

Collaborative Adventures



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How to Write A Good Agenda Using The CANS Assessment

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The agenda is a valuable tool that if mindfully planned out will help guide facilitation on a child and family team and can be used as a powerful tool to engage the team members in the process. It can also be used to ensure that everyone has an opportunity to share their expertise and it helps everyone respect one another's time. An effective agenda will also be matched with the individual needs of the family team and developed in partnership with the caregiver and child.

The child and family strengths and needs are assessed and measured in the CANS (Child & Adolescent Needs & Strengths) assessment. Emily Owens from Vigo County sites, "the CANS is the tool that will assist you and the team in pulling out the main needs and strengths of the child and family. It will assist you in then developing a plan of care to address the needs and utilizing the strengths at each phase of the Wraparound process." It makes sense to build this discussion into your agenda. Ben Strickland from Elkhart County says, "I don't know if I have any magic formula, but what seems to have some success is discussing the CANS during the engagement phase with the family and/or during the brainstorming needs phase with the team. I think a large part of it is getting the CANS out on the table and explaining it. Sometimes I wait until after the team has brainstormed needs, then I break out the CANS and go through it, matching the needs already identified by the team to the needs identified on the CANS. A lot of times there are quite a few that match up. Then I can brag to the team about how well they know the client and their situation. If they missed some of the needs on the CANS, then I can bring up those needs as well and the team can talk about the priority of needs".

Another way to incorporate the CANS into the meeting is to create a family friendly document (such as the living breathing document (see Figures 1&2) that clearly identifies the specific needs and strengths without any clinical jargon or language. The agenda can then mirror the plan by providing opportunities for the entire team to review and then ascertain whether or not the child is making progress or if they need to revise the plan. Keep in mind, change is "Incremental, not instantaneous".

As teams set interventions to meet goals, it's very important to ask simple questions about whether or not they are producing results. According to John Pavlack, Provider Relations/Quality Improvement - Community Alternatives Grant, "often goals or outcomes are not defined with enough clarity to be workable to the family and team or more commonly, there is not a great deal of attention to gauging progress towards the goals on a regular basis". Clear and concise care coordination becomes more evident when everyone understands which needs are being addressed and what strengths and supports exist that can be used to address the needs. Ben Strickland goes on to say, "As far as monitoring progress is concerned, I usually have the CANS areas linked to the plan needs and goals. So when we review how progress is going to a specific goal on the plan, the CANS areas are right there. For example, if the goal is "for 'Johnny' to stay clean from substance abuse" there would be a line talking about improving CANS scores on the areas of substance abuse. If he improves his score from a 3 to a 2 then that is making progress, etc. It is easy to type out (or copy/paste) the components of the plan onto the

agenda and just go over it during the meeting”. When the team sees that a specific goal has been reached it is evident and improves the overall CANS Score.

Example: Agenda adapted from Emily Owens, Vigo County.



Team Meeting Agenda

00/00/2010

WRAPAROUND VALUES:

**Family Driven, Team Based, Natural Supports, Collaboration,
Community-based, Culturally Competent, Individualized, Strengths-
based, Persistence, Outcome based!**

1. Review Family Vision (2 min)
2. Review Ground rules for team meetings (2 min)
3. SUCCESSES and STRENGTHS (15 min)
4. Develop/clarify Graduation Goals based off CANS scores (25 min)
 - a. **Need: What is the specific challenge/concern?**
 - b. **Goal: What will it be like if it is improved?**
 - c. **Plan/Intervention: What do we need to do, who will do it and when will they do it by?**
5. Develop/Review Crisis Plan (5 min)
6. Schedule Next team meeting (1 min)

More and more wraparound facilitators are beginning to use CANS as a tool to guide their child and family team meetings. The CANS breaks down the areas of need into the goals that should be addressed in the care coordination, so it makes sense to incorporate them into your meeting time. An agenda can be used to help everyone on the team recognize the intent by clearly defining the needs identified in the CANS assessment, determine if steps have been made to improve the CANS score, and if not guide the decision to revise.

“When you can make and celebrate progress in one area, you can transfer that progress into other outstanding challenges”. – John Pavlack.

Figure 1

“A Living, Breathing Document”

I. FAMILY VISION (Desired Results in youth & family’s words): _____

II. GOAL #1 (in collaboration with youth & family): _____

III. OBJECTIVES – What needs to happen in order to reach this goal?

#1 Youth/Family will... _____

_____ how often? _____

#2 Natural Support (_____) will... _____

_____ how often? _____

#3 Community Support (_____) will... _____

_____ how often? _____

IV. INTERVENTIONS/SUPPORTS: (Natural & Community) & how will they be used to address this goal?

V. OUTCOMES – Reflect on how things would look if treatment and intervention were successful.

Figure 2

GUIDE FOR STRENGTHS-BASED / INDIVIDUALIZED TREATMENT PLANNING with the (CANS) Child and Adolescents Needs and Strengths Assessment

Recommendations: _____

STRENGTHS from CANS

- 0 – Significant, Centerpiece for treatment planning
- 1 – Strength exists, could be included in plan
- 2 – Potential strength, needs nurturing
- 3 – No identified strength at this time

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____
- 6. _____
- 7. _____
- 8. _____
- 9. _____
- 10. _____

NEEDS from CANS

- 0 – No evidence
- 1 – Watchful waiting & prevention
- 2 – Action needed
- 3 – Immediate/Intensive action needed

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____
- 6. _____
- 7. _____
- 8. _____
- 9. _____
- 10. _____

OTHER STRENGTHS:

- 11. _____
- 12. _____
- 13. _____
- 14. _____
- 15. _____
- 16. _____
- 17. _____
- 18. _____
- 19. _____
- 20. _____

OTHER NEEDS:

- 11. _____
- 12. _____
- 13. _____
- 14. _____
- 15. _____
- 16. _____
- 17. _____
- 18. _____
- 19. _____
- 20. _____

- Elicit concerns of team members
- Prioritize needs by considering: referral source and pressures from outside sources to address issues.
- What need is the biggest threat to family and youth? _____
- What need if improved would have the most impact? _____

“NEEDS ARE NOT SERVICES”