he job of a social worker at Blythedale Children’s Hospital is a multi-faceted and demanding one, complete with a long list of varied responsibilities entrusted to each member of the department. These diverse opportunities have only made the Hospital more successful in attracting high-quality staff, as well as keeping them engaged and enthusiastic for, in some cases, decades.

According to the Hospital’s Director of Social Work, Susan Murray, LCSW, working at a facility that recognizes and appreciates the critical role played by her team makes all the difference. “Social work is clearly a valued profession at Blythedale. It’s our job to pull all the varying pieces together for our patients and their families, and to ensure that nothing is lost.”

And staying atop those many moving pieces is no simple task. On any given day at Blythedale Children’s Hospital, a social worker might be conducting pre-admission tours, facilitating a parent support group, planning for discharge, securing transportation for family members to visit or arranging for a room in the Hospital’s on-site parent housing. Some tasks are clearly more challenging than others: negotiating with an insurance company for much-needed services, or presenting a realistic set of options to a family struggling to come to terms with a child’s diagnosis. But at the end of the day, they agree that their choice of profession is a highly rewarding one that leaves them with a great sense of satisfaction.

Unlike many other facilities that offer social work services as a consult, at Blythedale, a social worker is assigned to every child and family that receives treatment.

“Throughout my career, I’ve always recognized the vital importance social work plays in supporting families at the most vulnerable time in their lives,” said Blythedale President and CEO Larry Levine. “I’m very proud of the extremely high quality of care provided by our social workers. Their commitment to providing our patients and their families with the very best in social work services is simply second-to-none.”

The 10-person department provides coverage for the Hospital’s inpatient units, outpatient programs, including Early Intervention (EI) and Committee on Preschool Special Education Programs (CPSE), and Day Hospital.

Murray is quick to credit her multi-talented staff, one she refers to as being like a big family. “They each are experts in their own area, and yet we can sit around a table and figure out how best to utilize each other’s skills. No matter what the need, you never hear, ‘That’s not my job.’”

And the skills needed to navigate each of the three main areas are quite different as Murray explains. The inpatient social worker is supporting a family who, in many cases, is just beginning to grasp the reality of their situation and learn how to care for a child with complex medical needs. The work can be quite Continued on page 2.
Meeting Susan Murray

Susan Murray, LCSW, is the Director of Social Work at Blythedale Children’s Hospital. Susan came to Blythedale as a graduate student in 1992, joining the staff full-time as a Social Worker in 1996. Her first exposure to the Hospital, however, was as a volunteer when she was in the eighth grade at Pleasantville Middle School.

Susan graduated magna cum laude from Bowdoin College with a Bachelor of Arts degree in Neuroscience with a concentration in Psychology, as well as a minor in Government. Although she initially thought about going to medical school, Susan realized that the field of Social Work was where her skills would be put to the best use. She received a Master of Social Work degree from Hunter College School of Social Work, where she majored in Casework and was the recipient of the Goldfein award for academic excellence.

Susan began her career as a social worker at St. Mary’s Hospital for Children in Bayside, NY, where she served on the team that developed the Hospital’s Traumatic Brain Injury service. After coming to Blythedale in 1996, she served as a social worker on one of the Hospital’s inpatient units and in the Day Hospital Program. She was later given several supervisory roles that ultimately led to her appointment as the Director of Social Work in January of 2009. In her current role she leads the Social Work department, oversees the Hospital’s Early Intervention and Committee on Preschool Special Education (CPSE) programs, and coordinates parent housing and pre-admission tours. She is actively involved in the implementation of the Hospital’s EMR and has supervised graduate students from Hunter College School of Social Work.

Susan and her husband, Graham, a financial advisor for Merrill Lynch, live in Stamford, CT, with their six-year-old son, Zachary, and three-year-old daughter, Hannah.


during their admission to Blythedale. Discharge planning begins on admission and is a collaborative process. In addition to securing the resources needed to be home safely, it also involves arranging for services such as medical care, therapy, and schooling, acquiring equipment and supplies as needed, and making connections with community agencies that can provide ongoing help.

“We’re extremely particular,” said Murray. “We hold other service providers to our institution’s extremely high standards for care.”

