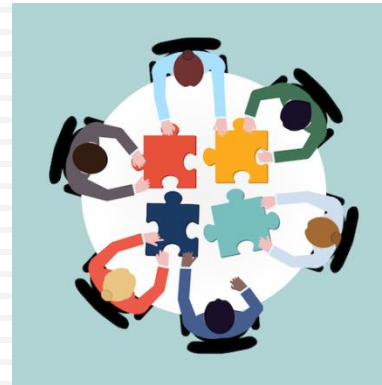


HOW SUPERVISORS CAN SUPPORT THEIR STAFF USING THE CANS FOR TREATMENT PLANNING

Matthew Hogan, LICSW – Northwestern Counseling & Support Services
Holly Reed, MSW – Northwestern Counseling & Support Services

Why Use the CANS?

- ❑ Supports organization of clinical information collected during an assessment
- ❑ Improves communication among those involved in the clients treatment planning
- ❑ Can be utilized as a decision support tool, quality improvement tool and outcome monitoring tool
- ❑ Determines what approach can be utilized to address needs and identify and build strengths.



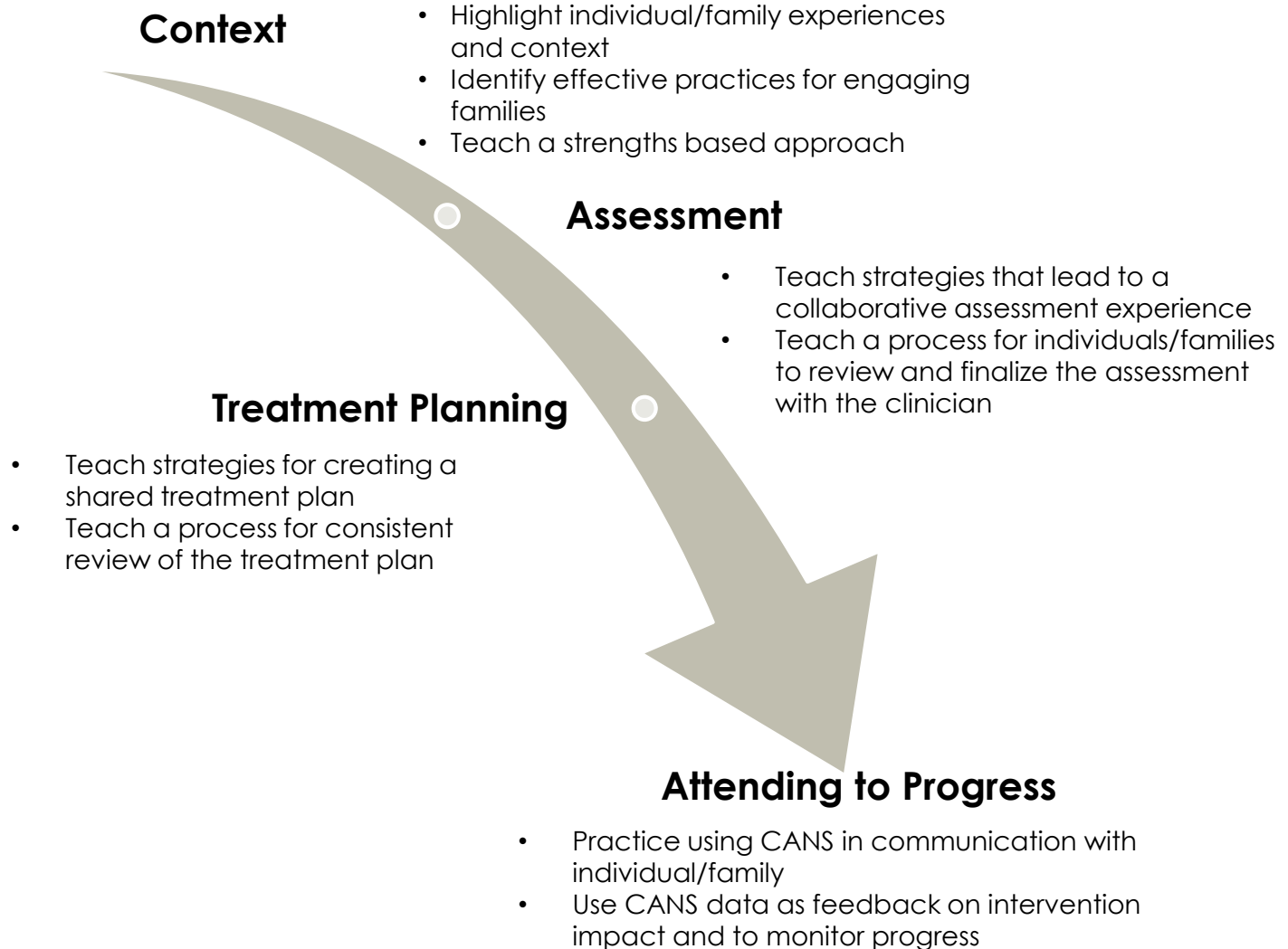
Supervisors Role in the CANS

- Supports development of staff using the CANS, determines whether staff need additional training and/or supports
- Ensure assessment practices are collaborative, authentic, culturally attuned and strengths/needs based
- Understand CANS items including: action levels, how to implement the CANS into a treatment plan and how to monitor treatment plans effectively
- Determine how to see change over time, track status of change
- Provide input, coaching and praising
- Support buy-in and compliance

“supervisors are key in determining whether the CANS remains a tool that is given, or is a strategy that helps clients and providers collaborate and communicate, and supports tracking personal change and transformation.”

Button, Suzanne; Fernando, April “[TCOM Supervision for CANS-NY](#)”

Supervision C-A-T-AP-ult

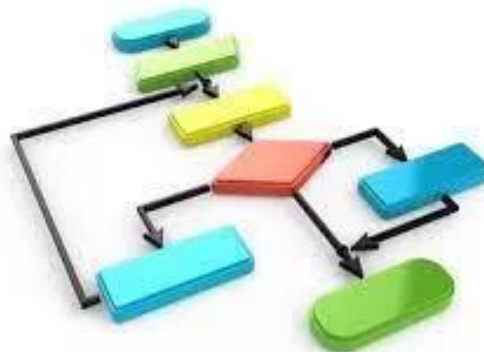


Treatment Planning

- **Summarize information from CANS assessment**
 - Areas needing actions (2's), areas needing immediate action (3's), useful strengths, strengths to build, trauma experiences
 - Link items – when a functioning problem is captured in two separate items
