Connecting Care closer to home**
Transform our ecosystem of care to deliver care to children across the continuum

**Tackling the biggest challenges in children’s Health**
Impact the most critical health need of our community - children’s mental health

**Nursing Mission Goal**
**Care Across the Continuum:**
We will improve the continuity of care across the healthcare settings where our patients receive care – in the community, hospital and ambulatory settings.

**Nursing Mission Goal**
**Mental Health:**
We will increase our ability to care for our patients’ mental health needs.

Enabled By:

**Our People and Culture - Nursing Goals**

- **Equity, Diversity and Inclusion:**
  We will value the uniqueness of each patient, family member, and colleague, and work to meet their individual needs.

- **Retention:**
  We will create a work environment and provide opportunities where nurses feel valued and supported throughout their careers.

- **Workforce Development:**
  We will develop innovative approaches for staffing and care models that optimize nursing scope of practice to provide patients and families with excellent care.

- **Staff Support/Wellness:**
  We will create and maintain a safe and healthy work environment.

- **Collaboration:**
  We will empower nurses and colleagues to be valuable members of the interprofessional care team by recognizing the contributions each individual brings to improve patient outcomes.

- **Professional Development:**
  We will develop programs and provide resources that foster development of each nurse to reach their full potential throughout their career.

**Improvement and Innovation - Nursing Goals**

- **Research:**
  We will become the best pediatric nursing research program.

**Additional Organizational Objectives and Strat Plan Enablers:**

- **Delivering Hope for the most complex conditions**
  Create a world class destination center for pediatric specialty care

- **Discovering the next era of Cures**
  Discover and deliver the next generation of cures

- **Connected Technology**
- **Buildings of the Future**
- **Gracious Community**
- **Financial Sustainability**
Development of Nurses

Answering the Call: Transport Team Steps Up Efforts to Care for More Children Across the Region

A lot has changed since Judith Rollins first began working as a neonatal transport nurse at Seattle Children’s nearly 25 years ago.

“I had to run the ventilator by myself and carry a big metal tackle box of supplies that left bruises on my legs,” says Rollins, Critical Care Transport Service nurse at Seattle Children’s. “We’ve come a long way.”

The transport team operated out of the Neonatal Intensive Care Unit (NICU) until May 2018 when it became the Critical Care Transport Service. The service features a highly trained team of nurses, respiratory care therapists and emergency medical technicians (EMTs) dedicated to the safe transfer of patients requiring critical or specialty care services at Seattle Children’s or another facility in Western Washington.

“I feel so spoiled now because we have such an amazing team of nurses, respiratory care therapists and EMTs who work seamlessly together to provide the best care to our patients,” says Rollins.

Mobilizing to meet the community’s needs

When Chris Baker joined Seattle Children’s in June 2017, it was with the intent to start a new transport department to reach children of all ages in the Puget Sound region. Within 11 months, the Critical Care Transport Service was born.

Creating the dedicated service was no small feat.

Initially, the team featured Baker, three nurses, 11 respiratory care therapists and four EMTs. The team now has nearly 40 members — about half of them are registered nurses. Respiratory care therapists and EMTs round out the team.

In addition to neonatal patients — babies younger than 30 days old — the team began transporting children of all ages last year.

“We were already caring for neonatal patients, but there wasn’t a specialized service to transport all other pediatric patients in our area, leaving a big portion of our population vulnerable when needing to get to a higher level of care,” says Baker, clinical manager of the service. “Now, we are bringing the same level of care we provide at the bedside at Seattle Children’s out into the community to even more patients.”

The transport team also began coordinating and providing clinical care on Airlift Northwest flights for neonatal patients last year.
Training days
Growing the program’s footprint in a short period of time required significant and ongoing training by all members of the team. This included two days of competency trainings in 2019 that involved learning advanced skills and conducting hands-on simulations. In 2020, the team will participate in three days of competency trainings to continue fine-tuning their skills.

Transport team members like Rollins and Nicki Nikodym who came from the NICU-based transport service had to brush up on their competencies related to treating patients of all ages, not just newborns.

“Neonates tend to have about 10 basic disease processes, but there are countless conditions seen in pediatric patients,” says Nikodym, Critical Care Transport Service nurse.

To further develop their skills, members of the transport service received training in Seattle Children’s Pediatric Intensive Care Unit and Emergency Department. They also discuss a variety of topics during their monthly meetings.

“What has been so incredible is how each member of the team has been cross-trained so everyone has learned transport skills rather than just nursing skills or respiratory therapy skills,” says Nikodym. “Our team works so cohesively because it is just that — a team.”

Lending their expertise
Building a safe and efficient transport service from the ground up required the leadership and expertise of all team members.

“It’s been inspiring to witness the development of this team and each person’s contribution to support the greater plan,” says Deb Lester, senior director and associate chief nursing officer for Shared Services, Critical Care Transport, Dialysis and Respiratory Care. “They all think critically and have helped us develop a successful service that is as efficient as possible while always ensuring the safety of the children in our care. It is truly remarkable.”

