



Office of Children's Services
Empowering communities to serve youth

All About CANS

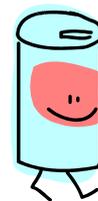
New Coordinator Academy

March 2019

Carol Wilson, Program Consultant

Child and Adolescent Needs and Strengths (CANS) Assessment

- Purpose of the CANS
- Rating the CANS
- Making the CANS work for you



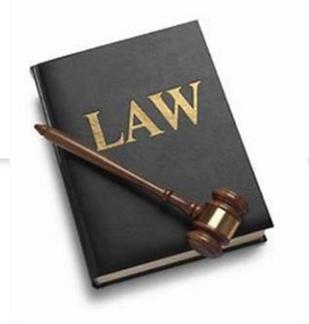
Your Role with CANS

- What is your role with CANS?
- Responsibility for CANS will ultimately rest on the CSA Coordinator.

Why do we have the CANS?

All children and youth, regardless of eligibility criteria, age, or referral source, who receive services funded by the CSA state pool shall be assessed using a mandatory uniform assessment instrument approved by the State Executive Council.





Why do we do CANS?

- Statutory requirements for a mandatory uniform assessment instrument (MUAI) for children and youth served by the Children's Services Act (CSA)
 - COV §2.2-2648 (11)
 - COV §2.2-5210
 - COV §2.2-5212
 - Appropriations Act Item #282 B (8)

In 2008, the State Executive Council, based on the recommendations of an interagency workgroup, selected the CANS for CSA.

But the real reason is CANS= foundation of service plan

- Cannot have a plan without an assessment

[Case Management Service Plan]

Client _____ Case Manager _____ Date _____		
Planned Frequency of Contact _____		
Life Domains Area of Focus: (Check all that apply)		
_____ Housing/Living Situation	_____ Employment/Education	
_____ Social Supports	_____ Leisure/Recreation Supports	
_____ Financial Situation	_____ Health	
Client's Long Term Goal _____		
Measureable Short-Term Goals toward Achievement	Request	Comments
Client Signature _____ Case Manager Signature _____ Date _____		

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About the CANS

- CANS and related assessments were developed by John S. Lyons, Ph.D., currently with Chapin Hall at the University of Chicago
- Recommended as a functional assessment by SAMHSA, Children's Bureau, Centers for Medicaid and Medicare Services' "trauma-informed" letter
- Widely used in multiple states and countries
- Adaptable because of "modular" design

Virginia CANS

Six domains:

- Life Functioning
- Strengths/Resiliency
- School
- Caregiver Needs and Strengths
- Child Behavioral/Emotional Needs
- Child Risk Behaviors



Rating the Modules

- Child Functioning Modules (Comprehensive)
- Child Welfare Module (DSS-Enhanced)
- Modules permit the assessor to gather more information about a specific area of need and may significantly influence the development of the service plan.

CANS

- Child functioning modules
 - Developmental
 - Trauma-includes physical, sexual and emotional abuse, but also other types of trauma (medical, environmental, etc.)
 - Violence
 - Sexually aggressive behavior
 - Juvenile justice
 - Runaway
 - Substance use
 - Fire-setting
- Modules permit the assessor to gather more information about a specific area of need.
- Child Welfare module was developed to better assess children and families receiving foster care services and is organized by Protective Factors Framework.



About the CANS

- “Shared vision” of children and families
- Enhance communication across agencies and with parents when working with children and families
 - Everyday terminology which is easily understood for families and across disciplines
 - Easy to understand rating logic

0...1...2...3

Communimetric Tool

Apgar Scoring System

Indicator		0 Points	1 Point	2 Points
A	Activity (muscle tone)	Absent	Flexed limbs	Active
P	Pulse	Absent	< 100 BPM	> 100 BPM
G	Grimace (reflex irritability)	Floppy	Minimal response to stimulation	Prompt response to stimulation
A	Appearance (skin color)	Blue Pale	Pink body Blue extremities	Pink
R	Respiration	Absent	Slow and irregular	Vigorous cry

Communimetric Tool

- CANS is a communimetric, not a psychometric, tool
 - Some subjectivity is inherent and expected
 - Balanced by consistent rating logic and specific item and anchor definitions
- Based on observations at a point in time
- About the “what” not the “why”
- Not about what’s easiest for the “system”...(e.g., rating a certain way to assure funding for a specific service)

CANS for CSA

- What did CSA need in the MUAI?
 - Utility in service planning, measurement of outcomes and level of need
 - Multi-agency/disciplinary approach, serving multiple populations
 - Mechanism for training and certifying raters
 - Not used as a clinical mental health assessment for CSA
 - No cost to local government

Why do we do assessments?

- Why do we do assessments when working with children and families?
 - Gather and organize information about the child and family; assessments provide a structured way to do so
 - What kind of information?
 - Why is that information important?
 - Narrows focus on issues to address
 - **Basis for service planning-**
 - **Determine and prioritize goals, objectives, strategies**

Why?



