VERMONT CANS 2.0

Key Principles and Strategies for Practice

Suzanne Button, Ph.D.
TCOM Team/Praed Foundation

TC⬤M

Fb/twitter: @Praedfoundation   tcomconversations.org

1

Today's Agenda

9:00 to 10:00	Introductions & TCOM Refresher
10:00 to 10:30	Communimetrics & Using the Action Levels
	10:30 Break
10:45 to Noon	Teaming & Consensus-Based Assessment
	Noon Lunch
1:00 to 1:45	Consensus Building Strategies
1:15 to 2:30	Collaborative Treatment Planning in a TCOM Framework; Small Group Practice
	2:30 Break
2:40 to 3:00	TCOM Data Use
3:00 to 3:15	Certification & TCOM Practice: Resources and Supports
3:15 to 4:00	Q&A; Wrap Up

2

3

3

Transformational Human Serving Systems Should Be Effective.

4

TCOM: Engineering Personal Change

Transformational Collaborative Outcomes Management

- **Transformational:** Our work is focused on personal change.
- **Collaborative:** We must develop a shared understanding and vision.
- **Outcomes:** What we measure is relevant to the decisions we make about the strategies and interventions we use.
- **Management:** Information gathered is used in all aspects of managing the system from planning for individuals and families, to supervision, and program/system operations.

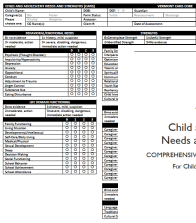Fb/twitter: @Praedfoundation   tcomconversations.org

5

TCOM: The Journey Through Care

Engagement — Collaborative Assessment — Action Planning — Monitoring and Adjusting — Transition

Information from TCOM tools such as the CANS are designed to follow the course of the child/youth and family from system engagement to goal attainment and transition. Person-centered information is used to support decision-making at every level of the system.

6

6

TCOM Strategy

The CANS is part of a suite of tools that are used as a strategy for:

- organizing information
- improving communication
- building consensus in an integrated, collaborative and transparent service context

VERMONT
Child and Adolescent
Needs and Strengths 2.0
COMPREHENSIVE MULTISYSTEM ASSESSMENT
For Children and Youth Ages 3-22

2019 REFERENCE GUIDE

7

How is a Transformational System Different?

Component	Service System	Transformational System
Assessment	Eligibility focus: Manage 'hello' (Access)	Change focus: Balance 'hello and goodbye' (Access and Egress)
Supervision	Time spent & compliance	**Teaching effectiveness**
Productivity	Caseload management	Workload management
Population Served	Incentives to serve the least challenging	Incentives to serve the most challenging
System Priority	Serve as many people as inexpensively as possible	Serve as many people as effectively as possible

Fb/twitter: @Praedfoundation   tcomconversations.org

8

COMMUNIMETRICS & USING THE ACTION LEVELS

Refresher

Fb/twitter: @Praedfoundation   tcomconversations.org

9

COMMUNIMETRICS

Communimetrics is designed to make thinking processes transparent and provide a conceptual organization or framework for the thinkers to be attuned to the relevant factors that must be thought through in any particular circumstance.

Lyons (2009)

10

---

6 Key Principles of a Communimetric Tool

01 Items are selected because they are relevant to service/case planning.

02 Each item uses a 4-item rating scale that translates into action.

03 Rating should describe child/youth, not the child/youth in services.

04 Consider culture and development before determining ratings.

05 The ratings are agnostic as to etiology; it's about the *What*, not the *Why*.

06 Use a 30-day window in considering what is relevant to children, youth and their families.

11

What does "translate into action" mean?

- Action levels contextualize a person's circumstances.
- Action levels can suggest a target of an intervention.
- Action levels can point to what might change (an outcome) as a result of an intervention.

Background Needs — Care Plan Target Needs — Functional Outcome Needs

Fb/twitter: @Praedfoundation   tcomconversations.org

12

Slide 13

Action Levels: Needs

3	**Need is dangerous or disabling** Immediate action/intensive action required.
2	**Need interferes with functioning** Action/Intervention required.
1	**Significant history of need; or possible need that is not interfering with functioning** Watchful waiting/prevention/additional assessment.
0	**No Evidence of Need** No action needed.

13

Slide 14

Needs: Think about functioning to determine the action level...

The basic design for rating NEEDS

Rating	Level of Need	Appropriate Action
0	No evidence of need.	No action needed.
1	Significant history or possible need that is not interfering with functioning.	Watchful waiting / prevention / additional assessment.
2	Need interferes with functioning.	Action / Intervention required
3	Need is dangerous or disabling.	Immediate action / Intensive action required

Fb/twitter: @Praedfoundation   tcomconversations.org

14

Slide 15

Example: Shawn

Shawn's parents worry that he is not getting enough sleep at night because of playing video games with this friends. Shawn agrees. Shawn reports that he is very tired at school, and that his grades are slipping in one course because it is scheduled for early morning, when he is the most tired.

