

2025 -
2027

COMMUNITY HEALTH IMPROVEMENT PLAN



Providence Swedish Central Puget Sound

First Hill, Cherry Hill, Ballard and Issaquah
Campuses

King County, Washington

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EXECUTIVE SUMMARY

At Providence Swedish, we are committed to improving the health of the communities we serve. As a leading provider of primary and specialty care in the Puget Sound with more than a century of experience serving those in need, we are dedicated to improving community health and promoting health equity in King County and beyond.

Swedish hospitals and facilities collaborate with local nonprofits, social services and agencies, charitable foundations, and other like-minded organizations to conduct Community Health Needs Assessments (CHNA). The CHNA is an opportunity for us to engage the community every three years with the goal of better understanding community strengths and needs.

The results of the CHNA are used to guide efforts to address the needs of the community. Through a mixed-methods approach, using quantitative and qualitative data, the CHNA process relies on state and national public health data, listening sessions with community members, and other sources to identify the most pressing health needs.

Informed by the CHNA, we develop a Community Health Improvement Plan (CHIP), which outlines a strategic response to addressing prioritized needs. The following CHIP is in response to the 2024/2025 King County CHNA for Swedish First Hill, Cherry Hill, Ballard and Issaquah campuses and details programmatic commitments and investments designed to improve health and increase equitable access to quality care in King County.

Our commitment to improving the health of our community extends beyond patient care. Through community health improvement and strategic partnerships, health professions education and research, free, discounted and subsidized care, and other means of outreach, we commit to caring for those we serve through high-impact community benefit programs and investments.

INTRODUCTION

Who We Are

| | |
|--------------------|---|
| Our Mission | Improve the health and well-being of each person we serve |
| Our Vision | Health for a Better World |
| Our Values | Compassion, Justice, Excellence, Dignity, Integrity, Safety |

Swedish Health Services is the largest nonprofit health care provider in the greater Seattle area with five hospital campuses – First Hill, Cherry Hill, Ballard, Edmonds, and Issaquah – ambulatory care centers in Redmond and Mill Creek, and a network of more than 100 primary care and specialty clinics throughout the greater Puget Sound area. It is a regional referral center for leading-edge procedures, such as robotic-assisted surgery and personalized treatment in cardiovascular care, cancer care, neuroscience, orthopedics, high-risk obstetrics, pediatric specialties, organ transplantation and clinical research.

Swedish is affiliated with Providence, a national, not-for-profit Catholic health system comprising a diverse family of organizations and driven by a belief that health is a human right. With 51 hospitals, more than 1,000 physician clinics, senior services, supportive housing, and many other health and educational services, the health system and its partners employ more than 120,000 caregivers serving communities across seven states – Alaska, California, Montana, New Mexico, Oregon, Texas, and Washington – with system offices in Renton, Wash., and Irvine, Calif.

As a comprehensive health care organization, Providence is serving more people, advancing best practices, and continuing a more than 100-year tradition of serving the poor and vulnerable. Delivering services across seven states, Providence is committed to touching millions of more lives and enhancing the health of the American West to transform care for the next generation and beyond.

Our Commitment to Community

Swedish facilities across King County dedicate resources to improve the health and quality of life for the communities and people we serve. For more information, refer to the [Annual Report to our Washington Communities](#) and [Community Health Needs Assessments/Community Health Improvement Plans](#).

Health Equity and Social Determinants of Health

At Providence Swedish, we are committed to addressing the underlying and root causes of inequities and health disparities. We work to address not only the clinical factors that determine a person's length and quality of life, but also the social and economic dimensions, physical environment, and other factors that play a role in determining health outcomes. Addressing these factors includes leveraging community strengths and utilizing evidence-based and leading practices.