- CSA assessment is not intended to be an “add-on” or additional “paperwork” for funding
- It is intended to **be** the work...where the case manager and FAPT start with a child and family, the basis of how services are designed and developed, and also how the FAPT can evaluate the success of the services and the progress of the child and family

Why use the CANS?

- Assess the child and family's strengths and needs
- Create a foundation upon which to build the service plan
- Evaluate progress or lack of progress



A green rectangular road sign with rounded corners and a white border, mounted on two wooden posts. The sign features the word "Vision" in a large, white, sans-serif font. The background is a clear blue sky with scattered white clouds.

Vision

CANS...the Vision

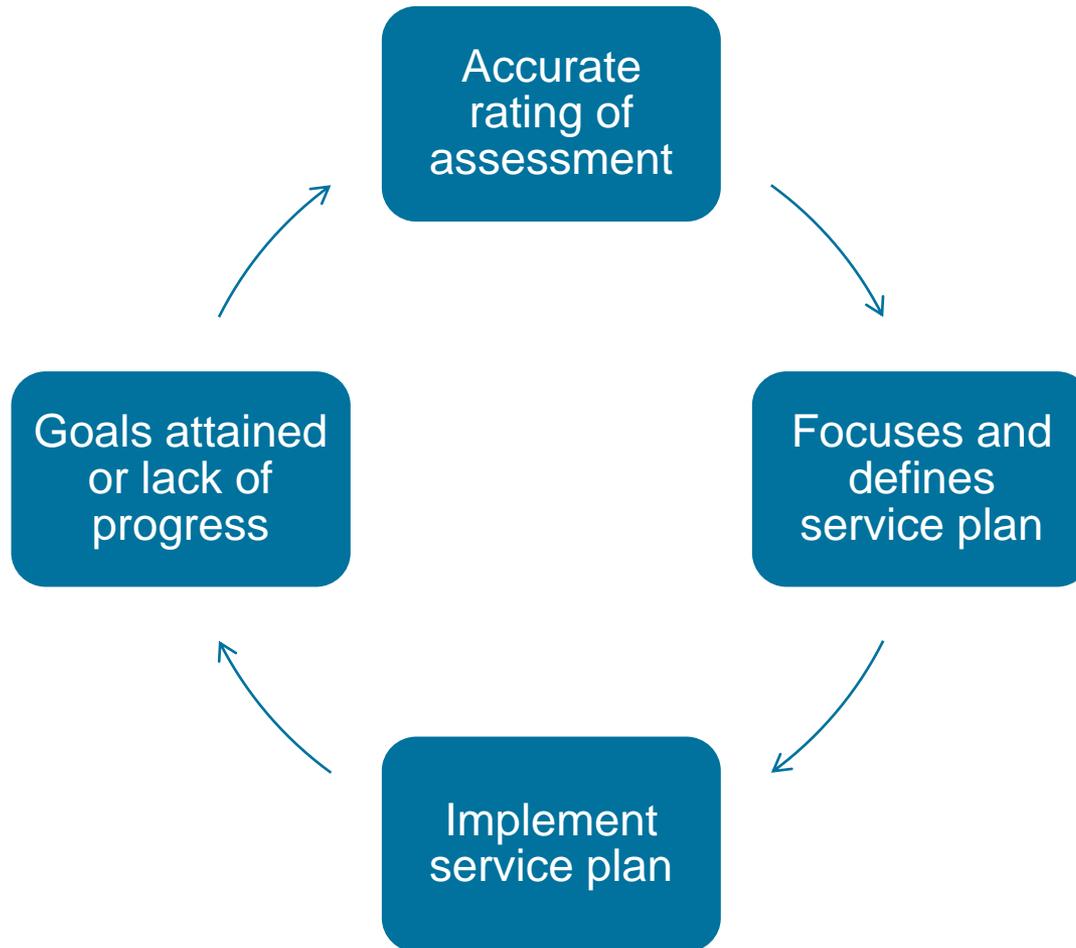
- Professionals and parents knowledgeable about CANS.
- CANS assessment completed at FAPT table.
- Completed CANS is used as foundation for creative, child-specific service plan using natural supports and family's strengths as appropriate in addressing identified needs.



Vision

- Service plan is developed without emphasis on cost.
- All providers involved with child and family use same basic service plan with the same goals, objectives (based on CANS) interventions/services and time frames
- CANS is completed at next FAPT review for child and family noting progress and adjusting plan as needed. Have new strengths or needs been identified?

Vision –Service Planning



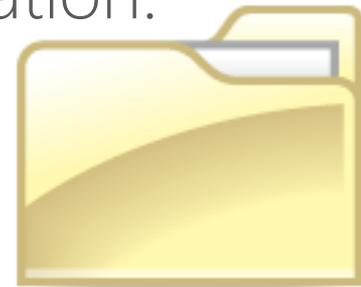
Reality

- Funding streams and their requirements drive selected interventions or strategies.



