



How does the New York Foundling's crisis nursery **prevent maltreatment and entry into foster care?**

[Crisis nurseries](#) are designed to **provide respite and short-term care for families** that experience a temporary crisis due to lost employment, a medical emergency, violence, or other family challenges.¹ The goal of a crisis nursery is to decrease the risk of child maltreatment and stabilize a family by reducing parental stress and enhancing parental skills. While crisis nurseries are not traditionally thought of as [family resource centers](#), they are similar in that they provide initial crisis assessments and intervention services, including referrals and concrete supports. The nurseries even may be a part of a family resource center.

[The New York Foundling's crisis nursery](#) provides:²

- A 24-hour help line.
- A safe place for children to stay during a family crisis.
- Individualized attention and support in a secure, nurturing environment.
- Childcare by trained professional staff.
- Casework counseling for parents.
- Linkages to community-based support services.
- Routine medical care for children, if necessary during their stay.
- Follow-up and aftercare.



casey family programs

Background

Originally founded by the Sisters of Charity in 1869 as a home for abandoned children, [the New York Foundling](#) was the first institution in the U.S. devoted exclusively to the care of abandoned and neglected infants, regardless of demographics. The agency now offers an extensive array of services for children and families to address needs across the social service spectrum — child protection, foster care, adoption, juvenile justice, education, as well as services for single mothers, young people aging out of foster care, and individuals with developmental disabilities. The Foundling reaches 30,000 children and families each year in all five boroughs of New York City, surrounding New York counties, and Puerto Rico.³

Dr. Vincent Fontana, the New York Foundling's longtime medical director, researched the effects of child maltreatment as part of his work to develop prevention strategies. As a result of his decades-long research, the agency established the Maria Lucadamo Crisis Nursery in 1982. While there are numerous crisis nurseries throughout the country, the Foundling's is currently the only fully licensed, around-the-clock emergency respite care and prevention facility for children in New York City.

Basics

The Maria Lucadamo Crisis Nursery has 10 beds (five cribs and five adjustable beds), in addition to two pullout beds to allow for flexibility or emergencies. Children may range in age from newborn to 10 years old, although older siblings are allowed if necessary to keep a family intact.

The crisis nursery serves a variety of families — including single parents, parents from out of state, and immigrant families — that may not have strong social networks to help them navigate stressful situations,

such as mental health crises, medical procedures, detox, and seeking safety from domestic violence. The nursery works with parents to address these challenges and keep children safely out of the foster care system.⁴

The original goal of the Foundling's crisis nursery was to provide respite for families that were dealing with a one-time emergency, regardless of child welfare involvement. Currently, almost half of the families served are involved with the New York City Administration for Children's Services (ACS), either through its child protection or preventive services divisions. The majority of families are referred by hospital social workers due to medical issues, followed by schools and shelters.

In 2018, the Foundling's staff received and processed more than 16,300 calls to its parenting support helpline, while the crisis nursery responded to more than 1,200 calls and cared for 186 individual children in 116 different families.⁵ The crisis nursery tracks data to measure specific outcomes about families served, including:

- **Re-entry:** Approximately 92 percent of the families that use aftercare services do not need to re-enter the crisis nursery for the same reasons that previously brought them there.⁶ When receiving aftercare, no families have had child protection investigations, dependency filings, or children removed and placed in foster care.
- **Parental community engagement:** Families that engage in their communities when aftercare is assigned are very successful. The aftercare worker assists in and advocates for aftercare services on behalf of the family within the community. The nursery, it should be noted, does not track families that leave and do not receive aftercare services.

I'm at my wit's end. ... To do what's best for my children, I know I need to check into rehab, but I have no one to take care of them.⁷

— PARENT SERVED BY THE NEW YORK FOUNDLING'S CRISIS NURSERY

Process

The Maria Lucadamo Crisis Nursery's team of social workers, doctors, nurses, and teachers creates a nurturing environment for vulnerable children, providing shelter, educational and playtime activities, medical care, toys, and clothes, as well as supportive services for parents. There are three stages of the crisis nursery program:

- 1. Pre-admission:** When parents and caregivers contact the Foundling's helpline, case planners triage the calls, gather pertinent information, and make appropriate referrals to the crisis nursery and/or other supportive services.
- 2. Admission:** Case planners meet with parents and caregivers to understand the crisis and underlying needs. When children are admitted to the crisis nursery, the case planner also works with the family to develop a service/discharge plan, which includes referrals for services, as well as links to community resources and advocacy groups, to ensure the family will remain safe and stable once the child returns home.
- 3. Post-discharge and aftercare:** After the child's stay at the crisis nursery, staff continue to provide care and support to the family as identified in the service/discharge plan. Staff work closely with the ACS Division of Prevention Services to identify the right preventive program for the family. Aftercare is voluntary for families not involved with ACS preventive programs. If a family elects to sign up for these services, the case planner assigns an aftercare worker who monitors the family for three to six months. Families are not tracked once they leave aftercare services.

