**An Introduction**: The Child and Adolescent Needs and Strengths Assessment (CANS) is a comprehensive tool for children and families that helps identify clinical needs, individual and family strengths and drives treatment planning and monitoring of progress. The CANS is transparent, collaborative and values clinical judgement throughout the process.

**Why Now?** CANS is quickly catching on with mental health providers in the State of Vermont and has been used exceedingly in other states to create a shared vision across many system levels. It is particularly helpful in terms of how clinical outcomes are identified and utilized both on a micro and macro level. CANS is an essential part of creating a common language and a unique form of communication throughout the system of care.

**What is in this for Youth and Families?** The CANS is/will:

* **COMPREHENSIVE** and includes items from school, home and the community.
* **INTEGRATES A LOT OF INFORMATION** and helps store all of this important information in one centralized location.
* **HELP TO INFORM GOALS AND PLANS FOR TREATMENT/SERVICES/SUPPORT**. It can help guide clinical decision making, prioritization and avoids decisions the youth/family may view as arbitrary.
* Able to **TRACK PROGRESS** over time. This includes a visual representation of how problems and strengths appear to be changing over time.
* A **TRANSPARENT TOOL**. It is direct and clear with simple scoring so that youth and families can easily communicate out the results.

**What is in this for Staff who use CANS?** The CANS is/will:

* A tool that highlights **EVIDENCE AND OUTCOMES** in regard to the valuable services we provide to youth and families.
* Synthesize how we **TRACK SIX MONTH PROGRESS** for clients and will produce easy to read graphs for family and key players to provide a better understanding of the treatment landscape.
* Begin to draw a picture of **CASELOAD ACUITY** and define the overall labor and time management aspects of a given caseload in a quantitative way.
* **BILLED AS ASSESSMENT** (when attached to D & E) and is not limited to one session.
* **COMPREHENSIVE** and will ensure no priorities are missed in the assessment and development of the treatment plan.
* A **SUPERVISION TOOL** to track if a client is making progress, being served appropriately in the current service model or if there are additional services indicated.
* Allow for **CLINICAL COMPARISONS** of youth whom are receiving a single service versus those who receive multiple services and can help determine if these modalities have impacted progress.
* An **ENGAGEMENT TOOL** that can inform families and refocus services around appropriate areas of severity.

**Next Step:** All staff that use the CANS must be trained in the process of integrating information from the youth, family and other key players in the treatment of the child. Staff trained in CANS should be able to articulate the philosophy of CANS, effectively use CANS on a regular basis and be able to administer CANS in a person-centered and strength-based way.