- FAPT reviews assessment and service plan.

- CANS filed in CSA folder for documentation.



How do we make the Vision = Reality?

- Understand, teach and integrate into practice the:
 - importance of reliable and accurate assessment of child and family needs and strengths; it's not just a "form" to complete to get funding.
 - critical necessity of involving child and parents in their own assessment and service planning...if they're not involved in a meaningful way, no matter how hard everyone else tries, there won't be any success.

Rating the CANS



CANS Certification

- The CANS is administered by the local public agency case manager for the child and family.
- Any one administering the CANS (paper or online) must be currently certified on its use.
- Certification is obtained by completing the online training found at <https://www.schoox.com/academy/CANSAcademy/home/> and scoring at least a .70 on a certification exam.
- Only certified users may enter an assessment into CANVaS.
- Private providers do not have access to CANVaS and do not complete CANS for CSA children.

is offered by:



Praed Foundation

Average Rating: ★★

ive Training Website (TCOM)

el Coupon

/annually

Total

\$0



Enrolled



Virginia CANS 0-4 1.0

Education



Praed Foundation Collaborative

Course Price

Included

0 Reviews



Virginia CANS 0-4 1.0 DSS

Education



Praed Foundation Collaborative

Course Price

Included

1 Reviews



Virginia CANS 5+ 1.0

Education



Praed Foundation C

Course Price

Included





 Course

Virginia CANS 5+ 1.0

 43 Steps  4 Supplemental materials

Total Progress 

 Total Time 0:15:37

 Completed 1 time

 Supplemental materials [Discussion Board](#)

ains:

* Suggested

 Domain 1

Introduction to Training

Step

Six Key Principles

- Underlying tenets of rating the CANS-**VERY IMPORTANT!**
 - Item level validity with each item having immediate relevance for service planning
 - Action levels corresponding to each rating for needs & strengths
 - Consider cultural and developmental factors
 - Descriptive, not determining a cause
 - About the individual, not the service...rating child, not child "in services"
 - Thirty day timeframe on many items-can and should be overridden if action is need

Accurately Rating the CANS

- Rating Needs Flow Chart
- Rating Strengths Flow Chart

Rating Needs

- Ratings of "0" to "3"
- Needs items
 - "0" indicates no evidence of need
 - "1" mild level of need and/or history of need
 - "2" moderate level of need
 - "3" severe level of need
- Corresponding action levels of each rating on needs:
 - "0" no need for action
 - "1" monitoring, watchful waiting or prevention
 - "2" requires action to ensure that the identified need is addressed
 - "3" requires immediate or intensive action

Needs items rated "2" or "3" should be addressed on service plans.

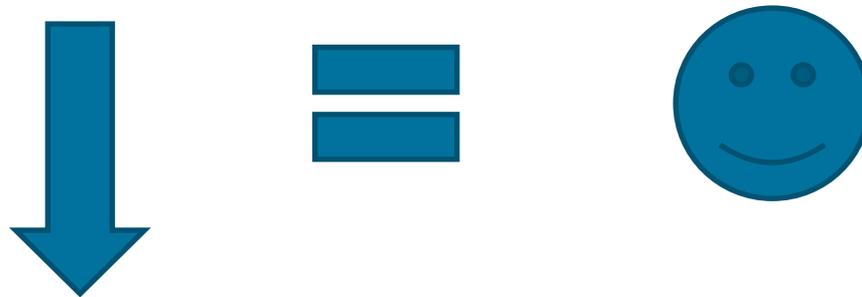
Rating Strengths

- Strengths items
 - "0" indicates a centerpiece strength; may be important in service planning
 - "1" indicates a strength exists in this area; may require some development
 - "2" indicates strength has been identified, but no action taken to build or develop
 - "3" no strength identified in this area

*Strengths may be identified as areas to develop on a service plan or may be used to assist meeting a need or supporting healthy functioning.

Rating the CANS

- The lower the rating on both strengths and needs items, the better the child is functioning.
- Lowering of numbers indicates improvement in functioning.



How often?

- Minimum state CSA requirements are:
 - Initial (Comprehensive)
 - Annual (may be Reassessment or Comprehensive)
 - Discharge (Comprehensive)
- Reassessments done during the year as needed for service planning or other funding sources (e.g., Medicaid)
- CANS Policy (See Policy 3.6) effective January 1, 2019

Why?

- Initial -set the stage
- Annually-review progress and adjust
- Discharge
 - May be used to plan discharge, or as
 - Summary at time of discharge

Importance of Accurately Rating the CANS

- Things that trip up raters...
 - Use of everyday language (items may not mean what you think they mean)
 - Not using the Item and Rating Definitions Manual when completing a CANS
 - Not applying the Six Key Principles when rating

Which leads to questions like...