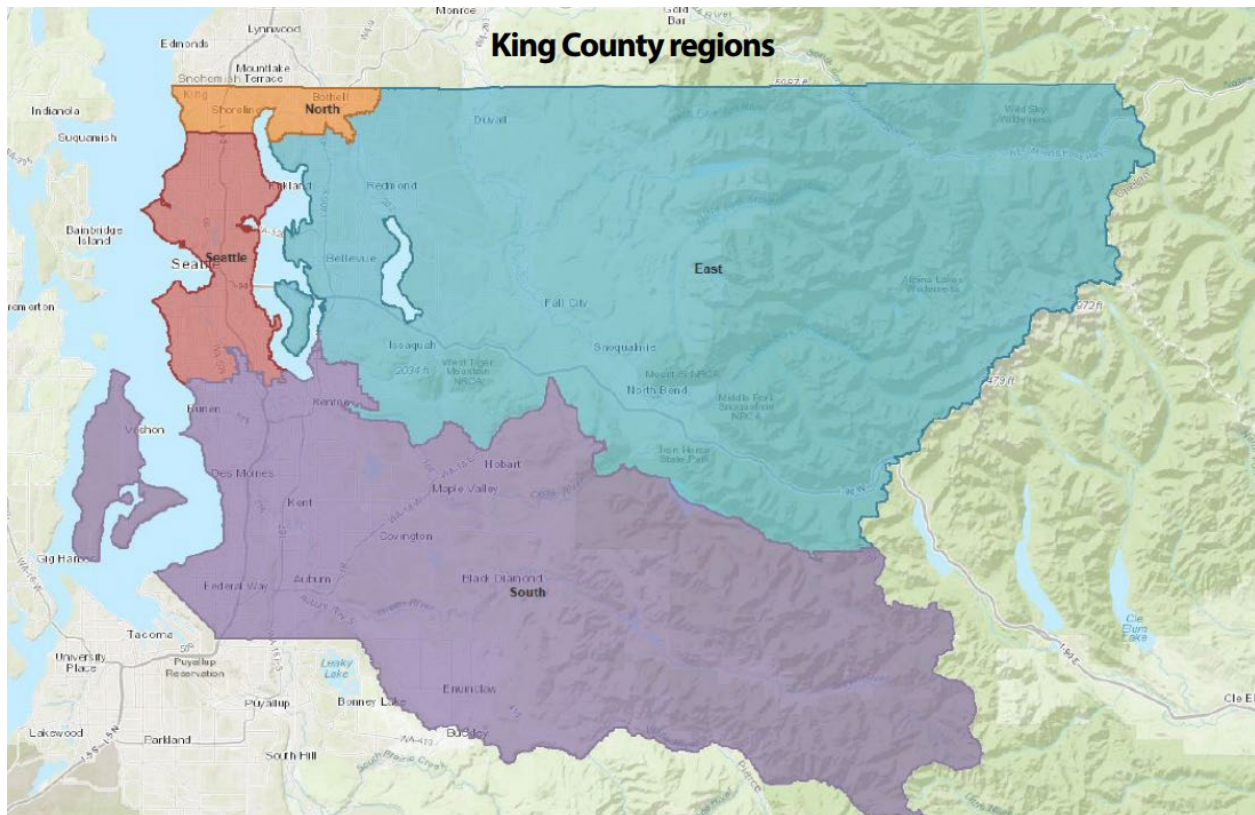
Financial Assistance Program

Our mission is to improve the health and well-being of each person we serve, regardless of ability to pay. We believe that no one should delay seeking needed medical care because they lack health insurance. Providence Swedish has a [Financial Assistance Program](#) (FAP) that provides free or discounted services to eligible patients.

OUR COMMUNITY

Description of Community Served

Providence Swedish’s Central Puget Sound service area includes King County hospitals, Swedish First Hill, Cherry Hill, Ballard and Issaquah. King County is the most populous county in Washington state, with continued population growth and increasing diversity. King County ranks 11th in the state for total land area and first in the state for population density. About 90 percent of King County’s population lives in the county’s 39 cities and towns, while about 246,000 residents live in unincorporated areas. The county is divided into four geographic regions: Seattle, North, South and East.



Community Demographics

POPULATION AND AGE DEMOGRAPHICS

In 2022, the King County population was 2,317,700. The Washington state population that year was 7,864,400. There was a positive net migration trend in King County between 2020-2022 with a gain of about 31,000 people. International migration remained a key component to the county’s population growth between 2020-2022, in line with other major metro counties around the country. King County was 4th in the nation for international net migration during this period, according to the Census Bureau, and the 13th most populous county overall in 2022.

