Program Outcomes
April 1, 2008 – March 31, 2009
Acknowledgements

- The Steering Committee members for Pathways to Safety who have lent their time, skill, and expertise to this initiative.
- The Pathways to Safety contracted agencies and staff who spent an enormous amount of time and effort working with these families and documenting the results of those efforts.
- The Family and Children’s Services social workers and staff who worked closely with the ACTION Council to deliver quality services to families in need.
- The staff members of the ACTION Council.
- Design support provided by Your Social Marketer, Inc.
- Data and statistics support provided by Arthur Lomboy.
- Development, research, and data provided by Larry Imwalle and Daniel Bach.
Dear Reader,

Pathways to Safety, Monterey County’s Differential Response initiative, has been operating countywide since April 1, 2007. During this time, the Department of Social and Employment Services and the ACTION Council, in partnership, have been able to offer this new approach to child welfare, focused on prevention and early intervention, to over 2,000 Monterey County families. Consistent with Pathways to Safety’s guiding principles, we are committed to ongoing evaluation and flexible program design in our quest to continuously improve program performance and offer families the greatest opportunity for success. This report, which summarizes the keys indicators and outcomes for Year 2 of the initiative (April 1, 2008 through March 31, 2009), is an important part of that process.

For this year, we have adopted a new report design, one which we hope you, the reader, will find more inviting and engaging. In Part I, you will find data describing the demographic characteristics of the child welfare and Pathways to Safety populations. In Part II, you will find a summary of the Pathways to Safety initiative information such as the number of families served by site, and the number of assessments completed. In Part III, we report the outcomes achieved by families served by Pathways to Safety – including successful family engagement, progress indicated through pre/post assessments, and the rates of recurrence of reports of child abuse and neglect. Throughout the report, you will also find short ‘vignettes’ that highlight Pathways to Safety activities and accomplishments, both from the perspective of the program staff and the families we serve.

As you will see, we have many positive outcomes to share. As a result of Pathways to Safety:

- 1,055 families who otherwise would have received only limited follow-up, had the opportunity to participate in comprehensive support services to address the warning signs that triggered their initial referral to child welfare.
- 34% of all families referred to Pathways to Safety agreed to engage in voluntary services.
- 78% of families that completed the 90-day case management period showed significant improvement on family assessments.
- Path 2 cases that experienced a re-referral were less likely to have a substantiated disposition than those not referred to Pathways to Safety.

It is our hope that the information presented in this report demonstrates the positive impact Pathways to Safety has on Monterey County families while also showing us areas that we can improve on to further our efforts in the community.

Larry Imwalle,
ACTION Council of Monterey County
In California…

More than 90% of calls to child abuse hotlines do not qualify to become official child abuse and neglect cases.

Statistics show that about 1/3 of hotline referrals are re-referrals of the same families from the previous year.

Community support and services assist families with issues that, if left unaddressed, can harm children and families, and lead to a later removal of a child.
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*Family Resource Specialists*
Pathways to Safety – a big change for child welfare in Monterey County.

“Pathways to Safety is an early intervention program based on the concept that child safety is the mutual responsibility of communities and child welfare agencies. Communities can respond to children who are in danger of abuse and neglect at the first sign of a problem.”

Karen Clampitt
Pathways to Safety Supervisor
Family and Children’s Services
I. Referrals & Demographic Information

DSES Social Worker and Support Staff, Intake Unit
Differential Response is a statewide, early intervention initiative designed to keep children safe in their homes and out of the child welfare system. In Monterey County it is called Pathways to Safety. The initiative is based on two core beliefs – that families can resolve issues more successfully when they voluntarily engage in services, supports and solutions; and that children are safer and families stronger when communities work together.

A referral to Pathways to Safety begins with a call to Family and Children’s Services (Child Welfare). If the legal threshold for abuse and neglect that would allow for an Immediate Child Welfare Response is not met, families are “Evaluated Out” or marked for a “10-Day” follow-up by a social worker.

These families can be referred to Pathways to Safety and offered support and services to address the problems that may have triggered the call to Family and Children’s Services in the first place. Depending on each situation and the level of concern, families are either directly referred to community-based Family Resource Specialists (Evaluated Out, Path 1) or jointly approached by them and Family and Children’s Services (10-Day Follow-up, Path 2). In Program Year 08-09, 641 families were referred to Path 1 and 414 families were referred to Path 2.