One of the biggest obstacles is securing these vital resources during a down economy. “If a home needs to be modified to accommodate a child with special needs, that can prevent a child from being able to return to their home. It’s becoming increasingly difficult to get the necessary approvals, and there’s so much more that families are required to pay out-of-pocket,” she said. “Paying for things like transportation and bath equipment… it’s a perpetual problem.”

The Charles & Marjorie Holloway Foundation has supported social work at Blythedale Children’s Hospital since 2005.

“Prior to the Foundation’s first gift, my fellow trustees and I considered how we could best affect the lives of the young patients. We were struck by the emotional toll that a child’s diagnosis and treatment takes on families, and a social worker’s significant role in navigating that difficult time,” said Foundation President Ian MacCallum. “Blythedale’s Social Work program provides the very best in customized social work support to children and their families, and the Foundation is proud to align itself with a program that has such a profound impact in the lives of those with such complex needs.”

And it’s that profound impact that makes every minute of the job worth it. “Our families come back to visit, months and years later, and we see how well their kids are doing,” said Murray proudly. “Sometimes you have a gut feeling about how a situation will turn out, and then you see them and it’s so much better than you even imagined. You never forget how that feels.”

For more information about Blythedale’s Social Work Department, please contact Susan Murray at (914) 831-2443, or email to susangm@blythedale.org.

Continued from page 1.

emotional. “In these cases, the crisis is typically over, and the families are learning what to expect from longer-term issues. The bond formed between parent and social worker can be quite intense.”

This was the case for Tracy Walker, whose five-year-old son, Aidan, was admitted to Blythedale after being hit by a car and suffering a traumatic brain injury and multiple fractures.

“I found the social workers to be the quiet heroes of our story,” she said. “They were always incredibly knowledgeable, able to provide peace of mind and navigate through an incredibly difficult and overwhelming world.”

(Continued from a two-month admission and a recovery his clinical team describes as “miraculous,” Aidan returned home to his family and rejoined his kindergarten class.)

Day Hospital social workers practice a more classic form of case management, working to secure services and community resources. These relationships, according to Murray, often prove to be long-term.

Lisa Petrucelli, the coordinator of Early Childhood and Outpatient Programs, doesn’t carry a typical caseload, yet is responsible for coordinating all outpatient referrals and orchestrating many needs of the children who participate in Blythedale’s EI and CPSE programs.

In addition to the department’s typical daily responsibilities, they are also heavily involved in several major Hospital-wide initiatives, including implementation of the new Electronic Medical Record (EMR) system, as well as staff training in Therapeutic Crisis Intervention (TCI).

Murray points out that a common misconception surrounding social work exists.

“I think people tend to assume that social workers do everything for the families they serve,” she said. “When in reality, we help families help themselves. It’s our responsibility to teach them to do what we do, so they are not left feeling helpless when they return home. Often it’s a matter of helping them decide between options they’d rather not be facing at all.”

That being said, the social work team is fully committed to securing the same high level of care for their patients upon discharge that has been the standard today.
A Day in the Life of a Blythedale Social Worker

Jessica Ritchie Offers an Insider’s Glimpse into a Typical Day for an Inpatient Social Worker

9:00 a.m. to 11:00 a.m. Phone calls, phone calls, phone calls...emails, emails, emails...
- Advocated with insurance case manager for extending authorizations of patients’ stays,
- Spoke with a Brooklyn school district to follow up on the status of a child’s registration in the NYS system,
- Confirmed transportation arrangements (with a translator) for a Spanish-speaking family whose child is being transferred back to a pediatric skilled nursing facility the following day, calling the social worker and the admissions coordinator at the facility to confirm,
- Spoke with a case manager at SKIP of NY (an advocacy agency) regarding a recently discharged patient to ensure that they are informed of the services put in place for the family by Blythedale,
- Wrote a letter for a lower-income family regarding their child’s durable medical equipment/supply needs upon discharge and advocated for assistance from the housing department to help the family obtain handicap accessible housing with sufficient space to accommodate the equipment,
- Returned a call from a social worker at a referring hospital regarding a prospective admission to the Post NICU/PICU Unit. Coordinated a time for the family to come to Blythedale so that I can give them a tour and hopefully answer any questions or concerns they have about the transfer and what their inpatient stay will be like (as family is Albanian, I will be using the translation phone service).