Shawn says he catches up on sleep every weekend, and that other schoolwork and activities are going well.

04 What ACTION LEVEL applies?
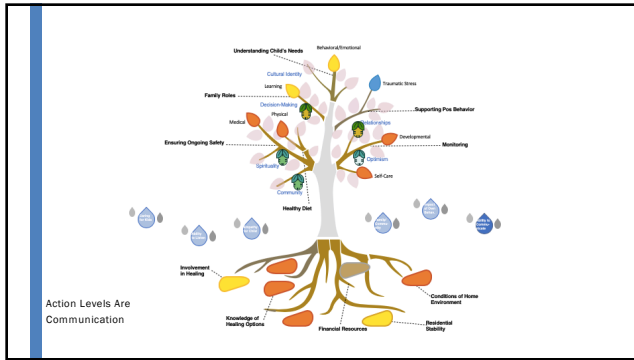
01 Evidence of a need in Sleep?

02 Is the need interfering with functioning?

03 Is the need dangerous or disabling?

ACTION

15

Action Levels Are Communication

16

Action overrides anchor.

17

Action Levels: Strengths

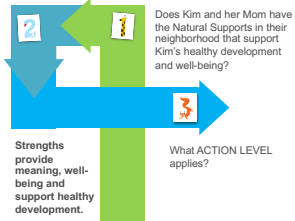|	
3	**Currently not a strength** Considerable building/effort required to identify or create strengths.
2	**Strength is potentially useful** Strength requires building in order to be useful to the individual or for planning.
1	**Strength is useful** Strength is evident and can be accessed; Strength could be useful for planning.
0	**Well-developed centerpiece strength** Easily accessible and very useful for the individual and for planning.

18

Example: Kim

Kim (who is 12) and her Mom have lived in the same neighborhood since she was two. They know all the neighbors well. When Mom is at work, neighbors help by getting Kim off the bus, feeding her a snack, and helping her with schoolwork. Kim's Mom has become particularly close to an elderly woman next door. She and Kim call her "Grandma," and they are invited to dinner at her house most Sundays.

If Kim's Mom is struggling with the stress of being a single parent, can you build a care plan around the natural supports that they have?

2

1

Does Kim and her Mom have the Natural Supports in their neighborhood that support Kim's healthy development and well-being?

3

What ACTION LEVEL applies?

Strengths provide meaning, well-being and support healthy development.

19

Strengths: Think about whether the individual can use a strength to determine the action level….

The basic design for rating STRENGTHS

| Rating	Level of Strength	Appropriate Action
0	Centerpiece strength.	Central to planning.
1	Strength present.	Useful in planning.
2	Identified strength.	Build or develop strength.
3	No strength identified	Strength creation or identification may be indicated.

Fb/twitter: @Praedfoundation   tcomconversations.org

20

Principle 3: Deeper Dive

✓ "Ratings should describe the child or youth, not the child or youth in services."

✓ Another way to think about this principle is to think about "masking."

✓ If an intervention is present that is masking a need (as opposed to resolving a need) that need should be rated as if the intervention were not present.

✓ "Would this need be actionable again if the service providing support around the need is withdrawn?"

✓ This principle asks us to think about the services, treatments and interventions that are in place.

✓ What are some services that you or your colleagues provide that might mask in some cases, improve in some cases, and resolve in other cases?
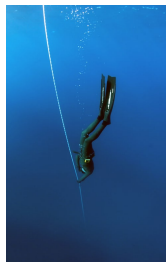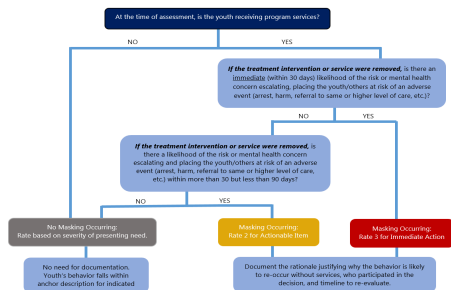
21

Small Group Exercise: Practicing the Third Key Principle

- Divide into groups of three or four
- Read the mini—vignette
- Talk through the vignette using the Principle 3 Decision Tree handout
- Assign a rating

- Let's practice one together!

22

At the time of assessment, is the youth receiving program services?

NO   YES

If the treatment intervention or service were removed, is there an immediate (within 30 days) likelihood of the risk or mental health concern escalating, placing the youth/others at risk of an adverse event (arrest, harm, referral to same or higher level of care, etc.)?

NO   YES

If the treatment intervention or service were removed, is there a likelihood of the risk or mental health concern escalating and placing the youth/others at risk of an adverse event (arrest, harm, referral to same or higher level of care, etc.) within more than 30 but less than 90 days?