In Program Year 08-09, of the 1166 child welfare referrals that were “Evaluated Out” 525 were not referred to Pathways to Safety. Of the 1178 child welfare referrals marked for a “10-Day” follow-up 764 families were not referred to Pathways to Safety.

**Reasons why a family may not be referred to Pathways to Safety include that Child Welfare cannot locate the family; the family lives outside of Monterey County or on federal land; the incident was an accidental injury; or the child/children may already represent an open case in the child welfare system. In addition, over the past year Path 2 was only implemented as a pilot for a limited number of days per week.**
In Program Year 08-09, **1,055 families** representing **1,174 children** were referred to Pathways to Safety (641 to Path 1 and 414 to Path 2) and offered community services and supports.

Chart 1.
Overview of Evaluation Methodology

The data presented in this report reflect Pathways to Safety Year 2 program data, covering the period from April 1, 2008 through March 31, 2009. The source data for this report comes from three primary sources of information: CMS/CWS, ETO, and SAS.

- **CMS/CWS** is the child welfare case management system. It is the source for the information on the number of child abuse referrals, and the demographic characteristics of the child welfare population.

- **ETO** is the Pathways to Safety community case management database that contains the intake and assessment data collection through the community based response. This includes the initial intake, case plans, pre/post family assessments (FAST), and family support funds requests.

- **SAS** Software was used to build a matched dataset from CMS/CWS and ETO in order to derive measures of the recurrence of referrals of child abuse and neglect.

The reader will notice as they read this report that the total counts will vary by the data source. In addition, some charts refer to numbers of referrals and others refer to the number of children in those referrals.

*It must be noted that as this initiative develops we are faced with the normal challenges that come with linking data from different sources. In doing so we have been able to identify areas that challenge the provider with their data collection efforts and increase the difficulty in matching data sets. The data presented in this report can be replicated, is consistent with its original intended usage and can be reliably matched.*
Demographic Information for Children Reported to Child Welfare

For reporting purposes demographic information has been presented as it was reported to Child Welfare and recorded in our case management system, CMS/CWS. It will be presented as a whole and by Path designation for informational purposes only.

GENDER
Chart 2 represents the gender breakdown as reported by CMS/CWS for all children represented in the referrals reported during the program year. As you can note females were referred at a slightly higher number.

AGE GROUPS
Chart 3 represents the age group breakdown as reported by CMS/CWS for all children represented in the referrals reported during the program year, with children 6-10 as the largest reported age group.

ETHNICITY
Chart 4 represents the ethnicity breakdown as reported by CMS/CWS for all children represented in the referrals reported during the program year.

- **Evaluated-Out** (n: 1364 children)
Allegations by Highest Severity (Path 1, CMS/CWS 08-09) Chart 5.

- Exploitation: 1
- Substantial Risk: 2
- At Risk/Sibling Abused: 4
- Sexual Abuse: 4
- Caretaker Absence/Incapacity: 16
- Emotional Abuse: 81
- Physical Abuse: 233
- General Neglect: 433

Ethnicity (Path 1, CMS/CWS 08-09) Chart 6.

- Native American: 1
- Asian/Other: 13
- Black: 35
- White: 152
- Unknown: 160
- Hispanic: 439
These charts provide demographic information on the children that were referred to Path 1.

**PATH 1 ALLEGATIONS**
Chart 5 represents a breakdown of allegations as reported by CMS/CWS for Path 1. Allegations reported are unduplicated and recorded only once by highest level of severity. General neglect had the highest frequency.

**PATH 1 ETHNICITY**
Chart 6 represents the ethnicity breakdown as reported by CMS/CWS for Path 1.

**PATH 1 GENDER**
Chart 7 represents the gender breakdown as reported by CMS/CWS for Path 1.

**PATH 1 AGE GROUPS**
Chart 8 represents the age group breakdown as reported by CMS/CWS for Path 1.

**Note:** Demographics reported are reflective of the children within the total number of family referrals.

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**Gender (Path 1, CMS/CWS 08-09)**
Chart 7.