Why don't I get the recommendation for residential when I have a child with multiple and significant behavioral/emotional issues?

Decision Support Model

- “Residential” only
- Ratings profiles developed through research that indicated children with similar profiles benefited from residential treatment
- System compares child’s assessment against profiles
- Searches for ratings in child’s assessment
- When rater closes assessment, algorithm runs and generates one of two statements

Decision Support Model

- When users close an assessment they will see either
 - “The child's assessment meets the algorithm requirements for residential treatment.”
 - Or
 - “The child's assessment does not meet the algorithm requirements for residential treatment.”
- Usually referred to as the “al-gore-ithm” recommendation



How do we use the algorithm?

- NO requirement to follow recommendation
- Does not drive funding
- Only one factor for FAPT to consider in making placement decisions
- FAPT must look at all of the information and use own judgement based on knowledge and experience
- Not used by Medicaid/Magellan in their determination of medical necessity

Reports

Making the CANS Work for YOU



Significant Changes in 2017

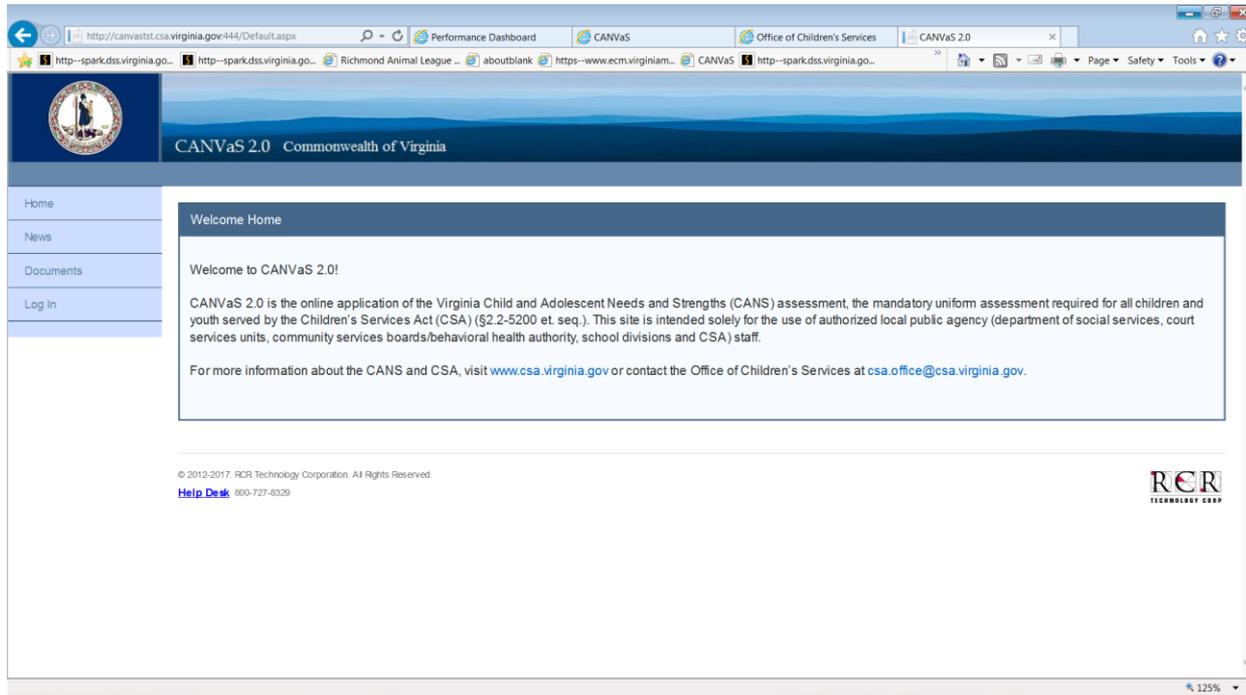
- New CANS Versions released with the implementation of an upgraded online system (CANVaS 2.0)
- Created DSS-Enhanced Versions and Standard Versions



Revised CANS

- DSS-Enhanced CANS Comprehensive Birth to Four
 - DSS-Enhanced CANS Reassessment Birth to Four
- DSS-Enhanced CANS Comprehensive 5-21
 - DSS-Enhanced CANS Reassessment 5-21
- Standard CANS Comprehensive Birth to Four
 - Standard CANS Reassessment Birth to Four
- Standard CANS Comprehensive 5-21
 - Standard CANS Reassessment 5-21

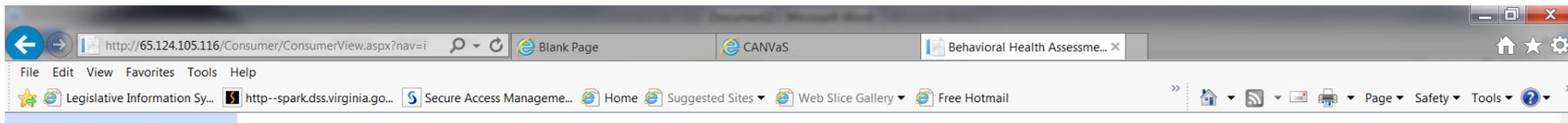
Referral Source for child will select DSS-Enhanced (LDSS) or Standard (CSU, CSB, schools, CSA).