- **Develop a theory of change:**
 - Develop a shared vision statement
 - When our work is complete, what will be achieved?
 - What will change look like?
 - Organize needs into treatment targets, anticipated outcomes and background needs
 - Treatment Target- What is the root cause of this problem?
 - Anticipated Outcomes – What will change if we address the root cause?
 - Background Needs – Are there needs that help us understand the treatment target?
 - Organize useful strengths and identify strengths to build
 - Useful Strengths – strength that is useful in building protective factors or resolving needs.
 - Strengths to Build – any strengths that should be built into a useful strength or a strength that is not identified that could be built into a useful strength
- **Identify actions steps and goals**
 - Interventions to address treatment target
 - Articulate goals – what change do you wish to see?
 - Goals should be measurable and achievable

Treatment Planning:

- Including TCOM concepts onto treatment plans
 - “Shared Vision Statement”- purpose, long term goal
 - “Background Need”- relevant history
 - “Treatment Target” – short term objective
 - “Anticipated Outcomes” – goals
 - “Actions Steps” – interventions, activities, responsible parties



Treatment Planning Practice



Immediate/Intensive Action Needs:

- Depression
- Optimism

Action Needed

- Attention/Hyperactivity/Impulse Control
- Anxiety
- School Achievement
- School Attendance
- Interpersonal
- Community Connection
- Suicidal Thoughts/Behaviors

Centerpiece Strengths

- Educational system
- Relationship permanence
- (CG) Involvement with Care
- (CG) Knowledge
- (CG) Organization
- (CG) Residential Stability
- (CG) Physical Health
- (CG) Mental Health
- (CG) Safety
- (CG) Financial Resources