**Age Groups (Path 1, CMS/CWS 08-09)**
Chart 8.
Allegations by Highest Severity (Path 2, CMS/CWS 08-09)
Chart 9.

CMS/CWS Demographics for Children Referred to Path 2

Ethnicity (Path 2, CMS/CWS 08-09)
Chart 10.
These charts provide demographic information on the children that were referred to Path 2.

**PATH 2 ALLEGATIONS**

Chart 9 represents a breakdown of allegations as reported by CMS/CWS for Path 2. Allegations reported are unduplicated and recorded only once by highest level of severity. General neglect had the highest frequency.

**PATH 2 ETHNICITY**

Chart 10 represents the ethnicity breakdown as reported by CMS/CWS for Path 2.

**PATH 2 GENDER**

Chart 11 represents the gender breakdown as reported by CMS/CWS for Path 2. It should be noted that despite the slightly higher number of female reports, in Path 2 males represented the larger population.

**PATH 2 AGE GROUPS**

Chart 12 represents the age group breakdown as reported by CMS/CWS for Path 2. Note: Demographics reported are reflective of the children within the total number of family referrals.
First I would like to thank God for his divine intervention in my life. For sending us Children’s Services with their concern for my sons’ welfare and well-being because of our homelessness. It was not about me, but all about my children. Through the referral to Child Protective Services came the association with the ACTION Council and Pathways to Safety. I was assigned an effective and diligent Family Resource Specialist. Being reluctant, suspicious, and apprehensive due to fear and just plain “stinking-thinking”, I made our working relationship difficult in the beginning.

But finally it dawned on me that if I didn’t let her help me, I would be perpetrating a grave injustice to my sons. So I did what she asked of me and when I did, positive things began to happen. It wasn’t easy, but as things progressed I felt better about myself and wanted to be a better parent. I signed up for parenting classes and loved every minute of it. I also enrolled in special family counseling with my sons.

There are so many people and community service agencies I am forever grateful for – including my church Westside Baptist. I thank all of you, and one person above all – Erika Ramirez, my Family Resource Specialist. Through your dedication and love a family was saved and a successful parent was your product.
II. Assessment Information
The Department of Social and Employment Services (DSES) contracted with the ACTION Council to facilitate and implement the community response component of Pathways to Safety. The ACTION Council provides training as well as fiscal and administrative oversight for all Family Resource Specialists. Family Resource Specialists are located at the ACTION Council, Door to Hope, the Alisal Family Resource Center and the Cabrillo Family Resource Center. When families are referred to either Path 1 or Path 2, they are assigned to a Family Resource Specialist in one of those four locations (please refer to Chart 13).

**What happens after a Family is referred to Pathways to Safety?**
Within 24 hours of the referral, the family is assigned to a Family Resource Specialist (FRS) and sent a welcome card. Within one week of the referral, the assigned FRS visits the family in person with or without a social worker. Several attempts are made to connect with the family. It is important to note that families are not obligated to work with a FRS – engagement is absolutely voluntary. Once contact has been established, the FRS works with the family to identify a list of problem areas that the family wants to address. The FRS chooses to work with the family on those issues that have the highest potential to move the family towards self-sufficiency, typically for up to 3 months.
### Chart 13. (SAS 08-09)

**Pathways to Safety Referrals — Path 1** (n:661; Missing: 7)

<table>
<thead>
<tr>
<th>Agency</th>
<th>Path 1</th>
<th>Path 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Action Council</td>
<td>300</td>
<td>234</td>
</tr>
<tr>
<td>Door to Hope</td>
<td>188</td>
<td>102</td>
</tr>
<tr>
<td>MCSTART</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alisal</td>
<td>91</td>
<td>34</td>
</tr>
<tr>
<td>Healthy Start</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cabrillo Family</td>
<td>77</td>
<td>49</td>
</tr>
<tr>
<td>Resource Center</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Pathways to Safety Referrals — Path 2** (n:432; Missing: 13)