POPULATION BY RACE AND ETHNICITY

The population of people of color in King County continues to rise. King County is now 53 percent white, compared to 57 percent in 2018. While the percentage of Native Hawaiian/Pacific Islander, American Indian/Alaska Native, Black and Hispanic residents has remained relatively stable, the Asian population experienced continued growth in King County from 18 percent of the total population in 2018 to 21 percent in 2022. Just over 10 percent of the Washington state population is Asian – much of which is concentrated in the Puget Sound region.

SOCIOECONOMIC INDICATORS

Table 1. Income indicators for central Puget Sound service area

| Indicator | King County |
|---|---|
| Income <200 percent of Federal Poverty Level (FPL) | Averaging data from 2017-2021, 17.9 percent of King County residents live in poverty or near poverty, with a household income less than 200 percent of the FPL. |
| Households that pay less than 50 percent of their income for housing costs | Averaging data from 2017-2021, 83.7 percent of King County households paid less than 50 percent of their household income for housing. |

Data Source: American Community Survey Public Use Microdata Sample (PUMS), Average: 2017-2021

Rapidly rising housing costs threaten housing stability for many King County residents. King County is experiencing a housing crisis of affordability and availability. Home prices far exceed national averages. The national median home price in 2021 was \$346,900. In March of 2021, the median King County home sold for \$824,997. Rental prices have also increased in several cities, further threatening housing stability. These issues especially impact low-income residents' ability to sustain safe housing and continue to meet their other financial responsibilities.

Data presented throughout these sections are pulled directed from the [2024/2025 King County CHNA](#), where full demographic and socioeconomic information and citations for the Central Puget Sound service area can be found.

COMMUNITY NEEDS ASSESSMENT PROCESS AND RESULTS

Summary of Community Needs Assessment Process and Results

Providence Swedish is a member of the King County Hospitals for a Healthier Community (HHC) collaborative, formed in 2012 to provide health care partners with a forum to collaboratively identify community needs, assets, resources and strategies to improve health and health equity for King County residents. Together with Public Health – Seattle & King County, members of the HCC jointly produce the King County CHNA. Swedish First Hill, Cherry Hill, Ballard and Issaquah campuses participate in this combined King County CHNA process.

For the 2024/2025 King County CHNA, HCC members identified, measured and prioritized community health needs using quantitative and qualitative data and through nine listening sessions with 72 adult participants from diverse backgrounds. These sessions, hosted by community-based organizations, gathered input on food access, mental health, climate change and health care challenges. Sessions were held in multiple languages with translation and interpretation support.

The CHNA describes emerging and ongoing needs of King County families and communities and builds on past community health frameworks and reports to shape priorities. Among the priorities elevated by King County communities, HCC members identified a core set of shared priorities to direct community benefit activities in the coming years:

- Health Care Access and Delivery (emphasizing mental and behavioral health for youth and adults)
- Equity and Social Determinants of Health
- Food Insecurity and Access
- Support for Children and Youth

The 2024/2025 King County CHNA is the fourth assessment conducted by HCC in collaboration with Public Health – Seattle & King County. It meets the Affordable Care Act (ACA) and Washington state requirement for nonprofit hospitals to conduct a CHNA every three years. Findings from these sessions are designed to inform hospitals and public health strategies to address disparities and improve community well-being.

More information on the collaborative and CHNA can be found in the [2024/2025 King County CHNA](#).

Prioritized Community Health Needs

Swedish First Hill, Cherry Hill, Ballard and Issaquah campuses will focus on two priority areas identified in the 2024/2025 King County CHNA to best leverage their capacity, expertise and resources for greatest impact:

HEALTH CARE ACCESS AND DELIVERY

(EMPHASIZING MENTAL AND BEHAVIORAL HEALTH FOR YOUTH AND ADULTS)

Needs across King County include more access to behavioral health services for youth and adults, screenings for chronic diseases, maternal health and health care coverage.

EQUITY AND SOCIAL DETERMINANTS OF HEALTH (SDOH)

Needs across King County include poverty and economic insecurity, unemployment and underemployment, language barriers, systemic racism and discrimination.

These priorities were chosen in consultation with the Health Equity, Justice and Social Responsibility Committee of the Swedish Health System Board of Trustees. More information on this process can be found on page 9.