CANVaS 2.0



CANVaS 2.0



View Callie Cat To search type and hit enter...

First Name	Callie	Referral Source	CSB
Last Name	Cat	Internal ID	1234
Middle Name		Race	African American
Birth Date	5/1/2007	Gender	Female
SSN	1111	Ethnicity	Hispanic
Medicaid ID			

LOCALITY	USER	START DATE	END DATE
Arlington	Susie Sweet	10/26/2015	10/26/2021
Hanover	Sally Sweet	10/02/2015	10/02/2021
Hanover	Carol Wilson	10/22/2015	10/22/2021



CANVaS 2.0

Browser window showing CANVaS 2.0 interface. URL: http://65.124.105.116/Assessment/AssessmentItemRapidentry.ε

CANS Comprehensive 5+ Assessment #1660 for Callie Cat
 Entry Mode: Rapid Entry Mode Status: Open Referral Source: CSB Assessment Reason: Reassessment

General Questions (Please answer according to anchor definitions.)

	0	1	2	3	Comments
● INTENSIVE COMMUNITY-BASED SERVICES	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="text"/>
● CHILD REMOVAL	<input type="radio"/>	<input type="radio"/>			<input type="text"/>
● CHILD AGE	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="text"/>
● CURRENT PLACEMENT - Foster Home	<input type="radio"/>	<input type="radio"/>			<input type="text"/>
● CURRENT PLACEMENT - Group Home	<input type="radio"/>	<input type="radio"/>			<input type="text"/>
● CURRENT PLACEMENT - Residential Treatment Center	<input type="radio"/>	<input type="radio"/>			<input type="text"/>
● CURRENT PLACEMENT - Family/Relation Home	<input type="radio"/>	<input type="radio"/>			<input type="text"/>

Life Domain Functioning (0 = No Evidence of Problems; 1 = History, Mild; 2 = Moderate; 3 = Severe)

	0	1	2	3	Comments
● FAMILY	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
● LIVING SITUATION	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
● SLEEP	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>

Individual Progress Report-William P.

- Compares a child's initial ratings to the two most recent assessments
- A rater may view the report if he or she has entered at least one assessment for the child
- Can cut and paste into Excel to create simple graphs
- Report provides list of "resolved" issues (when a "2" or "3" becomes a "0" or "1").
- Notes items requiring continued intervention
 - Most recent rating of "3"
 - Most recent rating of "2"

This report will enable the user to review the individual child's assessments across time.

Life Domain Functioning

Question	CANS Comprehensive - 5+ 10/18/2018	CANS Reassessment - 5+ 10/18/2018	CANS Comprehensive - 5+ 10/19/2018
FAMILY	2	2	1
LIVING SITUATION	2	1	1
SLEEP	0	0	0
SOCIAL FUNCTIONING	1	1	0
SEXUAL DEVELOPMENT	0	0	0
RECREATION	2	1	0
DEVELOPMENTAL	0	0	0
COMMUNICATION	0	0	0
JUDGMENT	2	2	1
ACCULTURATION	0	0	0
LEGAL	2	2	1
MEDICAL	0	0	0
PHYSICAL HEALTH	0	0	0
DAILY FUNCTIONING	0	0	0
INDEPENDENT LIVING - Rate "0" for children < age 14	0	0	0