Throughout these three stages, staff identify and address the concerns of the families, and work with them to: 1) plan and implement appropriate goals and interventions; 2) identify family and community resources to assist in achieving desired goals; and 3) recognize when they may be in crisis and in danger of harming their children so they can reach out for help. The crisis nursery team also identifies any medical and developmental issues during the child's stay and works with the parent to address them.

Implementation

Length of stay

To prevent the crisis nursery from becoming a daycare or drop-off center, a child must stay at least 24 hours but typically no longer than 21 days. Longer stays may be allowed if, for example, the parent is in a 28-day treatment program or has medical complications. In such cases, the nursery must notify ACS. On average, children spend three to five days at the nursery.

Family connections

It is essential to ensure that the family and child remain in contact and that the crisis nursery does not disrupt family bonds. Parents are invited and expected to call daily, both to connect with their child and to provide the case planner with an update. If a parent is not responsive for three days, for reasons other than medical issues, ACS is notified about potential neglect. In extreme but rare situations, ACS may become involved if the parent is unable to take the child back home. While the nursery lacks the budget and infrastructure to provide transportation, it works closely with local area hospital social workers to arrange transportation to and from the hospital, should children need to visit their parents while they are hospitalized.

As part of the admissions process to the crisis nursery, the parent or legal guardian provides consent, as well as information about who can and cannot visit and/or communicate with the child. If the legal guardian signs the consent and the birth parent is not listed, the staff will neither confirm nor deny to the birth parent that the child is in the nursery. This level of caution is especially important in situations involving domestic violence.

Preventing trauma

The crisis nursery seeks to prevent further trauma to the child or family, and to make the process as welcoming and non-threatening as possible. This is evident in all stages of a family's engagement, beginning with admission and continuing through aftercare services. In non-emergency situations, staff schedule a tour for the family prior to the child's admission. The child's response to the tour helps staff anticipate how the child will adapt to the nursery — and to separation from

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the parent. This in turn helps staff better prepare for the child's stay. Parents are encouraged to have children bring personal items from home. Once children are admitted, staff talk with them about why they are there, prepare them for what the stay entails, and facilitate regular contact with their parents.

Recognizing that routine is important for children, the nursery maintains a regular schedule. Staff work with the parents and family members to ensure phone calls and visits do not disrupt that routine. The crisis nursery also partners with the agency's school program to provide classes for children ages 3½ and older. Teachers work individually with the children to identify any behavioral or developmental concerns, including whether an individualized education plan may be necessary.

Service coordination and collaboration

Being nested within a broader social services agency like the Foundling provides the crisis nursery with easy access to other contracted services, including substance use treatment, domestic violence, and mental health services. For example, the crisis nursery partners with the agency's deaf services program to provide video phones for children and parents. In addition, the New York Foundling's chief medical officer and nursing staff are located down the hall from the Maria Lucadamo

Crisis Nursery and provide additional care for the children, including a check of vital health statistics at admission and discharge, distribution of medication, medical care if a child is sick, and additional coverage on nights and weekends as needed.

The crisis nursery also spends time educating other service providers in the community about what it does and whom it helps. This ensures the providers have the information they need to refer families during times of crisis. In addition, the crisis nursery and ACS's preventive programs have developed a strong relationship. For example, they worked together to customize intake documentation for the nursery to ensure the most critical information was captured to meet the needs of both entities, given the unique, voluntary, and short-term nature of the program.

Sustainability

While the Maria Lucadamo Crisis Nursery currently receives funding as one of ACS's preventive programs, it needs to constantly raise money and in-kind donations, as it historically has operated at a deficit. The Foundling is working closely with ACS on a new budget model to address actual operational costs associated with running the crisis nursery.

- 1 Note: Unless otherwise cited, information in this brief was derived from a January 24, 2019, interview with Liyan Bao, vice president, and Timothy Jefferson, assistant vice president, of the specialized programs and permanency support of the Maria Lucadamo Crisis Nursery of the New York Foundling; or from the New York Foundling's crisis nursery web page at <https://www.nyfoundling.org/program/crisis-nursery/>
- 2 The New York Foundling. (n.d.). *The Maria Lucadamo crisis nursery: We can help*. New York City, NY: The New York Foundling.
- 3 Retrieved from <https://www.nyfoundling.org/about/>
- 4 The crisis nursery is not eligible for foster families because they already have access to respite care.
- 5 Correspondence with Liyan Bao, dated February 26, 2019, and May 14, 2019.
- 6 However, a family dealing with a chronic medical issue that does not have a strong support system can use the nursery as needed, and are not counted in this data point.
- 7 Retrieved from <https://www.nyfoundling.org/program/crisis-nursery/>

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