Needs Beyond the Hospitals' Service Program

Providence Swedish is committed to improving the health of the communities we serve and investing in spaces where we can have the greatest impact. By leveraging our expertise and core competencies as health care providers, we can meaningfully contribute to high-impact solutions for expanded access to high-quality, equitable health care.

The following community health needs identified in the 2024/2025 King County CHNA will not be directly addressed, and an explanation is provided below:

- **Food insecurity and access:** As health care providers, Providence Swedish hospitals in King County do not directly address food insecurity and access to high-quality and culturally appropriate foods. Due to a lack of expertise to effectively address this need, the hospitals will continue to partner with organizations who specialize in expanding access to affordable and healthy food, as well as addressing the underlying factors that affect food access, such as poverty.
- **Support for children and youth:** As health care providers, Providence Swedish hospitals in King County do not directly address the specific issues affecting children and youth outlined in the 2024/2025 King County CHNA, including school system support, affordable childcare and early learning. Due to a lack of expertise to effectively address these specific needs, the hospitals will support youth with expanded access to mental and behavioral health services through other prioritized health needs and our CHIP, as well as work with partner organizations who specialize in this space.

All health needs identified as part of the 2024/2025 King County CHNA touch on core social determinants of health and share commonalities. For areas outside our immediate focus, we will continue to invest in community programs and initiatives that work to address social determinants of health and expand our capacity to reach those in need through referrals, in-kind donations and grant making.

COMMUNITY HEALTH IMPROVEMENT PLAN

Summary of Community Health Improvement Planning Process

The 2024/2025 King County CHNA completed for Providence Swedish King County hospitals was the basis for the 2025-2027 CHIP. The assessment, which was completed as part of the [King County Hospitals for a Healthier Community](#) collaborative, identified community needs, assets, resources and strategies to improve health and health equity for King County residents.

The Health Equity, Justice and Social Responsibility Committee (HEJSR) of the Swedish Health System Board of Trustees (the board) evaluated the needs and supporting data identified in the 2024/2025 King County CHNA and selected areas of focus for Providence Swedish King County hospitals: health care access and delivery with an emphasis on mental and behavioral health for youth and adults and equity and social determinants of health. Prioritizing the needs allow the hospitals to focus on leveraging their strengths, expertise and resources for greatest impact.

Across Providence Swedish King County hospitals, a multi-disciplinary team spanning clinical care, diversity, equity and inclusion, community health, and strategy was convened as part of a 2025-2027 CHIP Committee to identify strategies, programs and initiatives that respond to the prioritized needs. Individuals were selected to participate in the committee based on their deep knowledge of the prioritized needs, clinical and community based best practices and King County communities.

Through a series of dialogue and feedback sessions with members of the committee and other internal subject matter experts, a set of core CHIP strategies were presented to HEJSR, senior leaders and the board for additional review, feedback and alignment.

In March 2025, the board met to discuss and approve the following strategies and plan for addressing identified priorities in King County.

Joint CHIP Report

This is a joint CHIP report, within the meaning of Treas. Reg. § 1.501(r)-3(b)(6)(v), by and for Providence Swedish including Swedish First Hill, Cherry Hill, Ballard and Issaquah campuses.

These hospitals completed a joint 2024/2025 CHNA report. A joint approach to addressing the needs identified in the joint CHNA will be most effective, given that the hospitals share a CHNA service area and community served, staffing, leadership teams and resources. The strategies included in this plan are representative of efforts taken by all Providence Swedish King County hospitals to address the identified community needs. The hospitals have a shared governance structure and share one governing board that adopts their CHIP for implementation.

Addressing the Needs of the Community: 2025- 2027 Key Community Benefit Initiatives and Evaluation Plan

The following strategies for addressing priority needs consider how communities change over time, as well as their existing strengths and capacity. They were intentionally selected with the understanding that some community health needs may evolve during the duration of the CHIP, and that subsequent implementation strategies may require adjustments based on resources and to best meet the needs of our communities. While our response to community need must remain flexible to changing dynamics, our commitment to improving the health of our communities is unwavering.

COMMUNITY NEED ADDRESSED #1: HEALTH CARE ACCESS AND DELIVERY (EMPHASIZING MENTAL AND BEHAVIORAL HEALTH FOR YOUTH AND ADULTS)

Health care access and delivery needs identified as part of the 2024/2025 King County CHNA include more access to behavioral health services for youth and adults, screenings for chronic diseases, maternal health, and health care coverage.