Child Strengths/Resiliency

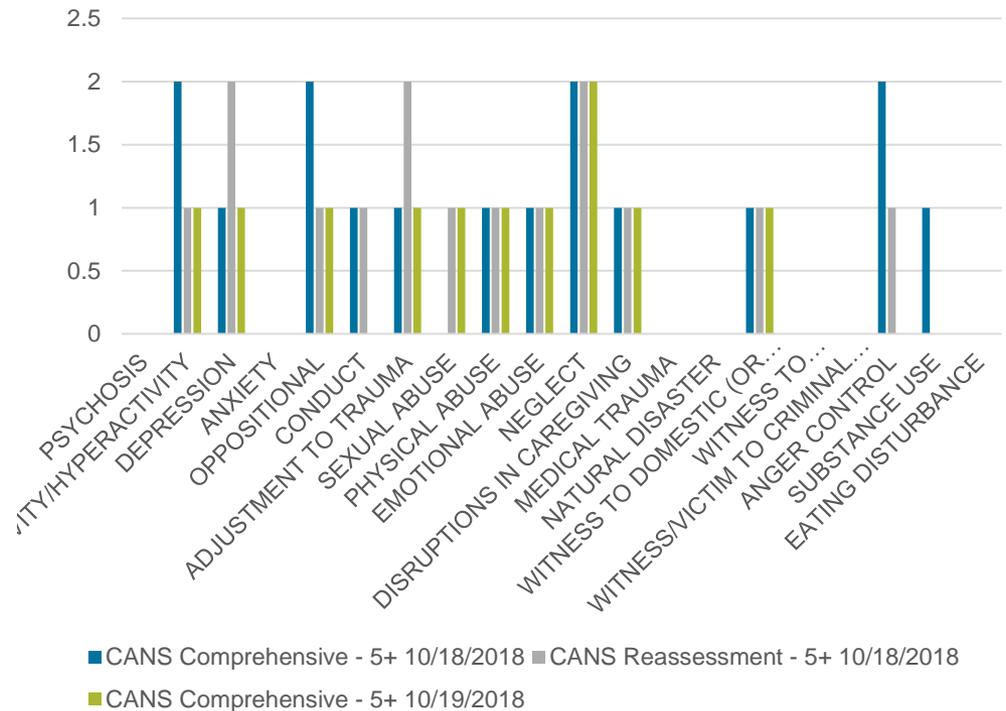
Question	CANS Comprehensive - 5+ 10/18/2018	CANS Reassessment - 5+ 10/18/2018	CANS Comprehensive - 5+ 10/19/2018
FAMILY	2	2	1
INTERPERSONAL	2	1	1
OPTIMISM	2	2	1

Individual Collaborative Report (Longevity Reports)

- Similar to the IPR except report has a number of filters such as:
 - Date range
 - Type of assessment
 - Can compare Initial to any assessment
 - Include or exclude discharge CANS

	CANS Comprehensive - 5+ 10/18/2018	CANS Reassessment - 5+ 10/18/2018	CANS Comprehensive - 5+ 10/19/2018
PSYCHOSIS	0	0	0
IMPULSIVITY/HYPERACTIVITY	2	1	1
DEPRESSION	1	2	1
ANXIETY	0	0	0
OPPOSITIONAL	2	1	1
CONDUCT	1	1	0
ADJUSTMENT TO TRAUMA	1	2	1
SEXUAL ABUSE	0	1	1
PHYSICAL ABUSE	1	1	1
EMOTIONAL ABUSE	1	1	1
NEGLECT	2	2	2
DISRUPTIONS IN CAREGIVING	1	1	1
MEDICAL TRAUMA	0	0	0
NATURAL DISASTER	0	0	0
WITNESS TO DOMESTIC (OR FAMILY) VIOLENCE	1	1	1
WITNESS TO COMMUNITY/SCHOOL VIOLENCE	0	0	0
WITNESS/VICTIM TO CRIMINAL ACTIVITY	0	0	0
ANGER CONTROL	2	1	0
SUBSTANCE USE	1	0	0
EATING DISTURBANCE	0	0	0

William Behavioral/Emotional Needs



DSS-Enhanced CANS

- Request from LDSS and VDSS to strengthen the CANS for child welfare
- Added in 2016:
 - Items to Trauma Module
 - Child Welfare Module
 - Reworded some items like "safety"
 - Ability to rate up to three individual caregivers

DSS-Enhanced CANS was launched with CANVaS 2.0 in February 2017.

DSS-Enhanced CANS

- Referral source on child's profile page must be "DSS" to generate "DSS-Enhanced" version of the age-appropriate CANS
- If referral source is not selected, system will default to Standard version

Rating the Caregiver

- Who is the Caregiver?
 - DSS-Enhanced allows rating up to 3 caregivers for concurrent planning
 - LDSS or another agency is never rated as the caregiver

- Rate the Caregiver assessment on how each item (need or strength) *affects that person's ability to care for the child.*
 - Caregiver assessment is the Caregiver Strengths and Needs and the Child Welfare module for the specific caregiver



Child Welfare Module

- Items are organized by Safety, Strengths and Commitment to Permanency
- Again, rate the prospective caregiver being considered
- If item does not apply (e.g., "commitment to reunification" for child still at home, rate "0")

Permanency Report

- Incorporates the Protective Factors in the Strengthening Families Framework
 - Safety
 - Knowledge of Parenting & Child Development
 - Identification and Use of Concrete Supports in Time of Need
 - Factors Contributing to Parent/Caregiver Resilience
 - Commitment to Permanency Plan Goal

Protective Factors



How to remember the 5 PROTECTIVE FACTORS that make your family strong.

Use your Thumb to remember **Social & Emotional Competence of Children** because a "thumbs up" is one of the first ways we learn to communicate our emotions.

Your Pinky Finger signifies **Concrete Support in Times of Need** because it is the smallest finger and reminds us that we all need help sometimes.