11:00 a.m. to 12:15 p.m. Facilitated a parent conference for one of my patients on the Adolescent Unit with the interdisciplinary team to discuss progress, goals, and discharge planning. It was an emotional one, as the child’s diagnosis is such that the parents are now faced with a difficult decision regarding which of two very risky neurosurgical procedures to pursue, as medical management and rehabilitation aren’t going to be able to progress him much further. Thankfully they’re connected with a support group of other parents of children with the same diagnosis, but it’s an incredibly difficult time for them. I have been able to offer them a room in Parent Housing for a second stay (we try to offer it to families for two-week periods based upon the demand/waiting list) which has helped both parents to be able to come to visit and stay with their son as frequently as possible. They thanked me for this following the conference and I reminded them that I remain available to offer support as they continue to weigh the risks and benefits of these prospective surgical procedures and what this means for their child and the family as a whole.

12:15 p.m. to 1:00 p.m. Participated in a therapeutic coordination conference (pediatrics, physiatry, psychiatry, treating therapists, and myself) to discuss the next steps in discharge planning for a dually diagnosed patient (medical/psychiatric diagnoses) with complex needs. The “perfect” program for her (which is out of state), her insurance company does not want to approve, yet nothing like it exists within NY State. Currently it appears she will need further surgery, so now we’re figuring out the next steps in arranging this first. Cross that bridge... then another...

1:00 p.m. to 2:30 p.m. Took a walk through the units to see if anybody needed to speak with me, then headed back to my office for more phone calls/follow-ups.
- Success! A return phone call from the Brooklyn school district enrollment office informed me that my Traumatic Brain Injury patient is finally registered in NYS and will therefore be able to attend school at Blythedale!
- Ran a Medicaid number in the EmedNY.org system to determine whether or not the expedited renewal had been put through so that I could proceed with discharge planning for one of my little ones. Alas, no such luck. We are in a holding pattern waiting on Medicaid.

1:45 p.m. Why am I so hungry? Oh, right. It’s 1:45 p.m. Quick break to reheat my pasta leftovers and back to eat this at my desk.
- Call upstairs to the Adolescent Unit to confirm what time coordinating pediatrician Dr. Silverman will meet with my two new admissions.
- Google search to see what prospective pediatric hospitals/rehab services exist for a patient who lives in Jamaica and is here following resection of a brain tumor. Parents’ plan is to bring her home to Jamaica, so the discharge planning piece is challenging. I take note of two places: Bustamante Children’s Hospital in Kingston, and the “Early Stimulation” program which seems comparable to our Early Intervention program in the United States.
- Call ACS (Administration for Children’s Services) to solidify plans to hold a discharge planning parent conference with the parent and ACS via conference call on Friday with the interdisciplinary treatment team at Blythedale. Looks like this will work with everybody’s schedules (miraculous!) for 12:00 p.m. One more thing to check off of my list.

2:30 p.m. to 5:30 p.m. Up on the Adolescent Unit to meet with Dr. Silverman and do admission interviews with families of two new patients who arrived today.
More than 250 friends and supporters of Blythedale Children’s Hospital were on hand for “Building Blythedale: An Evening at 42,” the Hospital’s annual spring fundraising event held on April 20 at Restaurant 42 atop the Ritz Carlton Westchester in White Plains. The event, which celebrated the extraordinary contributions of longtime Blythedale Board Member and outgoing Chair John L. Furth, raised nearly $300,000 for Blythedale’s replacement inpatient hospital.

Attendees enjoyed spectacular views, the culinary excellence of 42 Chef/Owner Anthony Goncalves, and an enticing silent auction. Incoming Board Chair Owen Gutfreund welcomed guests and introduced Saverio Sportella, a former patient, who spoke passionately about how he reclaimed his life at Blythedale, following a Traumatic Brain Injury after being hit by a speeding car six years ago. Hospital President and CEO Larry Levine provided an update on the construction of the new inpatient facility at Blythedale, and introduced the evening’s guest of honor, John L. Furth. Mr. Furth, surrounded by family and friends, gave an inspiring speech highlighting the importance of supporting Blythedale’s mission and reminding all that while “children are one-third of our population; they are all of our future.”

“It’s extremely difficult, if not impossible, to summarize all John has done for Blythedale,” said President and CEO Larry Levine. “He is a deeply compassionate individual and a tireless advocate on behalf of all children. We are truly blessed by his commitment to Blythedale.”