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**Note:** Data reported for the path response reflects information reported from the ETO Data set. Once matched to CWS/CMS the missing number reflects those that could not be matched and the remainder is broken out by agency and path assignment.
As reported in a recent Pathways to Safety newsletter:
Before Erika became a Family Resource Specialist she was an Eligibility Worker at DSES in another county. She decided to become a Family Resource Specialist because she wanted to experience interacting closely with families in need and have the ability to make a difference in their lives – to help families take a different path. The most rewarding part of her work is being able to tell that she is having an impact on the family. Within just a few weeks she notices they are smiling more and they are less stressed. The challenging aspect of her work is learning to accept that some families don’t want services and to not take that experience personally. She has learned that families often have a lot of problems they need to address (some of which are urgent, such as an eviction notice) and those needs have to be dealt with before she is able to work with the family on some of their other issues. Growing up Erika was the oldest of four children, which meant she had to provide support to her parents and guidance to her siblings. Because of this, she can really understand why people need these services. Just answering questions and guiding them to the right path can make a big difference.
Information on families that are referred to Pathways to Safety is collected through several data forms and assessments, including the Intake Assessment, Service Plan, FAST Intake and FAST Exit. In addition, the activities and efforts of Family Resource Specialists with families are recorded in the Pathways to Safety ETO database.

**COMPLETED ASSESSMENTS**

The number of assessments completed with families, for each assessment form, is reported in Chart 14. Overall, for Paths 1 & 2, there were 827 Intake Assessments completed, 274 Service plans developed, 277 FAST Intakes and 216 FAST Exits completed.

**ENROLLMENTS AND COMPLETED ASSESSMENTS BY SITE**

Chart 15 shows the total number of families enrolled in Pathways to Safety, for Paths 1 & 2, by program site. There were 534 families enrolled at ACTION Council, 125 at Alisal Community Healthy Start, 126 at Cabrillo Family Resource Center, and 290 at Door Hope.

*Numbers reflected in Chart 15 may be impacted by overlap in program years.*
These charts provide basic demographic information on the children that were referred to Pathways to Safety based upon data from the ETO database.

**PATH 1 REFERRALS BY ZIP CODE**

As reported in Chart 16, approximately one-half of all referrals were in the Salinas area, which is consistent with overall population characteristics in the county.
FAMILY CASE PLAN GOALS
Families that engage in services develop case plans that identify one or more of eight possible goal domains. Chart 17 reports the goal domains identified in family service plans. The most frequently selected goal domains were Parental Capabilities (46%) and Child Well-Being (24%).

FAMILY SUPPORT FUNDS
A limited pool of resources was available to pay for direct services to support families in their efforts to achieve their goals, and to improve family stability and child safety in general. Chart 18 reports the expenditures of support funds by category. A majority of support funds were used to assist families with housing needs ($3,815).
Identified Needs

Chart 19 and Chart 20 report the family needs identified at intake and enrollment into Pathways to Safety for each path. This information is collected by the Family Resource Specialist through observation and interview and recorded into the ETO database via the Intake Assessment. Family Resource Specialists document any and all family needs identified at intake.

IDENTIFIED NEEDS PATH 1
As Chart 19 illustrates, for Path 1 cases, the most frequently reported family needs were parenting education, counseling/mental health, and housing/shelter.
Identified Needs Path 2 (ETO 08-09)

Chart 20.

Identified Needs

Identified Needs Path 2

As Chart 20 illustrates, for Path 2 cases, the most frequently reported family needs were parenting education, counseling/mental health, and housing/shelter.
Thank you for this opportunity to share my testimony. My road as a single mom with 5 children and two grand children has been very tough. I was working at Wal-Mart. I was so excited because I have been waiting for so long for it and then I got the job! Then a lot of things were happening to me and my children all at once. I was often working nights and of course my children were going in and out of the apartment while I was at work. Their friends would also come to my home while I was at work. I was receiving truancy letters for my 15 year old daughter, my other daughter and then for two of my sons. I also lost my Section 8 benefits.

I took a leave of absence from my job so that I could straighten everything out...and decided that I needed a second job. Target gave me an interview but the person that interviewed me turned out to be the wife of my assistant manager at Wal-Mart. As a result I lost my job at Wal-Mart. How would I pay the rent? Then I learned some very disturbing things about my 15 year old daughter, who tried to end her life by taking pills, smoking pot and other drugs. At this point I became very frustrated and depressed. I didn’t know what else to do but to pray and ask God for help. And he answered my prayers and brought help for my family.

The Pathways to Safety Family Resource Specialist has been a guardian angel that God sent to us. She has done so much for us and opened a lot of doors. I hope that my testimony will somehow help other families. Please, Moms and Dads, let someone help you. God will bring you that person to help work with you in times of trouble and will also help you rejoice with the good things that you have with your family.

