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"News for the CANS Community" Volume 2

## **CANS in Practice Gaining Ground**

CANS in practice is gaining ground in Massachusetts! CBHI is pleased to continue the practice of sharing articles from providers in the field. This issue includes an article by Christina E. Patts, MSW, LCSW, Program Director at JRI Behavioral Health Center. This newsletter also includes the results of a series of interviews conducted with participants involved in Community of Practice (CoP) meetings over the past eighteen months highlighting benefits and future ideas for CoP meetings. You will also find an announcement of a new online CANS training opportunity with CEUs that will be coming next year. The e-learning module will focus on using the CANS in collaborative, family centered and youth guided practice through a case study. All of these efforts are part of CBHI's ongoing commitment to support successful implementation of the MassCANS throughout Massachusetts.

# "Don't Fight the CANS!"

Submitted by: Christina E. Patts MSW, LCSW Program Director, JRI Behavioral Health Center, Community Service Agency

remember, back in 2004, a 16 year old youth I was providing therapeutic services to read the assessment I wrote about her out loud to me. I winced as she read back to me my answers to questions focusing on all of her negative behaviors, personality traits, and mistakes. She ended her reading of my assessment with "this makes me sound so crazy". After reviewing the assessment I realized that all of the questions were aimed to draw out the negative qualities, behaviors, and actions that she had exhibited over her whole adolescence. "You brought up the time I broke the water cooler!?" she said. "That happened, like, four years ago!"

I realized, even then, that the field of social work had not yet fully embraced the strengths-based approach that had been taught to me in my undergraduate social work classes. In 2008 I was introduced to the CANS. Social workers are agents of change, but they

don't always embrace change themselves. My peers hemmed and hawed about the challenges of learning and using a new

Social workers are agents of change, but they don't always embrace change themselves.

#### **CBHI** Mission



The Children's Behavioral Health Initiative (CBHI) is an interagency initiative of the Commonwealth's Executive Office of Health and Human Services. Our mission is to strengthen, expand and integrate Massachusetts state services into a comprehensive community-based system of care to ensure that families and their children with significant behavioral, emotional and mental health needs obtain the services necessary for success in home, school and community.

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## About the CANS in Massachusetts

The CANS tool used here in Massachusetts is referred to as MASS CANS. It is a version of the CANS information integration tool copyrighted by the Praed Foundation and John Lyons, Ph.D. Mass CANS has been modified to meet specific requirements in Massachusetts. Information about Mass CANS can be found at the CBHI websites: <u>http://www.mass.gov/masshealth/ cbhi</u>

#### http://www.mass.gov/ masshealth/cans

The CANS Application web site for CANS data entry for MassHealth is: <u>https://gateway.hhs.state.</u> <u>ma.us/authn/login.do</u>

The UMMS CANS Training Program refers to the CANS Training and support system offered through the University of Massachusetts Medical School. The web site is:

<u>https://masscans.ehs.state.</u> <u>ma.us/login.aspx</u>

# "Don't Fight the CANS!"

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assessment tool. I decided I wasn't going to fight the CANS. I was just going to roll with it and see how it could work for my clients and for me. I learned quickly that the CANS is a great way to show people their progress as well as their areas of need. The CANS became a conduit for communicating this information to individuals I worked with in a very objective way.

The CANS removes personal opinion, biases, speculation and hunches to narrow down the facts in a very non-threatening way, thereby allowing me to help the individuals I worked with discover their needs.

Simultaneously, the CANS helps me in identifying an individuals' strengths, which could then be utilized to meet his/her identified needs.

As a clinician, I use the CANS in the first two sessions to gather information, start conversations, prompt clients to reminisce about how they spend their time together, and isolate what they really want to improve in their lives. The CANS focuses on the present while preventing the rehashing of past issues. In conjunction with the Massachusetts Standardized Documentation Project (MSDP) Comprehensive Assessment, the CANS paints a clear picture of a person's strengths and needs in language that individuals served can understand and be comfortable with<sup>1</sup>.

1 The MSDP was initiated in 2007 by the Association for Behavioral Healthcare (ABH) as a step in the transition to electronic health records for provider organizations in Massachusetts. As a result, numerous treatment forms and manuals have been developed and are utilized by a number of provider agencies across the Commonwealth. It should be noted that the MSDP forms are not required by MassHealth or by any of the Managed Care Entities (MCEs) for any of the CBHI services.