The event was coordinated by a dynamic committee chaired by Leni Klaimitz, Nancy Pundyk and Heidi Schwartz.

For information on sponsorship opportunities for our 2011 spring event, please contact Chief Development Officer Betsy Bowman at (914) 592-7138, ext. 411 or email her at betsyb@blythedale.org.
Building a Better Blythedale

Progress on Blythedale’s $65.3 million initiative to build a new inpatient hospital is well underway since breaking ground in June 2009. The modernization project, which is the first major renovation of the Hospital in over 40 years, is scheduled to be complete in Fall 2011.

According to President and CEO Larry Levine, construction is halfway complete, on time and on budget. “This is certainly an historic time at Blythedale,” he said. “It is extremely gratifying to see the progress on something that will have such a monumental impact on so very many children.”

The 55,760 square-foot building will incorporate the latest medical technology in a warm and child-centered environment, and will feature larger inpatient rooms, a spacious new entrance and lobby and expanded treatment areas for the Hospital’s therapy programs. The project is designed to address the dramatic changes in Blythedale’s patient population and diagnoses over the past several decades.

Fundraising is ongoing, according to the Hospital’s Chief Development Officer Betsy Bowman. “We are delighted to announce recent gifts of $250,000 from The Countess Moira Charitable Foundation, and $100,000 from the Hearst Foundation for the William Randolph Hearst Infant & Toddler Unit Conference Room,” she said. “We are honored by their commitment to our young patients, and deeply grateful for their support of this important campaign.”

“When we visited Blythedale, we were deeply moved by the sincere dedication of the entire staff toward the children and their families,” said Carolyn Gray and Marc Garlasco, trustees of The Countess Moira Charitable Foundation.

“We knew that we wanted to help this wonderful organization. By supporting the Hospital’s Building Program, we will be able to impact the lives of countless children and their families. Blythedale’s goals align perfectly with our mission to improve the well-being of youth throughout the world.”

Exterior walls, glass and roofing are currently being put in place, while substantial interior work will begin this fall. ■

For more information about naming opportunities or supporting the Building Campaign, please contact Chief Development Officer Betsy Bowman at (914) 592-7138, ext. 411, or email to betsyb@blythedale.org.

Walk With Us 2010 Raises Funds and Spirits

Attended by nearly 100 enthusiastic supporters this past May, Walk With Us 2010 – Blythedale’s annual fundraiser walkathon – raised over $15,000 for Blythedale’s new state-of-the-art inpatient facility. Held on the picturesque grounds of the Hackley School in Tarrytown, walkers were guided by volunteers from Kohl’s, as well as Hackley students.

Among the walkers were approximately 20 students from Salesian High School in New Rochelle, along with their school mascot and faculty advisors. The group was part of a club, With Open Arms, organized by student Mark Schoenstein, a former Blythedale patient. Schoenstein spearheaded the fundraising efforts for his school, and the students raised nearly $1,500 for Blythedale.

Yonkers Girl Scout troops 1549 and 1752 created a scavenger hunt through Hackley’s wooded trails and raised additional funds for Blythedale with a bake sale.

Many local businesses and organizations supported the event, including free water and snacks provided by Costco, raffle prizes provided by Westchester Family Magazine, a sports station from Velocity Sports Performance and Hudson Valley Health and Racquet Club, music by Scott Vigliotti of SVEntertainment, sand art from Carnival Time, and clowns from Michael Getlan of Amusement Consultants. A beautiful balloon arch donated by Bobby’s Balloons in Dobbs Ferry, marked the walk’s start.

“This is such a fun event for all involved,” said Blythedale Chief Development Officer Betsy Bowman. “It’s particularly gratifying to see the creativity and commitment of the community and school groups who make this event such a success.” ■

Save the Date – our 2011 walkathon will be Sunday, May 22. For more information about sponsorship opportunities or to participate in next year’s walk, please contact Director of Annual Giving and Special Events Carey Dalton at (914) 592-7138, ext. 303 or careyd@blythedale.org.