Population Served

In line with our mission, we are focused on underserved populations, including those who are low-income, uninsured and underinsured. Within these populations, we aim to serve seniors, veterans, individuals transitioning from homelessness, individuals with complex medical needs, BIPOC communities, and those facing mental and behavioral health disorders.

Long-Term Vision

Improve access to preventive and specialty health care, with an emphasis on mental and behavioral care, for underserved populations by investing in programs that assist with care navigation for better health outcomes.

Table 2. Strategies and strategy measures for addressing health care access and delivery (emphasizing mental and behavioral health for youth and adults)

| Identified need: Health care access and delivery (emphasizing mental and behavioral health for youth and adults) | | | | | |
|---|--|--|--|---|---|
| Goal | Strategy | Population Served | Evaluation Measures | Baseline | 2027 Target |
| Improved access to medical care and resources for underserved populations, with an emphasis on those experiencing homelessness and mental and behavioral health disorders | Enable care navigators in health care and community settings to help those in need navigate social determinants of health | Underserved, low-income populations, including seniors and veterans, those transitioning from homelessness to housing and individuals with complex medical needs | Number of individuals served through completed referrals/visits to primary and specialty care Number of community education sessions held | 105 clients in affordable housing receiving care navigation, 20 individuals completing primary care visits and 140 community members served through health education sessions 46 individuals served through ED social worker program | Continue to provide care navigation for 105 clients and increase the number of individuals completing primary care visits to 40 and community members served through health education sessions to 150 60 individuals served through ED social worker program and 40 individuals completing referral/visits |
| Expanded efforts to reduce disparities in cancer detection and prevention for low-income communities | Provide mobile mammography services to reach and support underserved and low-income populations with culturally appropriate care | Underserved, low-income women | Number of screenings completed Number of screening accounts (community-based visits) | 6,481 screens and 440 accounts | 6,800 screens and 466 accounts |
| Expanded capacity for addiction treatment and recovery services for those who are low-income and underinsured | Support birthing parents facing addiction and addiction recovery with wrap around support services | Birthing parents facing substance use and disorders throughout pregnancy and postpartum | Number of birthing parents served Treatment and prevention resources to support ongoing care and recovery | 341 birthing parents served and 402 instances of disorder management and treatment resources (e.g., Naloxone distribution) | A 5 percent increase in individuals served and services offered |

| | | | | | |
|--|--|---|---|---------------------------|--|
| Expanded capacity to support and care for underserved populations through culturally relevant behavioral health care services in our communities | Provide grant funding and in-kind support to increase access to health care services, with an emphasis on mental and behavioral health | Underserved and low-income adults, youth and families | Number of individuals served through community programs and initiatives List of community initiatives and collaborative partnerships | 30,000 individuals served | Increase individuals served by 10 percent and support grant recipients in achieving their program goals to expand care for underserved populations |
|--|--|---|---|---------------------------|--|

Community and Research Informed Resources

- [Patient navigators, County Health Rankings & Roadmaps](#)
- [Cancer screening: reducing structural barriers for clients – Breast Cancer, Healthy People 2030](#)
- [Culturally adapted health care, County Health Rankings & Roadmaps](#)

Resource Commitment

Swedish First Hill, Cherry Hill, Ballard and Issaquah campuses will commit staff time, supplies and equipment, cash and in-kind donations to support these strategies.

Key Community Partners

Providence Swedish works with many community partners across King County to expand access to high-quality care and to help address health needs for those who are underserved. Examples of the partners we will work with as part of our commitment to addressing health care access and delivery, with an emphasis on behavioral health for youth and adults, include Plymouth Housing; Friends of Youth; Valley Cities Behavioral Health Care; and SOUND Behavioral Health.

COMMUNITY NEED ADDRESSED #2: EQUITY AND SOCIAL DETERMINANTS OF HEALTH

Equity and social determinants of health needs identified as part of the 2024/2025 King County CHNA include poverty and economic insecurity, unemployment and underemployment, language barriers, systemic racism and discrimination.