NO   YES

No Masking Occurring: Rate based on severity of presenting need.

Masking Occurring: Rate 2 for Actionable Item

Masking Occurring: Rate 3 for Immediate Action

No need for documentation. Youth's behavior falls within anchor description for indicated

Document the rationale justifying why the behavior is likely to re-occur without services, who participated in the decision, and timeline to re-evaluate.

23

15 Minute Break

24

COLLABORATIVE ASSESSMENT & ENGAGEMENT

Seeking the Truth Through the Story

Fb/twitter: @Praedfoundation   tcomconversations.org

25

TCOM IS NOT EASY

What do you value in a good team (a team whose work leads to good outcomes)?

What are the challenges of building a good team? Teaming?

Sometimes I think the collaborative process would work better without you.

Fb/twitter: @Praedfoundation   tcomconversations.org

26

Using the CANS in Assessment

Collaborative Teaming

27

How the CANS Should Be Used

- Clearly communicate the purpose of the involvement with the family.
- Develop an understanding of the family's past experiences, current situation, concerns, strengths, and potential.
- Demonstrate respect, genuineness, and empathy for all family members, as defined by the family.
- Actively listen to each family member.
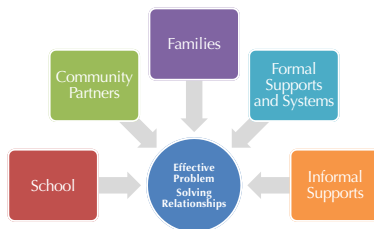- Respond to families' concrete needs quickly.

Fb/twitter: @Praedfoundation   tcomconversations.org

2
8

28

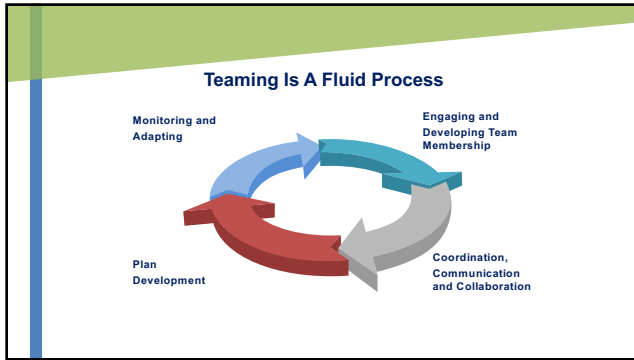---

Constructive Relationships & Support Networks

- Families
- Community Partners
- Formal Supports and Systems
- School
- Informal Supports
- Effective Problem Solving Relationships

29

How Does the CANS Support Communication and Consensus?

The **Team** is the vehicle for collaboration and communication on assessment, care planning and outcomes monitoring.

- Summarizes the Assessment Process
- Integrates the Family's Story
- Develops a Shared Vision
- Supports Change Management

30

Teaming Is A Fluid Process

Monitoring and Adapting

Engaging and Developing Team Membership

Plan Development

Coordination, Communication and Collaboration

31

Relevant Item Grid

Useful Strengths	Strengths to Build
Strengths to Use (0's and 1's) • from Strength Domain for child/youth • from the Caregiver Resources & Needs Domain that constitute strengths for Caregiver(s)	Strengths to Build (2's and 3's) from Strength Domain for child/youth
Target Needs – Child/Youth	**Target Needs – Caregiver(s)**
2's and 3's from all Child Domains & Relevant Extension Modules	2's and 3's from Caregiver Resources & Needs Domain

32

Small Group Exercise: Organize Needs & Strengths for Julia & Family

33

Using the CANS in Assessment

Assessment & Engagement Skills

34

The Collaborative Assessment: Part of a Larger Process

IDENTIFY NEEDS & STRENGTHS | SET FUNCTIONAL GOALS | IDENTIFY RESOURCES & INTERVENTIONS | TRACK PROGRESS GIVE FEEDBACK | MAKE PLAN ADJUSTMENTS | CELEBRATE ACCOMPLISHMENTS

Fb/twitter: @Praedfoundation   tcomconversations.org

35

"The output of the process of understanding should be a prioritization based on what can be done to HELP."
John Lyons

36

Why assess collaboratively?

▪ Consensus-based assessment is a conflict resolution strategy of getting on the same page.

▪ Consensus-based assessment is an engineering solution. We find out what is happening, why it is happening, how we will help.

▪It is much easier to reach consensus about what as opposed to why. Shame and blame is in the why.

Fb / twitter/ @Praedfoundation   tcomconversations.org

37

Skills Associated with Assessment
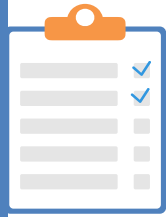
✓Assess and respond to current level of youth/family engagement

✓Conduct a comprehensive assessment that engages the youth and family.

✓Identify barriers to family/youth participation in the assessment.

✓Begin to build consensus on the multiple perspectives of the family's story.