Nikodym joined Seattle Children’s in 2014 because of her interest in becoming a transport nurse. She has not been disappointed.

“This is the best job I’ve ever had,” she says. “There’s a certain feeling that never gets old when you step into these hospitals. You are from Seattle Children’s and that means something in this area.”

Making a Difference
Here are a few ways nurses have partnered with respiratory care therapists and EMTs over the last year to create an organized and efficient transport service that keeps patient safety top of mind.

• Quality checks: Nikodym and Ruth Barker, a respiratory care therapist, review the records of all transport calls the team responds to in order to ensure compliance with benchmarks — and to praise the great work of their peers.

• Ambulance design: A committee of nurses, respiratory care therapists and EMTs designed two new ambulances that feature flexible spaces to house current and future equipment and supply needs. This work was led by two nurses — Rollins and Tristan Frolich — and Bob Stroud, an EMT.

• Supply organization: Joan Mahan, a transport nurse, worked with Austin Smith, a respiratory care therapist, and Judson Mead, an EMT, to reorganize the team’s supplies to improve efficiency.

• Electronic reference materials: Rather than carrying around a heavy binder, Nikodym updated reference materials and worked with Seattle Children’s Continuous Improvement and Innovation Department to upload them to an app that team members can easily access on their phones.

• Out-the-door times: The whole transport team helped redesign the process for mobilizing the transport service, cutting down the time it takes the transport team to get out the door when a call comes in from 30 minutes to about eight minutes.
Awards and Honors

Seattle Children’s is proud to have earned awards and honors that recognize the quality of care we give to our patients and families, as well as the supportive work environment we provide for our nurses and other healthcare professionals.

Seattle Children’s is the only children’s hospital in the Northwest to receive **Magnet recognition**, an honor bestowed by the American Nurses Credentialing Center. Our program has been recognized as a Magnet organization for excellence in nursing services since 2008.

**In 2019, U.S. News & World Report** named Seattle Children’s to its Honor Roll of the nation’s best children’s hospitals. Seattle Children’s is the top-ranked pediatric facility in the Northwest and No. 10 nationwide. U.S. News & World Report has recognized Seattle Children’s as a top children’s hospital for more than 25 years.

**Level I Children’s Surgery Center**
The American College of Surgeons (ACS) has verified Seattle Children’s as a **Level I Children’s Surgery Center**. Seattle Children’s is the only children’s hospital in Washington state and one of only 21 in the United States to achieve the highest level of certification for pediatric hospital surgical programs.

**Heart Center Accreditation**
Seattle Children’s Heart Center has been designated as an Accredited Center of Care by Children’s Cardiomyopathy Foundation. This program recognizes medical centers that provide high-quality cardiac care and specialized disease management to children with cardiomyopathy.

**The ELSO Excellence in Life Support Award** recognizes Extracorporeal Life Support (ECLS) programs worldwide that distinguish themselves by having processes, procedures and systems in place that promote excellence and exceptional care in extracorporeal membrane oxygenation.

**Forbes Media** has ranked Seattle Children’s No. 79 on its “America’s Best Large Employers” list for 2019. Seattle Children’s is the highest-ranking children’s hospital, the highest-ranking West Coast hospital, and is ranked the third-highest among organizations in the Healthcare and Social category.

**Seattle Children’s Cardiac Intensive Care Unit (CICU) and Pediatric Intensive Care Unit (PICU) are recipients of the Beacon Award for Excellence by the American Association of Critical Care Nurses. This award signifies a positive and supportive work environment with greater collaboration between colleagues and leaders, higher morale and lower turnover.**

**Resuscitation Silver Plus**
Seattle Children’s earned the 2019 Get with the Guidelines — Resuscitation Silver Plus Quality Achievement Award for pediatric and neonatal patients from the American Heart Association for our commitment and success in implementing a high standard of resuscitation care.

**AMAM Stage 7**
Seattle Children’s has achieved the highest level of achievement for Analytics Adoption Model for Analytics Maturity (AMAM) designated by Healthcare Information and Management Systems Society. Less than 3% of organizations completing the AMAM survey achieve Stage 7.

**Seattle Children’s Emergency Department was granted the Lantern Award from the Emergency Nurses Association. This award is given to an emergency department that exemplifies exceptional practice and innovative performance in the core areas of leadership, practice, education, advocacy and research.**

**Becker’s Hospital Review**
Becker’s Hospital Review placed Seattle Children’s on its list of 150 Great Places to Work in Healthcare. The organizations on the list were chosen for their benefits and career growth opportunities, for encouraging professional development and leadership growth from within, and offering unique wellness benefits to ensure employees strike a positive work-life balance.
Awards and Honors

Seattle Children's is proud to honor individual nurses who have earned awards and recognition for the care they give to our patients and families. Congratulations!