Useful Strengths

- Family Strengths
- Talents/Interest or Skills
- Resiliency
- Child Involvement with Care
- (CG) Supervision

TCOM Summary and Planning Tool

Areas Needing Action	Areas Needing Immediate Action
Useful Strengths	Strengths to Build
Trauma Experiences	

Treatment Targets	Background Needs	Anticipated Outcomes
Treatment Targets are causes; the root cause of the behavioral issue of functioning problem. These needs rated with a 2 or 3 are the intended target of the intervention.	Background Needs are needs rated with a 2 or 3 that will guide and intervention rather than be the focus of the intervention. These are typically more static and are helpful to consider when choosing the intervention or guiding the approach.	Anticipated Outcomes are effects. These needs rated a 2 or 3 are the change you expect to achieve if the intervention is successful. In some instances, the item selected as the Treatment Target will be the same item identified as the Anticipated Outcome.
Useful Strengths	Strengths to Build	
The identified and useful strength is useful in either resolving identified needs and/or building protective factors (enhancing long-term well-being).	An identified, but not useful strength (rated a 2), that should be built into useful strengths or a strength that is not identified that should be built into a useful strength.	

Treatment Planning:

CANS MAPPING TO TREATMENT PLAN

Manual not intended to be a prescriptive document, but more of a guide to develop treatment plans based upon CANS & family needs identified in CANS

CANS DOMAIN	TX GOAL & CODE
Child Behavior/Emotional Needs	
Psychosis	Psychosis/Thought Disorder- 00130 *consider referral to psychiatry: Psychiatry Needs- 00248
ADHD	Impulsivity- 00117 Inattention- 00108 Communication- 00216
Depression	Depression- 00264 Grief/Loss- 00115 Mood Disturbance- 00120
Anxiety	Anxiety- 00106 Obsessive Thoughts- 00121 Transitions- 00259 Emotional Processing- 00258
Oppositional	Aggressive Behaviors- 00104 Behavioral Skills- 00221 Maladaptive Behaviors- 00261 Self-Regulation- 00218 Anxiety- 00106
Conduct	Aggressive Behaviors- 00104 Antisocial Behaviors- 00107 Public Safety- 00220 Behavioral Skills- 00221 Maladaptive Behaviors- 00261 Anger Management- 00224
Adjustment to Trauma	Anxiety- 00106 Anger Management- 00224 Aggressive Behaviors- 00104 Behavioral Skills- 00221 Self-Regulation- 00218 Mood Disturbance- 00120 Emotional Processing- 00258 Trauma Symptoms- 00131 PTSD- 00123 Sleep Disturbance- 00125 Depression- 00264 Impulsivity- 00117 Inattention- 00108
Life Domain Functioning	
Family	Adjustment to Life Changes- 00102 Family Conflict- 00113 Parenting Supports- 00232 Divorce- 00020

	Communication- 00216
Cultural Stress	Sexual/Gender Identity- 00018 Link to Community Access- 00254 Personal Growth- 00223 Spiritual/Cultural Issues- 00128 Access to Community Resources- 00255
Living Situation	Aggressive Behaviors- 00104
Living Situation (cont'd)	Behavioral Skills- 00221 Communication- 00216 Family Conflict- 00113 Housing Issues- 00116 Parenting Supports- 00232
Developmental	Transitions- 00259 Maladaptive Behavior- 00261 Life Skills- 00225 Child Development- 00256 ADL skills- 00103 Social/Relational- 00126 Behavioral Skills- 00221
Self-Care/Daily Living	ADL Skills- 00103 Independent Living Skills- 00214 Life Skills- 00225 Self-Care- 00213 Encopresis/Enuresis- 00008
Child Strengths	
Family Strengths	Communication- 00216 Parenting Supports- 00232 Divorce- 00020 Emotional Processing- 00258 Family Conflict- 00113
Interpersonal	Personal Growth- 00223 Social/Relational- 00126 Self-Regulation- 00218
Optimism	Self-Care- 00213 Personal Growth- 00223 Self-Esteem- 00124
Educational System	School Attendance- 00262 Educational Resources- 00212 *assess with family and school team, what the specific needs are... communication? More support? Evals?
Talents/Interests	Personal Growth- 00223 Self-Esteem- 00124 Access to Community Resources- 00255
Spiritual/Religious	Personal Growth- 00223 Spiritual/Cultural Issues- 00128
Community Connection	Linkage to Community Access- 00254 Personal Growth- 00223
Relationship Permanence	Communication- 00216 Divorce- 00020 Family Conflict- 00113 Child Development- 00256