✓Collaborate to integrate information from multiple sources (the CANS-NY can help).

38

Approaches to Administering the CANS

Approaches	Individualistic	Culturally Sensitive	Family and Youth Centered	Efficient
FLYING SOLO	Extremely (wrong Individual)	Not Likely	Not Likely	YES
TABULA RASA	Possibly (Not often)	Possibly (Not likely)	Perhaps	Not Terribly
PRIORITIZING	Possibly (Not Always)	Possibly	Possibly	Extremely
ADVANCED SCORING	YES	YES	YES	YES

39

Training Exercise: Introducing TCOM & CANS-NY

- Break into groups of 3.
- In your team, develop a creative intro that will help partners (youth, family members, other professionals) understand the collaborative assessment process. Use the prompts below to help structure the intro:
  - ➢ Why do we assess?
  - ➢ Why is it important to do this collaboratively?
  - ➢ How does the CANS-NY fit into the assessment process?

- Role play the intro.
- Finally, brainstorm together how you might apply this in an assessment or supervisory session.

40

Professional Development & Supervision: Building Fluency

41

Fluency is Key to Using the CANS-NY Effectively

Stage of Fluency	Characteristics
Preproduction	• Certification training • Reading the manual
Early Production	• Completion if the tool involves referencing the manual for each rating
Speech Emergence	• Has good comprehension of the tool. • Occasionally uses the manual to understand items. • Occasionally misses connection between multiple items.
Intermediate Fluency	• Has excellent comprehension. • Use of the tool is quick and efficient.
Advanced Fluency	• The student has a near-native level of speech. • Frequently makes CANS jokes around the office. • Begins developing their own version of the tool.

42

A Developmental Approach

NOVICE FLUENCY: PRE-/EARLY PRODUCTION	DEVELOPING FLUENCY: SPEECH EMERGENCE	CONFIDENT FLUENCY: INTERMEDIATE	ADVANCED FLUENCY: ADVANCED
New to TCOM/CANS	**Certified: Learning to Use the CANS in Practice**	**Using CANS to Organize the Assessment Process**	**CANS Driven Assessment and Care Planning**
✓ Full-day TCOM and CANS Training (in-person).	✓ Role-play introduction to youth and family of CANS, action level language, or individual domains.	✓ Combine traditional case presentation with CANS review and revision. Identify gaps in service based on needs and strengths identified.	✓ Schedule a team CANS review on a challenging case.
✓ Enhanced content on tcomtraining.com	✓ Role-play using action levels to build consensus.	✓ Use the TCOM Action Planning Worksheet to:	✓ Develop a plan for/role-play addressing low or no progress on goals with a family.
✓ Mini-vignette domain level review.	✓ Conduct a collaborative assessment with a seasoned CANS user.	• organize needs & strengths.	✓ Review aggregate of caseload CANS data with supervisees.
✓ Observe seasoned CANS user conduct a collaborative assessment.	✓ Review CANS and discuss care plan in supervision.	• practice the clustering strategy to develop goals.	✓ Use the CANS to reinforce ICPM and develop teaming within the CFT.
		• role-play structured teaming and goal-setting with youth and family.	✓ Use CANS data to help supervisee identify learning needs.

43

Collaborative Assessment: Strengths

Strengths
Allocate time in assessment and supervision to talk about strengths.

Focus
Help the family and youth operationalize how each strength serves serves them.

Identify
Identify strengths that are currently present. Include Caregiver Strengths.

Build
Talk about what strengths might be built (2's or 3's)

44

Developing a Shared Vision

When working on developing the Shared Vision Statement with the youth and family, it is helpful to try to answer one of both of the following questions:
• Where do we see ourselves when our work is completed? What will we have achieved?
• What will change look like in the youth or family given the context of our relationship and the work that we do?

Where Do We Want to Be?
Stating our desired outcomes

MULTIPLE PERSPECTIVES

SHARED VISION

Where Are We Now?
Identifying our needs and strengths

How are We Going to Get There?
Identifying cause and effect relationships

45

45

Useful Strengths – Child/Youth and Caregivers	Strengths To Build – Child/Youth
Strengths to Use (0's and 1's) from Strength Domain for child/youth Caregiver Needs and Strengths Domain that constitute strengths (0's and 1's) for caregivers	Strengths to Build (2's and 3's) from Strength Domain
Actionable Needs – Child/Youth	**Actionable Needs - Caregivers**
2's and 3's from: Behavioral/Emotional Needs, Life Functioning, Risk Behaviors, Cultural Factors	2's and 3's from Caregiver Resources and Needs Domain

46

47

Using the CANS in Assessment



Building Consensus

48

Consensus Building: Skills

1. Framing the problem.
2. Having an open discussion.
3. Identifying underlying concerns.
4. Developing proposals.
5. Modify proposals / developing a preferred solution.
6. Assess Degree of Support
7. Choose a direction – or – Return to Step 3