Your Index Finger represents **Knowledge of Parenting and Child Development** because you are your child's **1st** teacher!

Your Ring Finger stands for **Parental Resilience** because your first commitment must be to yourself in order to be strong for others.

Your Middle Finger can help you remember **Social Connections** because it should never stand alone! We all need a positive social network.

strengthening families

Charlevoix, Emmet Northern-Antrim Counties

Permanency Report-Diana and William P. and Caregivers

- Compares a caregiver's initial ratings to the two most recent assessments
- A rater may view the report(s) if he or she has entered at least one assessment for the child
- May view Permanency Reports for up to three individual caregivers



Permanency Report

- Items from the Parent/Caregiver Strengths and Needs Domain and the Child Welfare Module were selected for each Protective Factor
- Some items may appear under more than one Factor
- Report provides list of "resolved" issues (when a "2" or "3" becomes a "0" or "1").
- Notes items requiring continued intervention
 - Most recent rating of "3"
 - Most recent rating of "2"

100%

Find | Next

Find | Next



AM

CANVaS 2.0 Permanency Report

Page: 1 of

Caregiver Name:

Caregiver Relationship:

The user to examine the Parent/Caregiver assessment across time. The user will be able to generate this report for any o
essments.



	CANS Reassessment - 5+ 08/21/2017	CANS Comprehensive - 5+ 07/18/2018	CAN
	1	2	
	0	2	
E	1	2	
ENCE IN	0	2	
MENT	0	2	

at Recent Period (Change from 2 or 3 to 0 or 1)

ued Intervention

on and Use of Concrete Supports in Time of Need

Plan to Address Needs:

Plan to Address Needs:

ety

HOME - Safety

safety

Commitment to Permanency Plan Goal

ENT - Commitment to Permanency Plan Goal

ENT - Safety

Safety

Commitment to Permanency Plan Goal

nting & Child Development

ng & Child Development

Longevity Reports

Browser tabs: (10) Virginia CANS 5+ 1.0 - Onl..., pictures of paperwork - Bing i..., csa.virginia.gov, CANVaS 2.0

Address bar: https://www.csa.canvas.virginia.gov/Reports/CollaborativeF

File Edit View Favorites Tools Help

Starred: CANVaS 2 (3), http--www.csa.virginia.go..., http--www.csa.virginia.go..., CANVaS 2 (2), Legal Challenges ASPE, Office of Children's Services, http--spark.dss.virginia.go...

Page Safety Tools ?

Multi-Level Collaborative Formulation (Over Time) Report

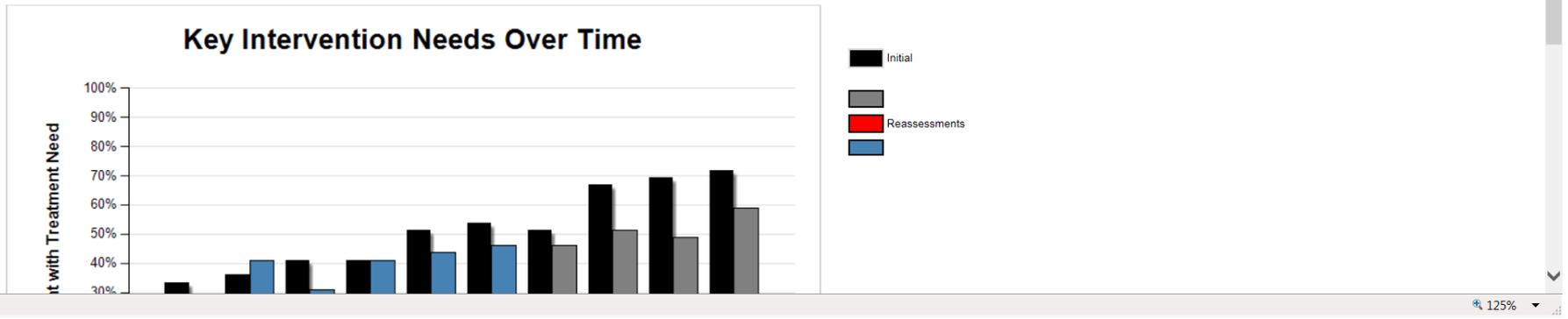
This report provides a comparison of frequently occurring actionable treatment needs over time for a particular cohort of children. The cohort is defined based on the date of their initial assessment (input the date +range into the Initial Start and Initial End date input boxes). The comparison reassessment(s) can be chosen using the "Reassessment" drop-down menu. Presented are the six most frequently endorsed treatment needs at entry into the Behavioral/Emotional Need or Risk Behavior Domains (items in blue for Behavioral/Emotional needs; the item in red for Risk Behaviors), and the four most frequently endorsed treatment needs from the Life Domain Functioning domain (items in grey). For each item, the first bar represents percentage of children with an actionable need at the first assessment point, and the second bar represents the percentage of children with an actionable need at the chosen reassessment time point. The locality filters are primary and based on the Users CANVaS 2.0 access permissions. This report is available according to User's permissions.