Students from Salesian High School gather before the Walk.
Hats Off to Blythedale’s 2010 Grads

patients of Blythedale Children’s Hospital entered the Hospital’s gymnasium to “Pomp and Circumstance”. Excited family members and friends, alongside teachers, doctors and therapists cheered the students’ accomplishments, and snapped pictures of the grinning teens. During the ceremony, awards and scholarships were presented, and the younger students performed a song.

One of the grads played the Star-Spangled Banner on piano... a particularly poignant moment given the effort required of the teen who has worked hard in his therapies to gain control of his hands.

All four graduates have future plans laid out, all of which include some form of continuing education. For Corey, who first came to Blythedale in 2007 following surgery for seizures related to his epilepsy, work, additional schooling, and advocacy work on behalf of the Epilepsy Foundation lies ahead.

Following the graduation ceremony, attendees celebrated the students’ achievements at a reception held in their honor at the Hospital.

Thank You John!

At the Annual Meeting of the Blythedale Children’s Hospital Board of Trustees this past spring, longtime Hospital Trustee John L. Furth was honored for completion of a five-year term as Board Chair. Mr. Furth is succeeded by former Vice Chair Owen Gutfreund, also a longtime supporter of the Hospital.

“I’m honored to step into this vital role at Blythedale Children’s Hospital,” said Mr. Gutfreund. “I follow in the footsteps of some extraordinarily dedicated individuals, including John, and I look forward to continuing their legacy of bringing health and well-being to the children at Blythedale.”

Back to School... Back to Volunteering

While the school year is underway, many hard-working teens continue to make a difference at Blythedale. School groups, scout troops, and groups from churches and synagogues bring so much to our patients’ lives through their donation of time. In fact, instilling the importance of philanthropy at an early age fosters a lifelong commitment to helping others. Check out what these ambitious teens are doing to make a difference in the lives of Blythedale’s patients:

• Katie Colford and Claudia Khoury, students at Convent of the Sacred Heart in Greenwich, CT, authored and illustrated books for patients. The creative teens met with the children, learned about them and their favorite things, and then created customized books using the information they gleaned from their previous visits. They then developed individual books for each patient.

• 14-year-old Dani Lewittes, a Manhattan resident, recently donated $4,500 to Blythedale through the UJA-Federation of New York’s “Give a Mitzvah, Do A Mitzvah” program. The generous teen designated a portion of the gifts she received at her Bat Mitzvah in support of Blythedale’s Parent Transportation Fund, which provides family members of patients with assistance in traveling to the Hospital for visitation, caregiver training programs, and social work services.

• Autumn Morowitz from John Jay High School participated in the annual walkathon by promoting the event at her school, and ultimately walking the course and photographing the fun along the way.

• Mark Schoenstein, a former patient, started a club at Salesian High School to raise money for the walkathon (see related story on page 5).

• Michelle Libowitz, a student at Horace Greeley High School, volunteers at Blythedale on a regular basis and also sold bracelets to benefit the Hospital.

• A group of Rye Country Day School sophomores made 30 baby blankets for medically fragile infants, and developed a club so students can come to the Hospital and volunteer.

For more information on volunteer opportunities during the school year, please contact Director of Community Relations Lena Cavanna at (914) 592-7138, ext. 374 or email at lenac@blythedale.org.
As the new school year approaches, it's important to remember that proper nutrition is paramount to your children's learning and development. Providing nutrient-packed meals and snacks will keep your children energized and focused throughout the school day. Blythedale Registered Dietitian Marie Roth, offers the following tips and tricks to help your child get the nutrition he or she needs.

**Start with a balanced breakfast:**
Many studies have shown that kids who eat breakfast regularly perform better academically, miss fewer days, have higher concentration levels, show better muscle coordination and maintain healthier weights. Offering a well-balanced breakfast consisting of whole grains, lean proteins, fruit and dairy will help your children meet challenges and keep them satisfied until lunch. Avoid sugary cereals and white flour products, which can lead to hunger and fatigue halfway through the morning.

**Choose a healthy lunch:** A nutrient-dense lunch will keep the mind sharp all afternoon. If packing a lunch from home, switch things up by offering variety such as: lean meat sandwiches on whole grain bread, salads, pasta dishes, hearty soups with vegetables, raw fruits and vegetables, yogurt or low-fat cheese, and water or low-fat milk. If your child will be purchasing a lunch in school, help your child navigate the cafeteria line by sitting down and reviewing the menu together to find the healthiest choices.