Adapted from Hartnett, T., (2011) Consensus-Oriented Decision-Making. BC, Canada: New Society

49

Resolving Disagreement: Skills

- Collaborative rating of the action levels builds consensus.
- Description can help build consensus. Define what each party sees/perceives. "You see X and I see Y."
- Translate disagreement by accurately framing the problem.
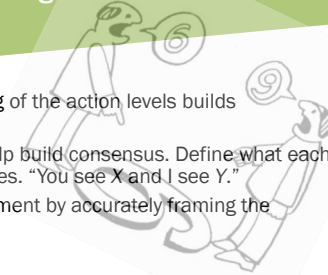
50

Transparency: Skills

✓ Respect: Explain what is happening, what you are doing, and how the family can use the tools to support their own goals.

✓ Patient: Take the time to think about what you know, and how you should disclose it to the youth/family.

✓ Action-oriented: "Nothing about us without us."

51

Empowering Caregivers: Transparency

The Child and Adolescent Needs and Strengths (CANS) Assessment
CANS Cheat Sheet for Caregivers

Needs Scoring
0= means there is no "need" or problem in a particular area.
1= means that an area might require a little attention or an issue that we want to keep our eye on. Items can also be rated a "1" if we want to do some prevention to make sure problems don't resurface.
2= means that there is a problem that should be worked on. For scoring it is less important to figure out what we need to do, or who is going to do it (that will come in the plan), we simply are trying to agree that there is a problem that needs attention.
3= means that there is a problem that needs to be addressed immediately! Items rated as 3's indicate areas where there is significant concern and require immediate attention.

Strengths Scoring
0= means this is the best thing the youth has going for them, it is the best rating a youth can get in the area of strengths.
1= means a strength that can be useful when service/case planning with a youth.
2= means this is not a useful strength, but has potential. For these items the team needs to decide if they can build these strengths.
3= means there is no strength identified in a particular area.

52

Empowering Caregivers: The Cheat Sheet

Prep for Assessment Meeting
- Make sure you have enough time set aside to talk about the current issues and past events. *If you need more time suggest a follow up meeting.*
- Don't try to solve problems during the assessment meeting. Simply try to get on the same page with the team about the needs and strengths.
- Review the previous CANS assessment before the meeting (if there was one). Think about what has changed since then.
- Make sure important team members are invited, if they can't attend get their input before the meeting.

During the Assessment Meeting
- Remember the importance of being open and transparent with your child's team about what is going on with your child and family.
- Remain mindful of the 'big picture' of your child and family's needs, while staying focused on, and prioritizing your child's most important needs.
- At the end of the assessment, schedule a time to develop the service plan with your worker/team.

Follow Up after Assessment Meeting
- Make sure you obtain a copy of the assessment, check it for accuracy.
- Track progress of the youth (building strengths and working on areas of need).
- Use the assessment to guide the development of the plan. Make sure areas of need are addressed in the plan.
- Each identified need will not necessarily need to be addressed separately. Work with the team to come up with ideas about how the different types of needs your child has might be related to one another. This will allow the team to develop targeted goals and work to achieve improvements in multiple areas of your child's life.

53

Sensitive Topics

54

Techniques Supported by Action Level Language

- Preparation,
- Ask for facts, not judgments,
- Ask for specifics,
- Use closed-ended questions , move from closed to open,
- Assume the behavior is occurring/need is there in the way that you ask,
- Take care with wording. How would you like to be asked?
- Use response choices (action levels are GREAT for this).

55

TREATMENT PLANNING & GOAL SETTING FROM A TCOM PERSPECTIVE

Overview & Practice

Fb/twitter: @Praedfoundation   tcomconversations.org

56

TCOM GPS … Guiding and Supervising Action Planning

Developing Targeted and Effective Goals Using the CANS

57

Translating TCOM Into the Care Plan

Theory of Change	Process	Aspect of Plan	TCOM Framework
Where are we now?	Complete the CANS	• Presenting Issues	• Relevant Needs and Strengths [Prioritized CANS items]
Where do we want to be?	Identify GOALS	• Goal	• Shared Vision • Anticipated Outcomes
How are we going to get there?	Identify OBJECTIVES	• Behaviorally-based Objectives • Action Steps/Strategies to Achieve Objectives	• Target Needs
What do we need to consider?	Identify ISSUES TO CONSIDER for the plan	• Contextual Issues	• Background Needs