Treatment Planning:

	Grief/Loss- 00115 Parenting Supports- 00232
Caregiver Needs & Strengths	
Supervision	Parenting Supports- 00232 Knowledge of Child Development- 00256
Involvement with Care	Parenting Supports- 00232 Knowledge of Child Development- 00256
Knowledge of Child Needs	Parenting Supports- 00232 Knowledge of Child Development- 00256
Organization	Parenting Supports- 00232
Natural Supports	Access Community Resources- 00255 Community Access- 00254
Residential Stability	Financial/Budget Stress- 00114 Housing Issues- 00116 Parenting Supports- 00232 Community Access- 00254
Physical Health Mental Health Substance Use Developmental	Prenatal/Postpartum- 00260 <i>*Referrals as needed to address specific mental health needs of caregiver- substance use, medical support etc</i>
Safety	Parenting Supports- 00232 Knowledge of Child Development- 00256
Financial Resources	Housing Financial Employment Education <i>*consider referrals as needed</i>
Child Risk Behaviors	
Suicidal Thoughts/Behavior	Suicidal Ideation- 00129 Self-Regulation- 00218 Depression- 00264 Emotional Processing- 00258
Non-Suicidal Self Injury	Self-Regulation- 00218 Depression- 00264 Emotional Processing- 00258 Suicidal Ideation- 00129 Adjusting to Life's Changes- 00102 Anxiety- 00106 PTSD- 00123 Impulsivity- 00117
Danger to Others	Aggressive Behaviors- 00221 Anger Management- 00224 Antisocial Behaviors- 00107 Public Safety- 00220
Sexually Problematic/Harmful Behavior	Maladaptive Behaviors- 00261 Public Safety- 00220 Sexual Education Skills- 00222 Behavioral Skills- 00221

Runaway	Impulsivity- 00117 Maladaptive Behaviors- 00261 Self-Regulation- 00218
Delinquency	Public Safety- 00220 Legal Issues- 00119
Fire Setting	Public Safety- 00220 Mood Disturbance- 00120 Impulsivity- 00117
Fire Setting (cont'd)	Obsessive Thoughts- 00121 Psychosis/Thought Disorder- 00130 Parenting Supports- 00232

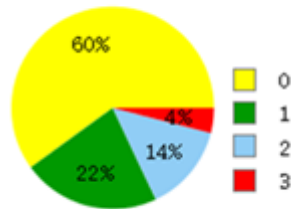
Attending to Progress:

- Decision Support
 - Treatment planning
 - Eligibility for services/programming
 - Transition/Discharge Planning
- Outcomes Monitoring
 - Assess progress for family and youth
 - Program evaluation
- Quality Improvement
 - Identify training gaps
 - Understand community needs
 - Manage caseloads of staff



Monitoring Progress: Individual

Initial Assessment
03/02/2017



Immediate/Intensive Action Needed

-DEPRESSION- Clear evidence of disabling level of depression that severely impacts child's ability to function in any life domain.

-OPTIMISM- Child has difficulties seeing any positives about him/herself or his/her life.

□

Action Needed

-ATTENTION/HYPERACTIVITY/IMPULSE CONTROL- Moderate attention/hyperactivity or impulse control problems.

-ANXIETY- Clear evidence of anxiety associated with either anxious mood or significant fearfulness. Anxiety has interfered significantly in child's ability to function in at least one life domain.

-SCHOOL ACHIEVEMENT- Child is having moderate problems with school achievement. He/she may be failing some subjects.