**Smart snacks:** Snacks should supply nutrients and the food groups missed at regular meals.
Ninety-eight percent of kids do not meet the recommended number of servings from the major food groups. Replace the high-calorie chips, cookies, candy and sugary drinks with ready-to-eat fruits and vegetables, whole grain crackers, low-fat cheese, high fiber cereals, nuts & nut butters, air-popped popcorn, yogurt, hummus, and 100% juice, low-fat milk or water.

So, stock up on healthy food items in the home and involve your children in the planning and preparation of meals. By improving what young children eat every day, we improve their chances of living a healthy life and reaching their fullest potential.

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**Back-to-School Safety Check**

_Brought to you by Blythedale and Kohl’s Department Stores – Partners in Injury Prevention_

- **My child is using a safe backpack**
  - Ensure the backpack does not weigh more than 10 – 20% of your child's weight.
  - Choose rolling backpacks for children carrying heavy loads.
  - Provide a backpack with wide padded shoulder straps and padded backs.
  - Secure the backpack on both shoulders to balance its weight.

- **My child is walking safely to school**
  - Study the route they will be taking, and ensure they do not walk it alone. Find a buddy to travel along with them to school.
  - Establish a safe route that is not close to alleys, wooded areas or empty buildings.
  - Show children a few safe places they could go if there is a sudden emergency, such as a neighbor's house or a busy store.
  - Tell children to pay attention to their surroundings and not use cell phones or headphones while walking.
  - Ensure they respect all traffic lights, street signs and crossing guards.

- **My child is safe on a school bus**
  - Ensure children do not play in the street while waiting for the school bus.
  - Tell children they should board the bus one at a time. They should never push.
  - Show children how to properly use a seatbelt on a bus. New York and New Jersey now require all new school busses to be equipped with seat belts.
  - Instruct your child to listen to the bus driver at all times.
  - Teach children to take “10 giant steps” away from the front of the bus before crossing the street. They should also make eye contact with the driver as they cross and immediately get onto the sidewalk.

- **My child always wears a helmet when riding a bike, skateboard, or scooter to school**
  - Safeguard against head injuries by making certain your child always wears a helmet.
  - Teach your child how to wear a helmet properly:
    - A helmet should fit snugly and be level on top of the head,
    - A helmet should have straps that make a V around the ears and
    - A helmet should be buckled securely under the chin.
  - Ensure that children respect all traffic lights, street signs and crossing guards.
Today is designed to inform our friends in the community about the services of Blythedale. If you know someone who would like to be on our mailing list, or if you have ideas for future issues, please let us know.

Call Connie Cornell at (914) 592-7138, ext. 461 or email conniec@blythedale.org

Visit us at our website www.blythedale.org

Turning the Tables on Blythedale’s Volunteers

In honor of their ongoing dedication to Blythedale, the Hospital’s volunteers were celebrated at a recent dinner at Westchester Hills Golf Club. The more than 80 attendees were recognized for their wide-ranging contributions and lengthy service to the Hospital. The Hospital’s 130 volunteers combined to log hours in 2009 (in areas including therapy, school, reception desk, clerical, and on the patient units) which were equivalent to that of 6.59 full-time employees, noted Blythedale President and CEO Larry Levine. “We are so deeply appreciative of all they do for the Hospital,” he said. “This evening was a wonderful opportunity for us to thank them for their donation of such a precious commodity… their time.”

L-R: Hug & Hold Volunteer Sahara Szeliga, Blythedale Trustee and School Volunteer Mike Margulies, and Blythedale Chief of Government Relations Regina Kelly gather at the event.

save the date

THURSDAY, OCTOBER 21, 2010
Super Foods and You

Attend this free workshop sponsored by The Dannon Company, Inc., for parents and children ages 9 and older.

TUESDAY, DECEMBER 21, 2010
19th Annual 95.5 WPLJ Holiday Benefit Broadcast

Tune in to 95.5 FM between 6:00 and 10:00 a.m. as our friends from WPLJ’s “Scott and Todd in the Morning” broadcast live from Blythedale Children’s Hospital!

For more information about these events, contact Director of Community Relations Lena Cavanna at (914) 592-7138, ext. 374 or email at lenac@blythedale.org