58

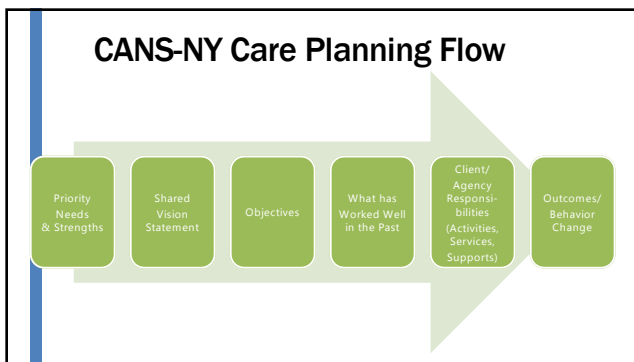### The What & The Why: Understanding Needs & Strengths

59

ACTIONABLE NEEDS		
Background/Context Needs	**Target Needs**	**Goals/Anticipated Outcomes**
Static needs – things that cannot change • Identified needs that inform our focus and choice of services and supports. • Background needs may require attention in order to prevent other needs from occurring.	**Causes** • Effective services/supports around these needs will likely result in direct change of the need. • Changes in these needs also likely to change Goals/Anticipated Outcomes. • Plan objectives will directly target these needs. • Can include strengths to build.	**Effects** • Needs expected to shift as a result of effectively addressing the target needs.
Needs we cannot change	**Needs we can change**	**Needs that shift as the effect of change**

60

Useful & Buildable Strengths

Centerpiece Strengths	Useful Strengths	Strengths to Build
• A well developed strength; may be used as a protective factor. • Can be linked to a target need to facilitate change. • Includes Safety/Acts of Protection by a parent.	• Strength that is evident, but requires effort to maximize it. • Can be linked to a target need to facilitate change. • Includes parents' Supporting Strengths that do not meet the level of Safety.	• Strengths that require building efforts before they can be useful for the individual. • May be something important to build and by doing so, support change on a target need.
When linked to need, strength effects change	**When linked to need, strength effects change**	**If built, strength can support change**

61

CANS-NY Care Planning Flow

Priority Needs & Strengths → Shared Vision Statement → Objectives → What has Worked Well in the Past → Client/Agency Responsi-bilities (Activities, Services, Supports) → Outcomes/Behavior Change

62

COLLABORATIVE ACTION PLANNING FROM A TCOM FRAMEWORK

Small Group Exercise

63

Step 1: Identify Relevant Strengths and Needs

Create a summary of the relevant needs and strengths:

- List the caregiver's strengths (from those items that could be considered strengths or resources for the individual)
- List the caregivers' needs
- List the client's strengths
- List the client's needs

64

Useful Strengths – Child/Youth and Caregivers	Strengths To Build – Child/Youth
Completed for Julia & her family	Completed for Julia
Actionable Needs – Child/Youth	**Actionable Needs - Caregivers**
Completed for Julia	Completed for Julia & her family

65

Step 2: Developing a Shared Vision

- Start with where we are now (*the identified needs and strengths – the 'what'*),
- Work with the youth and family define our vision (*which is where we would like to get to – the goal*) and
- Identify how we are going to get there (*organizing around of theory of why things are the way they are and what we think can do to create change – objectives and services*).

66

Multiple Voices

What will change look like for Theo and for his family?

	Primary Concern	Goal/Vision
Julia		
Aunt & Uncle		

When our work with Julia and her family is complete, what will have been achieved?

67

Shared Vision Statement

Overall Goals

68

Step 3: Sort and Link Needs & Strengths

1. Identify the goal. What change will happen to the child/youth and family?
2. Identify the needs that are getting in the way of the goal (target needs)?
3. Identify the background needs.
4. Link associated background needs to target needs/objectives and interventions.

69

Slide 70

ACTIONABLE NEEDS		
Background/Context Needs	**Target Needs**	**Goals/Anticipated Outcomes**
Static needs – things that cannot change • Identified needs that inform our focus and choice of services and supports. • Background needs may require attention in order to prevent other needs from occurring.	**Causes** • Effective services/supports around these needs will likely result in direct change of the need. • Changes in these needs also likely to change Goals/Anticipated Outcomes. • Plan objectives will directly target these needs. • Can include strengths to build.	**Effects** • Needs expected to shift as a result of effectively addressing the target needs.
Needs we cannot change	**Needs we can change**	**Needs that shift as the effect of change**

70

Slide 71

71

Slide 72

ACTIONABLE NEEDS		
Background/Context Needs	**Target Needs**	**Goals/Anticipated Outcomes**
• COMPLETE FOR JULIA	• COMPLETE FOR JULIA	• COMPLETE FOR JULIA
Needs we cannot change	**Needs we can change**	**Needs that shift as the effect of change**

72

Planning Around Needs

- *For both Actionable Needs (ratings of 2) and Needs Requiring Immediate Intensive Action (rating of 3) the process is the same.*
- *When planning around needs simply...*
  - Focus on the treatment target
  - Define an intervention, activity, of series of action steps that address the treatment target
  - Articulate the targets you expect to hit or the change you expect to see (measurable and achievable).