-SCHOOL ATTENDANCE- Child is having problems with school attendance. Child is missing at least two days each week on average.

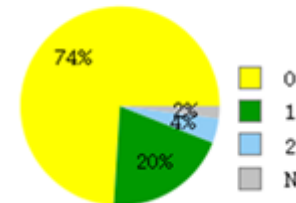
-INTERPERSONAL- Mild level of interpersonal strengths. Child has some social skills that facilitate positive relationships with peers and adults but may not have any current healthy friendships.

-COMMUNITY CONNECTIONS- Child has limited ties and/or supports from the community.

-SUICIDAL THOUGHTS/BEHAVIOR- Recent ideation or behavior but not in the past 24 hours.

Score	Needs	Strengths
0	No Evidence	Centerpiece Strength
1	Watchful Waiting	Useful Strength
2	Action Needed	Identified Strength
3	Immediate/Intensive Action Needed	No Strength Identified

Current Assessment
02/27/2019



Immediate/Intensive Action Needed

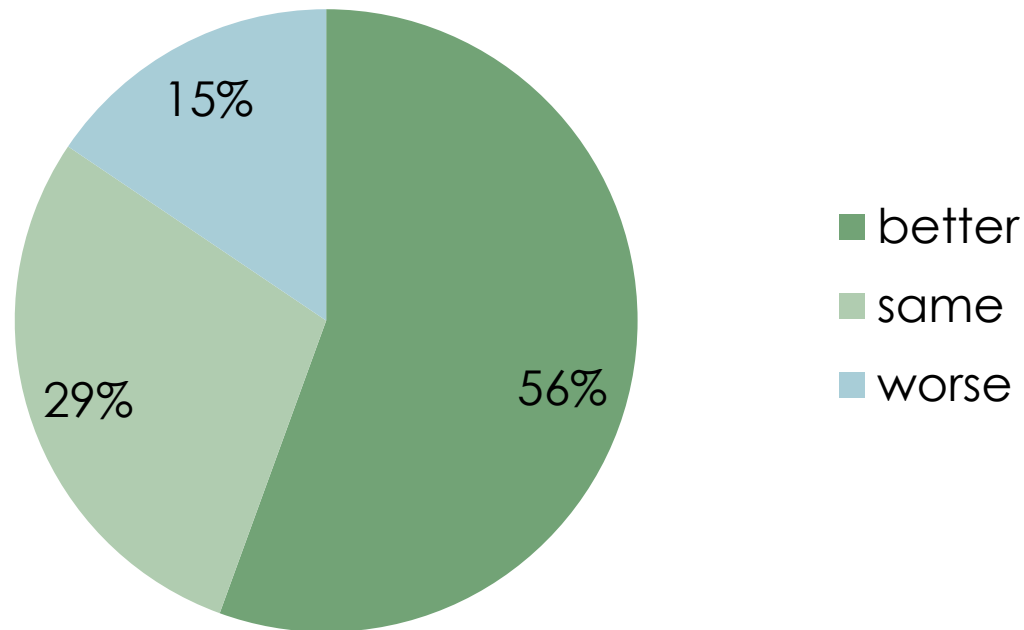
Action Needed

-(CAREGIVER) NATURAL SUPPORTS- Caregiver requires support to access their social network, neighbors, family or friends who may be able to help with caring for the child.

-SPIRITUAL/RELIGIOUS- Child desires more access to spiritual and/or religious resources than they are currently able to obtain. Or child is struggling with current spiritual and religious beliefs and requires more support in order to utilize this interest as a strength.