God Bless
III. Outcomes

P2S Family
**Overall Engagement** (SAS 08-09)

Chart 21.

Intakes=820

284 (34%) Completed an Intake form and a FAST Assessment

**Reasons for Lack of Engagement** (ETO 08-09)

Chart 22.

<table>
<thead>
<tr>
<th>Reason</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stabilized</td>
<td>6.1%</td>
</tr>
<tr>
<td>No Cooperation</td>
<td>16.1%</td>
</tr>
<tr>
<td>Other</td>
<td>17.4%</td>
</tr>
<tr>
<td>Unable to Locate</td>
<td>23.5%</td>
</tr>
<tr>
<td>Declined Service</td>
<td>36.9%</td>
</tr>
</tbody>
</table>

**Engagement**

**FAMILY ENGAGEMENT**

As reported in Chart 21, data from the Intake Assessment indicates that 34% (284 of 820 assessments) of families agreed to engage in Pathways to Safety services for Path 1 and Path 2.

This is approximately the same level as last program year, and is consistent with engagement levels reported for other Differential Response initiatives across the country.

**REASONS FOR NOT ENGAGING IN SERVICES**

The reasons for families not engaging in Pathways to Safety services were also tracked through the ETO database. As illustrated in Chart 22, the most frequently cited reason was families declining services (36%), or being unable to locate families based upon the information provided in the referral (23%).
The data reported here are for a matched set of pre/post assessments with families who engaged in Pathways to Safety services. The number is reflective of families that exited program year 08/09, but includes some overlap with prior program years to obtain matched data set information.

**FAST INTAKE/EXIT COMPARISON**

As shown in Chart 23, families on average showed considerable improvement across all 8 domains in the FAST Assessment. The average increase in mean score from initial assessment to post assessment ranged from .28 for Social/Community Life, to .41 for Child Well-Being.

**IMPROVEMENT BY DOMAIN**

Chart 24 shows the percent of families that showed measurable improvement for each goal domain of the FAST Assessment. Overall, families demonstrated improvement across all domains. The largest number of families showed improvement in parental capabilities (41%), child well-being (40%) and family interactions (39%).
Re-referrals Path 1

This chart provides information on the number of referrals that were re-referred within the time frame of greater than 90 days but less than 180 days. Data is broken out by those evaluated out referrals that were not assigned to Pathways and those that were placed in Path 1. From the point of re-entry the chart then shows the new determined response (Evaluated Out, 10-Day, or Immediate) and disposition (Unfounded, Unsubstantiated or Substantiated) of the referrals. The disposition numbers reported are for those referrals that were investigated.

Re-referrals Path 1 (SAS 08-09)
Chart 25.
Re-referrals Path 2

This chart provides information on the number of referrals that were re-referred within the time frame of greater than 90 days but less than 180 days. Data is broken out by those evaluated out referrals that were not assigned to Pathways and those that were placed in Path 2. From the point of re-entry the chart then shows the new determined response (Evaluated Out, 10-Day, or Immediate) and disposition (Unfounded, Unsubstantiated or Substantiated) of the referrals. The disposition numbers reported are for those referrals that were investigated.

**Re-referrals Path 2** (SAS 08-09)

Chart 26.
A voluntary telephone survey was conducted with families that completed services before March 31, 2009. As reported in Chart 27, almost with no exception, families that responded to the survey were satisfied with services that were provided.

In developing a survey collection process, we are inherently aware of reporting bias that is reflected in the following graphic. Further efforts to represent those who did not engage or who discontinued services will need to be pursued in future data development.