March of Dimes
The March of Dimes honors nursing excellence each year by paying tribute to nurses who have a tremendous impact on patients and families. Congratulations to Seattle Children's nurses Carol Shade (category: Nursing Technology/Analytics) and Katie Gildenhar (category: Transitional Care Nursing).

Mary Hanna Memorial Journalism Award
Suzanne Donahue's evidence-based practice article, “Humidification of Blow-By Oxygen During Recovery of Postoperative Pediatric Patients: One Unit’s Journey,” earned second place in the Mary Hanna Memorial Journalism Award, Best Practice category. All contributors, including Robert DiBlasi and Karen Thomas, were recognized.

Jeri Eisman Fellowship Award
The American Respiratory Care Foundation has awarded Coral Ringer with the 2019 Jeri Eisman, RRT Professional Education Research Fellowship for her paper “Physiologic Effects of Nasal Aspiration and Nasopharyngeal Suctioning on Infants with Viral Bronchiolitis.” Rebecca Engberg and Robert DiBlasi are co-investigators.

DAISY
The DAISY award recognizes extraordinary nurses who go above and beyond to demonstrate care, compassion and dedication in their daily work.

• Marienel Arcangel, Medical Unit
• Naina Aus, Acute Care
• Karla Bell, Cancer Care Unit
• Samantha Boatman, Medical Unit
• Sarah Carter, Neonatal Intensive Care Unit
• Savannah Chatriand, Surgical Unit
• Christianne Cook, Surgical Unit
• Erica Dorey, Orthopedics and Sports Medicine
• Cheryl Egashira, Medical Unit
• Erin Etzkorn, Cancer Care Unit
• Bill Golden, Medical Unit
• Debbie Hennings, Surgical Unit
• Covey Hinzmann, Surgical Unit
• Jason Hopper Cruz, Post-Heart Transplant
• Celine Leduc, Pediatric Intensive Care Unit
• Sarah Mbone, Gastroenterology Clinic
• Kennon Moulton, Ambulatory Services
• Camila Pair, Surgical Unit
• Marvin Recolizodo, Rehabilitation Unit
• Erin Russell, Pediatric Intensive Care Unit
• Gretta Schwab, Neonatal Intensive Care Unit
• Lisa Taliaferro, Care Coordination
• Caroline Vietze, Neonatal Intensive Care Unit
• Brianna Williams, Rehabilitation Unit

Community Health Leadership Award
The Washington State Hospital Association (WSHA) honored Seattle Children's with the Community Health Leadership Award for the Zero Suicide Initiative. Recognition for the initiative included nurses Erika Miller (pictured above), Sara Fenstermacher, Christine Delos Reyes and Ellie McMahon.

David Fisher Award for Excellence in Safety
The 2019 team winner of the David Fisher Award for Excellence in Safety is the Trach Safe team, a multi-disciplinary group responsible for the Trach Safe Emergency Airway Management course. On the team, Leslie Elder and Julie Sharple represent nursing, with additional course coordination provided by Hai-Yen Tang and Jennifer Minhas.
Nurses Share Expertise on a Global Platform

Transforming children’s health for generations to come is a bold commitment that Seattle Children’s nurses have embraced wholeheartedly — and one they are not afraid to share with peers around the world.

In 2018, Seattle Children’s received Magnet designation by the American Nurses Credentialing Center for the third consecutive time — a designation that recognizes the talent, compassion, innovation and collaboration of nurses.

“As Magnet nurses, it is our duty to share what we know with others to ensure we are advancing the field of nursing,” says Debra Ridling, senior director and associate chief nurse of Clinical Practice and Research. “Over the past year, we’ve done just that on a national and international level.”

Nursing Now
Seattle Children’s nurses hosted a site visit in February 2019 with Baroness Mary Watkins and representatives from the University of Washington (UW) School of Nursing. Watkins is a British professor of nursing who is a leader in the Nursing Now global campaign aimed at improving health by raising the profile and status of nursing worldwide.

In collaboration with the World Health Organization and the International Council of Nurses, the Nursing Now campaign focuses on: sharing best nursing practices; increasing the number of nurses in leadership positions; making more investments in the nursing workforce; conducting research to determine where nurses can have the greatest impact; and involving nurses in health policy.

Future of Nursing
In August 2019, Seattle Children’s nurses also hosted a site visit with members of the Committee on the Future of Nursing 2030 — an initiative of the National Academy of Medicine. During the visit, nurses shared expertise in the areas of pediatric nursing research and the care of children with mental health needs.

Committee members were in Seattle to host a town hall meeting at the UW, which several Seattle Children’s nurses attended. The event was one of three town hall meetings held across the country to discuss ways to advance the nursing profession to create a culture of health, reduce health disparities, and improve the health and well-being of people across the United States.