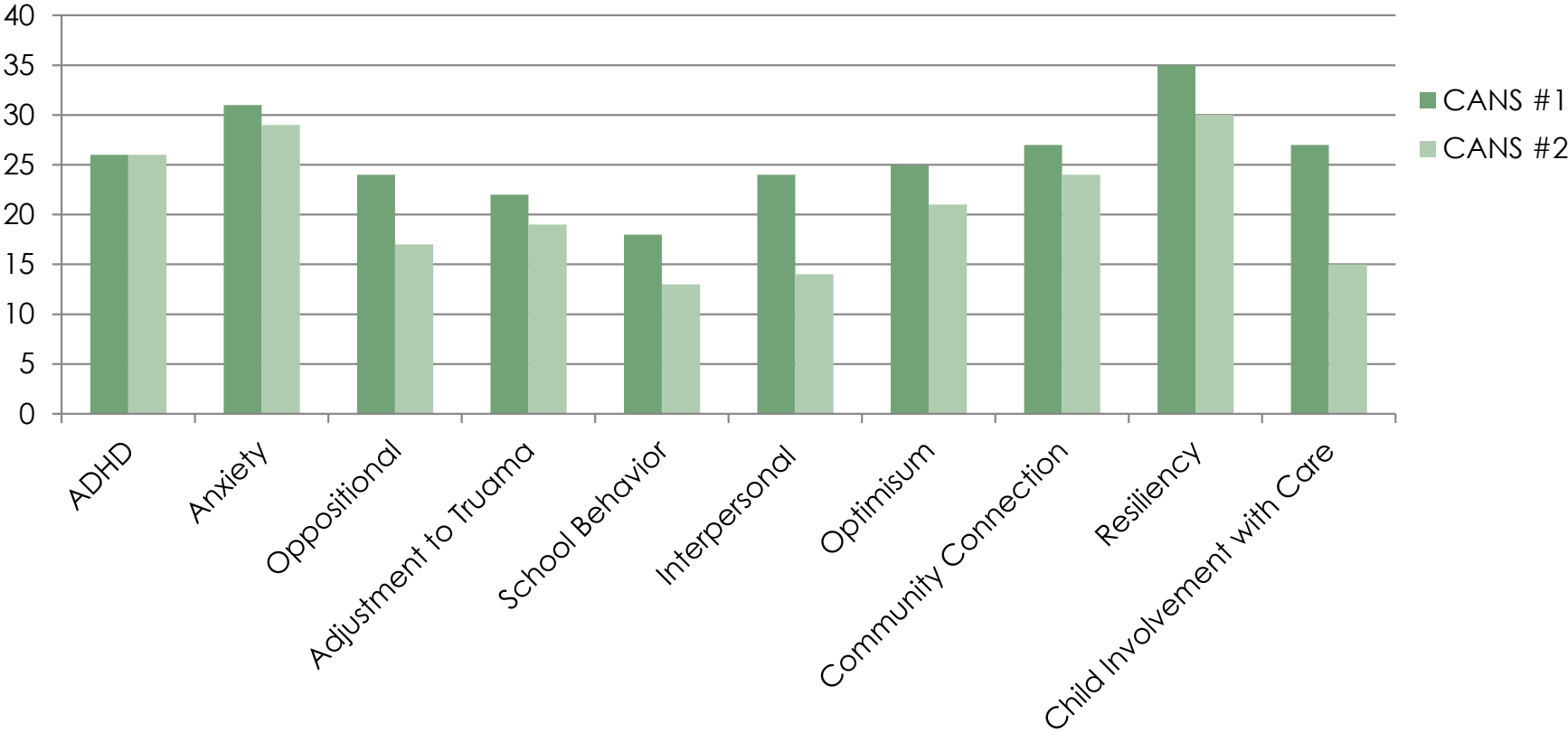
Monitoring Progress: Team

Progress at Discharge for Community Support Clients (10-08)