73

Centerpiece Strengths	Useful Strengths	Strengths to Build
• A well developed strength; may be used as a protective factor. • Can be linked to a target need to facilitate change. • Includes Safety/Acts of Protection by a parent.	• Strength that is evident, but requires effort to maximize it. • Can be linked to a target need to facilitate change. • Includes parents' Supporting Strengths that do not meet the level of Safety.	• Strengths that require building efforts before they can be useful for the individual. • May be something important to build and by doing so, support change on a target need.
When linked to need, strength effects change	When linked to need, strength effects change	If built, strength can support change

74

Planning Around Strengths

- *For both Useful Strengths and Strengths to Build the process is the same. When planning around strengths simply...*
  - identify the strength that is useful or that you would like to build
  - define the presumed benefit of the using or developing the strength
  - articulate the steps related to using or developing the strength

75

What has worked well in the past?

Help child/youth/family/team identify what has worked well in the past. This provides direction in planning and **can help to further articulate strengths**:

- What has the child/youth/family done in the past that has helped with particular needs?
- What solutions have the child/youth/family tried in the past that have worked even for a short time?
- What have people in your community/natural supports done that has worked to improve this situation?

76

Centerpiece Strengths	Useful Strengths	Strengths to Build
• Complete for Julia & her family	• Complete for Julia & her family	• Complete for Julia & her family
When linked to need, strength effects change	When linked to need, strength effects change	If built, strength can support change

77

Clustering Needs towards Creating a Plan

- Choose activities, services and supports to address the target needs.
  - *What will improve as a result of your intervention? Identify those anticipated outcomes.*
- Cross-check your activities, services and supports with useful strengths.
  - *What activities can bring out these strengths?*
- Check on absent strengths.
  - *How must those be factored in?*
  - *If developed, how can these strengths support the child/youth?*
  - *What activities could develop these strengths?*

78

79

80
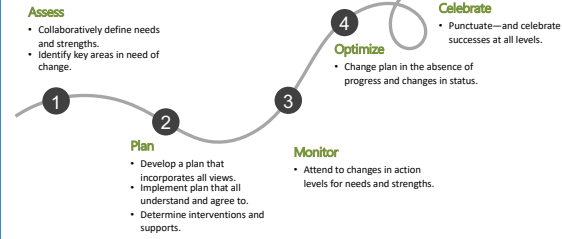
TCOM GPS … Support

Support

- Practice using CANS-NY in communication with youth and family
- Use CANS-NY data as feedback on intervention impact and to monitor progress
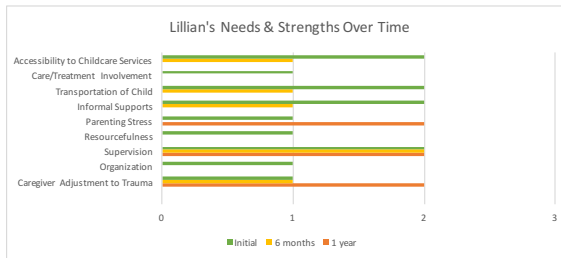- Practice using TCOM data to support professional development and program management
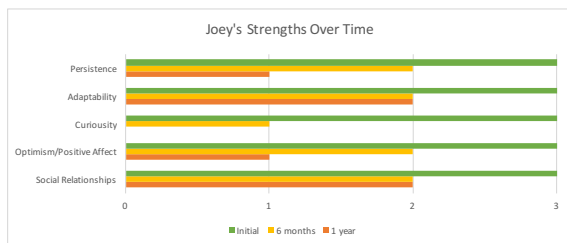
81

Attending to Progress: Individual Level

Assess
- Collaboratively define needs and strengths.
- Identify key areas in need of change.

Plan
- Develop a plan that incorporates all views.
- Implement plan that all understand and agree to.
- Determine interventions and supports.

Optimize
- Change plan in the absence of progress and changes in status.

Monitor
- Attend to changes in action levels for needs and strengths.

Celebrate
- Punctuate—and celebrate successes at all levels.

82

TCOM Data Use: Individual Level (Caregiver)

Lillian's Needs & Strengths Over Time

- Accessibility to Childcare Services
- Care/Treatment Involvement
- Transportation of Child
- Informal Supports
- Parenting Stress
- Resourcefulness
- Supervision
- Organization
- Caregiver Adjustment to Trauma

Initial 6 months 1 year

83

TCOM Data Use: Individual Strengths

Joey's Strengths Over Time

- Persistence
- Adaptability
- Curiousity
- Optimism/Positive Affect
- Social Relationships