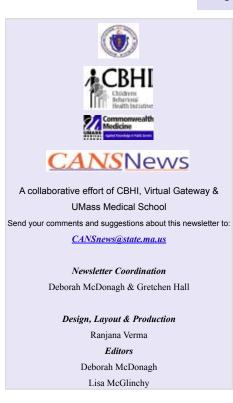


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## "Don't Fight the CANS!"

All employees providing any CBHI services at Justice Resource Institute (JRI) are CANS trained and certified<sup>2</sup>. Therapeutic Mentors (TMs) and Therapeutic Training and Support workers (TT&S') complete the training and certification upon hire. How else can hubs and administration expect TMs and TT&S' to understand the CANS provided at referral if they are not taught how to read and understand the tool? In order to guarantee that TMs and TT&S' have a thorough understanding of the CANS, JRI has found that getting these individuals CANS certified is imperative in providing comprehensive services to our clients. When all the professionals on the treatment team are CANS trained and certified, the team can carry the "golden thread" through real practice rather than just on paper.

JRI In-Home Therapy staff (IHTs), TT&S' and TMs can truly work collaboratively with individuals and families to ensure the CANS represents a thorough picture of the youth's strengths and needs.

2 While some organizations may require CANS training and/or certification for all staff providing any CBHI services, the MASS CANS training and certification requirement was developed specifically for clinicians to administer the CANS as part of a behavioral health assessment (and as part of ongoing treatment plan/care plan updates) for MassHealth children under age 21. For other staff providing CBHI services, CANS training and certification is allowed; however, organizations should be reminded that the CANS can only be administered by a MA-CANS certified clinician who is then authorized to complete a CANS in the CANS application system (VG). Organizations may also decide to have their staff participate in CANS training but not pursue MA-CANS certification. This could help to ensure that staff working with youth and families (other than those conducting behavioral health assessments and treatment/care plan updates) have a shared understanding of the common language within the CANS tool when collaborating with families and other providers.

#### continued from page 2

Additionally, TM's can use their CANS training/certification to incorporate the CANS provided at intake into their lesson planning. Maybe the CANS captures something that isn't very clear on a comprehensive assessment? Working with TM's in supervision to utilize the CANS in lesson planning is often a key piece missing in the treatment process.

Three months flies by. The CANS is a great way to regroup and assess the progress being made. People tend to only remember the bad stuff. It's hard to see progress, large or small, in your own life. The CANS lays it all out on paper. It isn't an opinion or a feeling. It is the black and white, on-paper confirmation, that a person has made progress.

It is the black and white, on-paper confirmation, that a person has made progress.

Additionally, it can help facilitate a tougher conversation about what needs are left to work on. When I work with the youth/family to complete the CANS reassessment I never look at the previous CANS. I don't let them look at it either until the reassessment is complete. I don't want the previous answers to the questions to skew our perception of what is happening right now. After the reassessment is complete we compare the ratings to those of the previous assessment(s). This comparison stimulates a conversation about how we as a team are going to move forward with treatment.

Sometimes the conversation is tough. Progress isn't always made. Sometimes treatment is effective because it prevents regression even if it doesn't necessarily promote progression. Sometimes as children and adolescents mature, behaviors get worse, new symptoms develop and things get more complicated. As new needs manifest, so do strengths. I've never had a youth read a CANS assessment and say that I made them look "crazy". Isn't that refreshing?

# CANS Calendar

#### In-person UMMS CANS Training Schedule

In-Person training sessions are offered every other month. You may view the upcoming schedule and locations at:

https://masscans.ehs.state.ma.us

Upcoming CANS In-person Trainings:

October 4, 2011 – Boston Transportation Building, 10 Park Plaza, Boston, MA

December 15, 2011 – Holiday Inn, 700 Myles Standish Blvd. Taunton, MA

# **Community of Practice (CoP) in Review**

The Community of Practice (CoP) meetings were introduced in the fall of 2009 as an opportunity to create an ongoing conversation among the community of CANS users and CANS practitioners. The goal has been to foster conversations and capture lessons learned that provide a deeper understanding of how CANS is working in practice across Massachusetts. To date, there have been 11 Community of Practice sessions conducted across Massachusetts. This spring, in an effort to assess the effects of Community of Practice meetings practitioners, CBHI and the UMass Training Program conducted interviews with a sample of participants targeted for representation across the Community of Practice sessions. Interview participants worked in variety of settings: Inpatient, In-home therapy, Therapeutic Mentoring, Outpatient, and Emergency programs.

We were interested in exploring CANS implementation including organizational resources, challenges, post-certification support needs, Community of Practice impact, and ideas for the future of CANS implementation and the Community of Practice sessions. What emerged was an overarching theme that people found the Community of Practice sessions to be very helpful and looked forward to future sessions to further their CANS implementation efforts.