State: Virginia | Locality: Henrico | Case Manager: All | Assessment Type: 5+ Both | Initial Date Range Start: 1/1/2018 | Initial Date Range End: 1/1/2019 | Reassessment Days: 03 Months | Discharge: Include Discharge Summaries | Referral Source: All

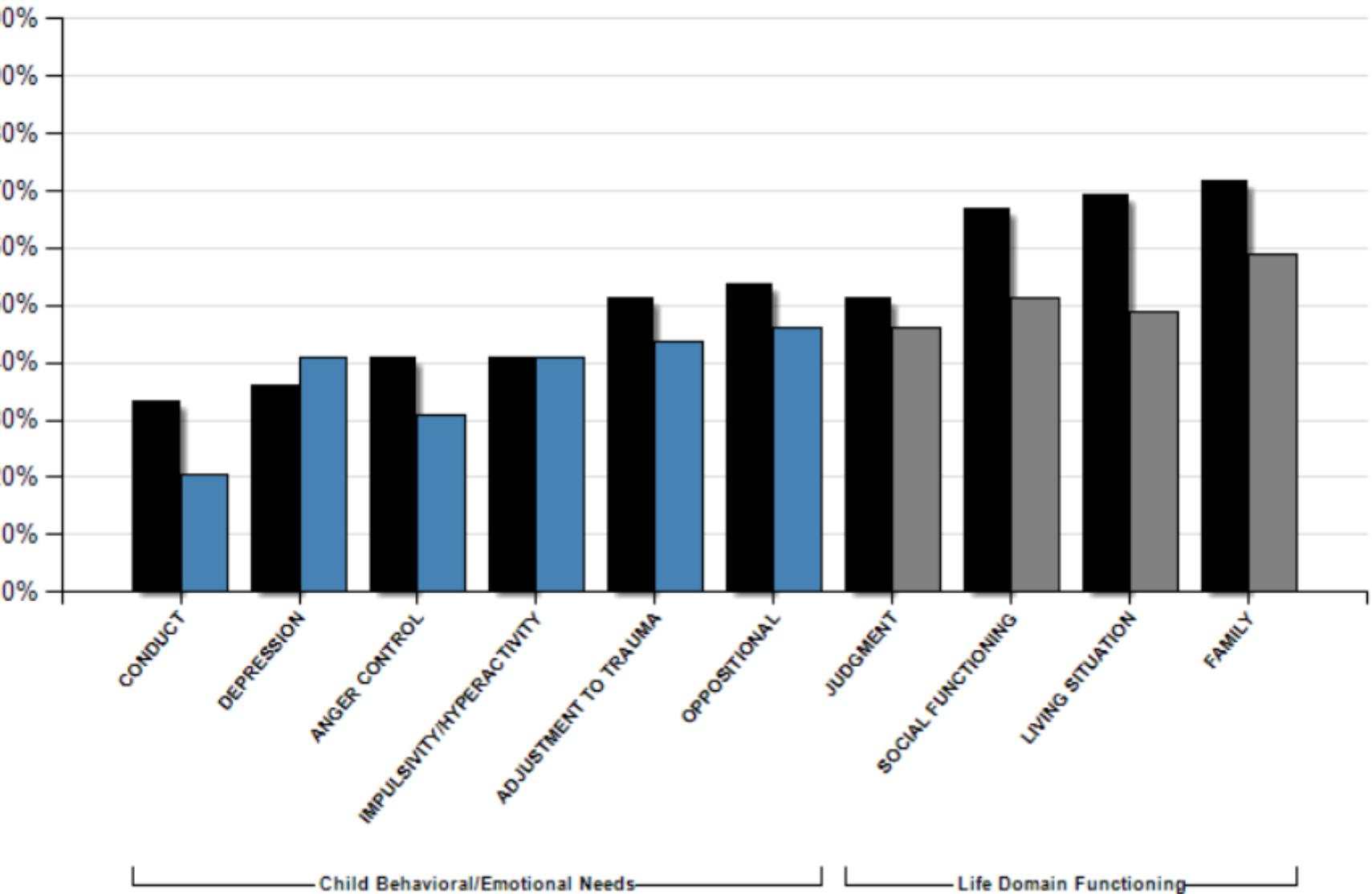
View Report

2 of 2 | 100%

Report Date: 2/11/2019 3:29:31 PM



Key Intervention Needs Over Time



Resources

- CANS folder on CSA website
<http://www.csa.virginia.gov/Cans>
- Documents folder on CANVaS 2.0 website
<https://www.csa.canvas.virginia.gov>
- CANS Training and Certification Site (Praed Foundation)
- <https://www.schoox.com/academy/CANSAcademy/home/>