Population Served

In line with our mission, we are focused on underserved populations, including those who are low-income, uninsured and underinsured. Within these populations, we aim to serve members of the BIPOC, LGBTQIA+, refugee and immigrant communities, those experiencing homelessness, and individuals with complex medical needs.

Long-Term Goal(s)/ Vision

Expand access to programs and services focused on reducing health disparities and social inequities for underserved populations, so that all people can live their fullest, healthiest lives.

Table 3. Strategies and strategy measures for addressing equity and social determinants of health

| Identified need: Equity and social determinants of health | | | | | |
|--|---|---|--|--|--|
| Goal | Strategy | Population Served | Evaluation Measures | Baseline | 2027 Target |
| Expanded access to pregnancy and postpartum care for underserved populations | Support the JUST Birth Network to improve the birthing experience for BIPOC communities and to address inequities throughout pregnancy and postpartum | Underserved populations, including birthing parents from BIPOC communities | Individuals served through cultural navigation and birth and postpartum doula services | 985 individuals served through cultural navigation services and 196 individuals served through birth and postpartum doula services | A 30 percent increase in individuals provided with cultural navigation services and 15 percent increase in doula services |
| Expanded access to equitable health care for those who are underserved | Provide specialty health care services to those who are underserved through volunteer care team and community partnership | Underserved communities, including low-income, uninsured and underinsured populations, individuals with complex medical needs and those experiencing homelessness | Individuals served Annual visits | 312 clients served with 1,692 visits a year | Continue to provide services and in-kind investments to ensure ongoing access to specialty health care for those who are underserved |

| | | | | | |
|---|---|--|---|------------------------|---|
| Expanded access to programs and services focused on addressing social determinants of health and inequities for those who are underserved | Provide grant funding and in-kind support to address equity and social determinants of health | Underserved, low-income populations, including members of BIPOC, refugee, immigrant and LGBTQIA+ communities | Number of individuals served through community programs and initiatives List of community initiatives and collaborative partnerships | 824 individuals served | Increase individuals served by 10 percent and support grant recipients in achieving their program goals to address social determinants of health and inequities |
|---|---|--|---|------------------------|---|

Community and Research Informed Resources

[Community based doulas, County Health Rankings & Roadmaps](#)

Resource Commitment

Swedish First Hill, Cherry Hill, Ballard and Issaquah campuses will commit staff time, supplies and equipment, cash and in-kind donations to support these strategies.

Key Community Partners

Providence Swedish works with many community partners across King County to expand access to high-quality, equitable care and to help address health needs for those who are underserved. Examples of the partners we will work with as part of our commitment to addressing equity and social determinants of health include Project Access Northwest and El Centro de la Raza.

Examples of Our Community Based Investments

For generations, Providence Swedish hospitals have served as a vital safety net for those who are underserved. Guided by the 2024/2025 King County CHNA, we continue our long-standing commitment to those in need through community benefit and other high-impact investments.

Our investments go beyond the walls of our hospitals and clinics and deep into communities to support organizations and causes that serve those in need; address gaps in services and resources that contribute to overall health; and enhance care delivery with innovative solutions to health care's biggest challenges.

Examples of this work can be seen in the following stories:

- [The JUST Birth Network: Fighting systemic racism in childbirth with equity and integrity](#)
- [Better health for birthing people with substance use disorders, their babies and families](#)
- [Cultural navigators are a bridge to care](#)
- [Providing culturally relevant care for Asian seniors](#)
- [The Somali Health Board is working to end the stigma of mental health challenges](#)
- [With support from Providence Swedish, local scholars are shaping health care's future](#)
- [Storm Academy inspires young students with health care career exploration](#)

For more on how we invest in our communities see the [Annual Report to our Washington Communities](#).

2025-2027 CHIP GOVERNANCE APPROVAL

This Community Health Improvement Plan was adopted by the Swedish Health System Board of Trustees of the hospitals on March 18, 2025. The final report was made widely available by May 15, 2025.



3/21/2025

Elizabeth Wako, M.D.
President and Chief Executive Officer, Swedish Health Services

Date



3/21/2025

Diankha Linear, J.D.
Chair, Swedish Health System Board of Trustees

Date

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Contact CHI@providence.org to provide feedback about this CHIP or to request a free printed copy.