Initial 6 months 1 year

84

TCOM Data Use: Individual Needs
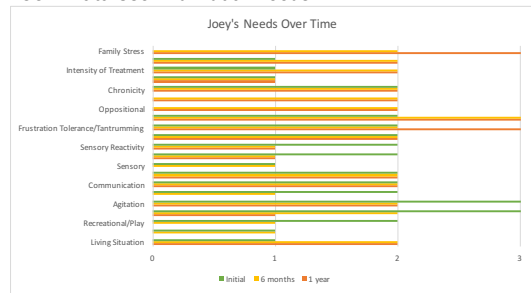
85

TCOM Data Use: Provider Level
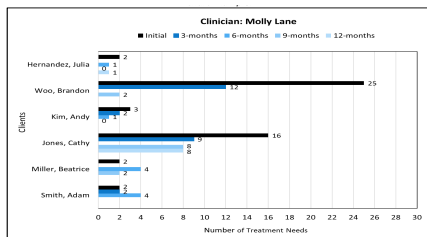
86

TCOM Data Use: Supervisory Level

87

Linkages: *Key Needs*
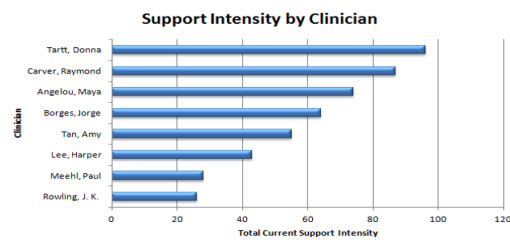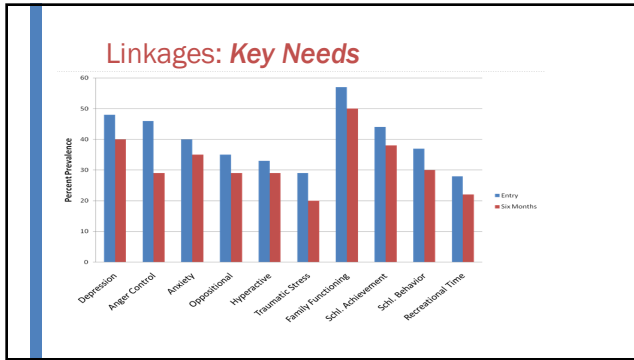
88

TRAINING AND CERTIFICATION: Q&A

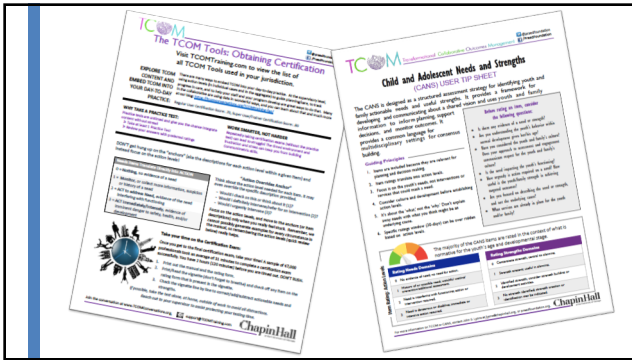Fb | twitter: @Praedfoundation   tcomconversations.org

89

Certification GPS … Support from the CANS-NY Institute

Support

- Examples of coaching networks and strategies exist across the international TCOM collaborative.
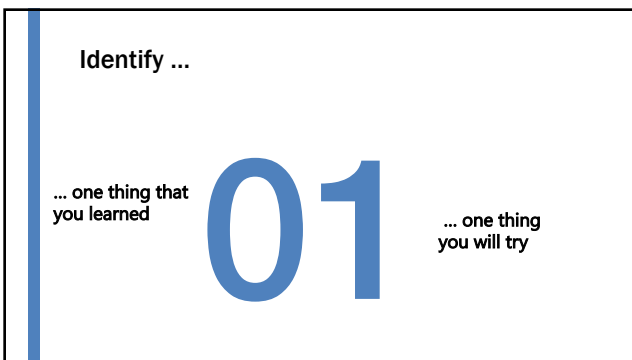- Ongoing learning and teaching resources are being added to tcomtraining.org.
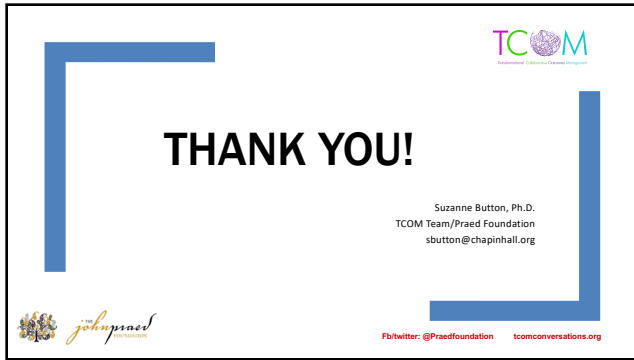
90

91

WRAP UP

92

Identify …

… one thing that you learned

01

… one thing you will try

93

THANK YOU!

Suzanne Button, Ph.D.
TCOM Team/Praed Foundation
sbutton@chapinhall.org

Fb/twitter: @Praedfoundation   tcomconversations.org

94