### Chart 27.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The FRS was knowledgeable and provided information that was helpful to my Family.</td>
<td>37</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>2. The FRS presented information to my family in a way that was clear and easy to understand.</td>
<td>36</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>3. The FRS was understanding and respectful of our culture/ethnic background and/or lifestyle.</td>
<td>38</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>4. My family was actively involved in developing the goals and services described in our plan.</td>
<td>32</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>5. The FRS was effective in assisting my family to reach our goals.</td>
<td>32</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>6. The services that my family needed were accessible at convenient times.</td>
<td>32</td>
<td>6</td>
<td>1</td>
</tr>
<tr>
<td>7. The services that my family needed were accessible and available at convenient locations.</td>
<td>33</td>
<td>5</td>
<td>1</td>
</tr>
<tr>
<td>8. The service providers were understanding and respectful to of our culture/ethnic background and/or lifestyle.</td>
<td>36</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>9. The services my family received were appropriate to address the goals we set with the FRS.</td>
<td>35</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>10. I am satisfied with the progress my family made as a result of participating in Pathways to Safety.</td>
<td>36</td>
<td>3</td>
<td></td>
</tr>
</tbody>
</table>
Quotes from Parents

“Don’t change anything! I enjoyed the parenting classes very much, and I am grateful for all the help I received.”

“No suggestion but I would like Pathways to Safety to continue helping other families like it helped me and my family.”

“I was satisfied with the services and the worker was very helpful.”

“I feel everything was good and my family benefitted from everything.”

“I was pleased with my parenting class and did not expect to learn as much as I did.”

“The parenting classes helped me learn how to treat my children and counseling was beneficial to me also.”

“Keep Pathways going!”

Thank you card to a Family Resource Specialist from a mother and her daughter.
A referral to Pathways to Safety begins with a call to Family and Children’s Services…

A typical example of a call is from a concerned community member, such as a neighbor who notices that the utilities in the home of the child have been turned off or that children appear to be unsupervised. Or the call could come from a teacher who notices that a child is coming to school late or dirty, or hears from the child that there is no food in the home.

Traditionally, these families received no further assessment because the legal threshold for abuse and neglect that would allow Family and Children’s Services to respond is not met. Now, these families are referred to Pathways to Safety and offered support and services to address the problems that may have triggered the call to Family and Children’s Services in the first place.

…and ends with solutions and supportive services to help families keep their children safe and out of the child welfare system.
IV. Glossary & Recommendations
Recommendations

- Expand program implementation for Path 2 from three days per week to seven days per week.
- Upon completion of Path 2 begin planning and development for Path 3 implementation.
- Develop data driven program improvement goals and marketing strategies such as further exploration of ways to evaluate the population of families that are declining services for ways to improve engagement.
- Develop methods to increase the viability of successful data matching between CMS/CWS and ETO.
- Identify and implement continuous quality improvement to increase data collection and ensure the completion of program assessments.
Recommendations

- Continue to refine the definition of engagement by examining and extending evaluation methodologies to include breakdowns by path and by participation.

- Develop methods to identify why families may chose not to engage in services.

- Explore data flow and software design to improve evaluation efforts and ensure simplified data collection.

- Develop additional fiscal resources to support identified family needs, such as counseling and parent education.

- Explore the ability to participate in community collaborations that may extend our ability to promote early intervention and prevention.
10-Day - Child Welfare Response Code

ACMC - ACTION Council of Monterey County

Allegations - Categories of reported concerns as defined by Welfare and Institutions Code

Assessments - Data collection and performance tracking forms used by Pathways to Safety

Child Welfare Response - Categories of response time as defined by Welfare and Institutions Code

CWS/CMS - Case management system used by child welfare

Disposition - Categories of referral resolution as defined by Welfare and Institutions Code

DR - Differential Response

DSES - Department of Social and Employment Services

Engagement - Those families who received an intake and initial FAST

Enrollments - Those families referred to Pathways to Safety

EO - Child Welfare Response Code - Evaluated out

ETO - Efforts to Outcomes, the case management system for Pathways to Safety

FAST - Nickname for North Carolina Family Assessment Scale, General

FRS - Family Resource Specialist

Goal Domains - 8 areas of focus within the FAST Assessment

P2S - Pathways to Safety

Path 1 - Evaluated out referrals entering Pathways to Safety

Path 2 - 10 day referrals entering Pathways to Safety

Program Year - Defined as April 1, 2008 to March 31, 2009

Re-referral - A referral that comes back to CPS

SAS - Statistical Analysis Software
Pathways to Safety

Family and Children’s Services
Daniel Bach
(831) 796-3525

The ACTION Council of Monterey County
Larry Imwalle
(831) 783-1244

REPORT SUSPECTED CHILD ABUSE OR NEGLECT
Child Protective Services Hotline:
800-606-6618
831-755-4661 or reportchildabuse@co.monterey.ca.us