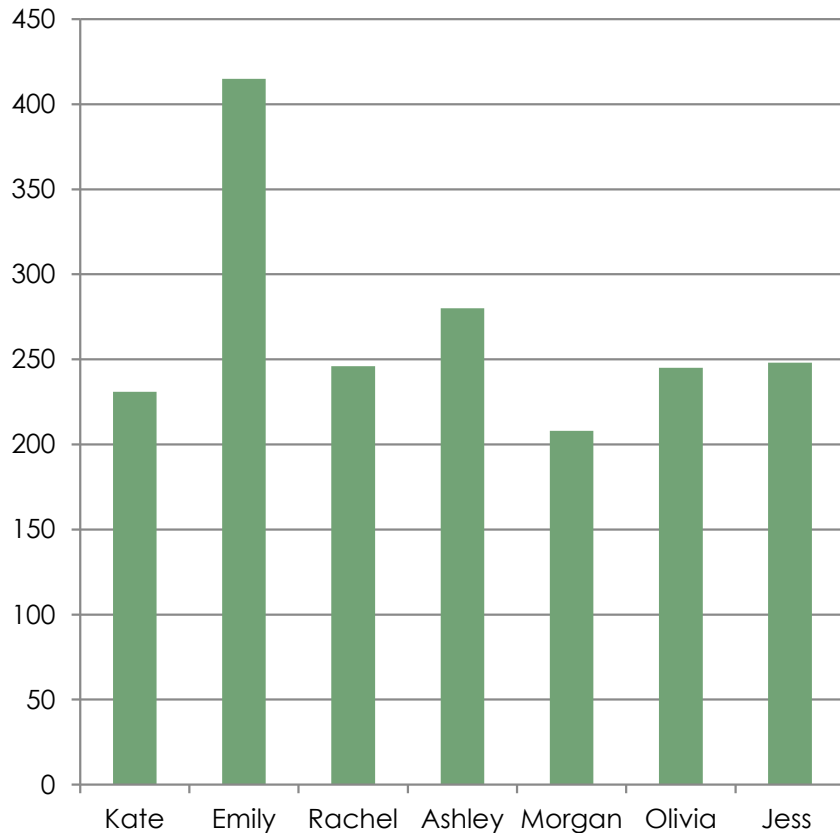
Progress Monitoring: Team

Top Needs for Community Support Clients (10-08)

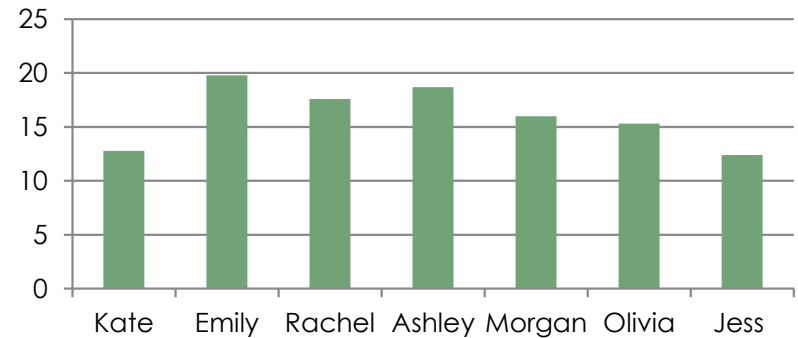


Progress Monitoring: Team

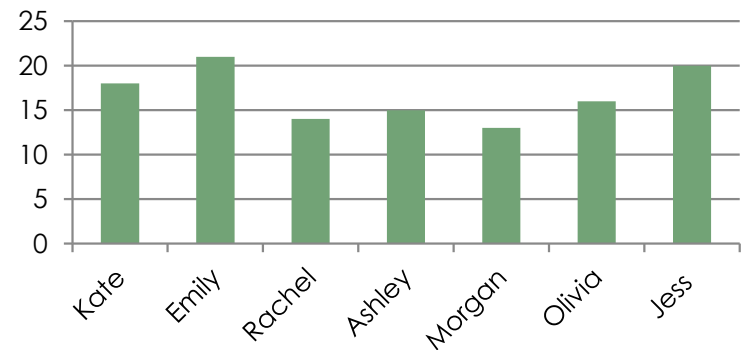
Caseload Severity Score



Average Severity Scores



Numer of clients



Resources:

- Button, Suzanne; Fernando, April “TCOM Supervision for CANS-NY” Powerpoint
- Fernando, April; Rosenblatt, Erin “Taking Back Supervision: TCOM, Treatment Planning and Clinical Supervision.” Powerpoint
- <https://www.schoox.com/802674/action-planning-development>
- Krompf, Alison; Burns, Dillon; Omland, Laurel; Bilodeau, Cheryle “Implementing CANS at Your Agency” Powerpoint