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

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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

Context
- Highlight individual/family experiences and context
- Identify effective practices for engaging families
- Teach a strengths based approach

Assessment
- Teach strategies that lead to a collaborative assessment experience
- Teach a process for individuals/families to review and finalize the assessment with the clinician

Treatment Planning
- Teach strategies for creating a shared treatment plan
- Teach a process for consistent review of the treatment plan

Attending to Progress
- Practice using CANS in communication with individual/family
- Use CANS data as feedback on intervention impact and to monitor progress
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

<table>
<thead>
<tr>
<th>Areas Needing Action</th>
<th>Areas Needing Immediate Action</th>
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<table>
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Trauma Experiences

<table>
<thead>
<tr>
<th>Treatment Targets</th>
<th>Background Needs</th>
<th>Anticipated Outcomes</th>
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<tbody>
<tr>
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Useful Strengths

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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

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

<table>
<thead>
<tr>
<th>CANS DOMAIN</th>
<th>TX GOAL &amp; CODE</th>
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<tbody>
<tr>
<td>Child Behavior/Emotional Needs</td>
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<tr>
<td>Psychosis</td>
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<td></td>
<td>Obsessive Thoughts - 00211</td>
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<td></td>
<td>Transitions - 00240</td>
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<td>Emotional-Processing - 00198</td>
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<td>Self-Regulation - 00115</td>
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<td>Conduct</td>
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<td>Antisocial Behavior - 00107</td>
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<td>Life Domain: Functioning</td>
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<td>Family</td>
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<td>Parenting Support - 00212</td>
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<td>Divorce - 00030</td>
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</tbody>
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### Cultural Stress
- Sexual/Gender Identity - 00018
- Link to Community - 00104
- Personal Growth - 00222
- Spiritual/Cultural Issues - 00113
- Access to Community Resources - 00256

### Living Situation
- Aggressive Behaviors - 00104
- Behavioral Skills - 00211
- Communication - 00166
- Family Conflict - 00113
- Housing Issues - 00116
- Parenting Supports - 00222

### Developmental
- Transitions - 00159
- Maladaptive Behavior - 00121
- Life Skills - 00215
- Child Development - 00216
- AOD Issues - 00269
- Social/Recreational - 00120
- Behavioral Skills - 00221

### Self-Care/Daily Living
- AOD Skills - 00205
- Independent Living Skills - 00114
- Life Skills - 00215
- Self-Care - 00113
- Coping/Enthusiasm - 00008

### Family Strengths
- Communication - 00126
- Parenting Support - 00222
- Divorce - 00030
- Emotional Processing - 00128
- Family Conflict - 00113

### Interpersonal
- Personal Growth - 00220
- Social/Recreational - 00120
- Self-Esteem - 00114

### Optimism
- Self-Care - 00113
- Personal Growth - 00220
- Self-Esteem - 00124

### Educational System
- School Attendance - 00262
- Educational Resources - 00212
- "how is school connected with family?"

### Talents/Interests
- Personal Growth - 00220
- Self-Esteem - 00114
- Access to Community Resources - 00256

### Spiritual/Religious
- Personal Growth - 00220
- Spiritual/Cultural - 00120
- Access to Community Resources - 00256

### Community Connections
- Linkage to Community - 00104
- Personal Growth - 00220

### Relationship Permanence
- Communication - 00126
- Divorce - 00030
- Family Conflict - 00113
## Treatment Planning:

<table>
<thead>
<tr>
<th>Caregiver Needs &amp; Strengths</th>
<th>Supervision</th>
<th>Involvement with Care</th>
<th>Knowledge of Child Needs</th>
<th>Organization</th>
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### Child Risk Behaviors

- **Suicidal Thoughts/Behavior**
  - Suicidal Ideation - 00119
  - Self-Harm - 00120
  - Depression - 00124
  - Emotional Processing - 00208

- **Non-Suicidal Self-Harm**
  - Self-Harm - 00119
  - Depression - 00154
  - Emotional Processing - 00550
  - Suicidal Ideation - 00139
  - Adjustment to life's changes - 00192
  - Anxiety - 00206

- **Danger to Others**
  - Aggressive behavior - 00334
  - Anger Management - 00224
  - Antisocial Behavior - 00177
  - Public Safety - 00210

- **Sexually Provocative/Harmful Behavior**
  - Misapplied Behavior - 00861
  - Public Safety - 00210
  - Sexual Education Skills - 00212
  - Behavioral Skills - 00215

- **Runaway**
  - Impulsivity - 00117
  - Maladaptive Behaviors - 00241
  - Self-Deception - 00213

- **Delinquency**
  - Public Safety - 00220
  - Legal Issues - 00140

- **Fire Setting**
  - Public Safety - 00220
  - Mood Disorder - 00120
  - Impulsivity - 00117
  - Obsessive Thoughts - 00121
  - Psychosis/Thought Disorder - 00150
  - Parenting Supports - 00332
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

**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 himself 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 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 the past 24 hours.

-(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 then 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)

- Better: 56%
- Same: 29%
- Worse: 15%
Progress Monitoring: Team

Top Needs for Community Support Clients (10-08)
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