**Organizational Resources:** The majority of people interviewed identified their organization as being very proficient or advanced in using CANS. Participants indicated that they find their staff being more positive about using CANS and integrating it fully into operations and services.

*Challenges:* Identified challenges were technical issues such as the time it takes to enter CANS data on the Virtual Gateway, data collection, and compiling aggregate data.

**Post -Certification Support Needs:** Interviewees identified data access, reporting, training on using CANS in treatment planning, and using CANS with families as primary areas for which they need additional support in their organizations. Participants indicated that they appreciated learning practical information at the Community of Practice meetings such as learning about the "copy" feature in the Virtual Gateway and tips and efficiencies of using CANS data with treatment planning.

**CoP Impact:** All interviewees indicated that participating in the Community of Practice had been helpful and beneficial to their implementation efforts. Specific features that were identified as helpful included the size and in-person format, the opportunity to gain a deeper understanding of CANS in practice, and having the opportunity to talk directly with CBHI program staff.

*Future CoP Topic Ideas:* Using CANS data to inform treatment planning, using CANS with transition-age youth, engaging families in the use of CANS, and using CANS in supervision were all identified as topics of interest for further discussion. A small number of respondents also indicated that learning more about the basic mechanics of using CANS such as the CANS application on the Virtual Gateway, the consent form, and procedural questions would also be helpful. Participants indicated interest in using CANS data and considering how CANS can be more fully integrated and refined in practice for future discussions.

CoP Impact: All interviewees indicated that participating in the Community of Practice had been helpful and beneficial to their implementation efforts. Specific features that were identified as helpful included the size and in-person format, the opportunity to gain a deeper understanding of CANS in practice, and having the opportunity to talk directly with CBHI program staff.

As a result of these interviews, further Community of Practice meetings addressing more advanced CANS topics are being scheduled. A summer meeting was held on July 14, 2011 in Springfield. If you have interest in hosting a Community of Practice meeting at your site, please e-mail Gretchen Hall at:

#### gretchen.hall@umassmed.edu.

Every effort is being made to hold sessions in a variety of locations across the Commonwealth.



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# CANSTechnology Buzz

# **CANS FAQs Updated!**

he CANS Frequently Asked Questions (FAQ) has been updated on the new CBHI website. The FAQ section is full of helpful information that we hope you will access frequently. As reported in the last edition of CANSNews, the CBHI website has been reorganized to allow for easier access to needed information, which includes a streamlined CANS page. We will continue to update the website over time and let you know when any adjustments happen.

Forms for setting up security roles within the Virtual Gateway, for member consent, and for

Registration and training information for clinicians providing behavioral health services to children

or your questions on the CANS

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**CANS Training and Certification** 

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The updated FAQ information is located on the CBHI website on the Child and Adolescent Needs and Strength (CANS) webpage. If you have difficulty opening the link, go directly to: http://www.mass.gov/ masshealth/cans



#### **CANS FAQs Updated!**

<u>Using the CANS Application on the</u> <u>Virtual Gateway</u> –In this section you

will find an FAQ that answers your

questions on two topic areas:

1. CANS Requirement, Billing

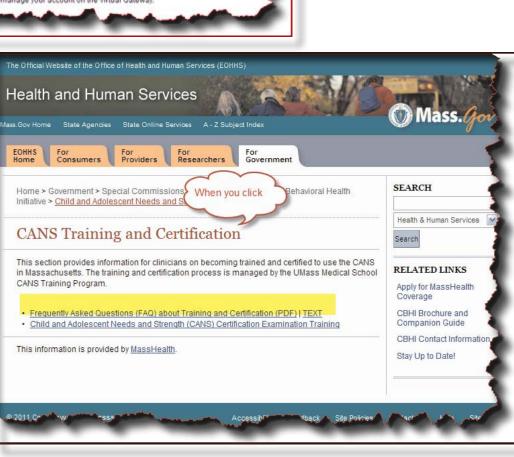
and Consent information

2. Using the CANS Application

on the VG

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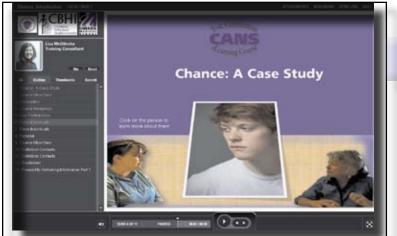


#### **CANS Training and Certification**

In this section you will find an FAQ with information regarding Training and Certification.

#### Cultural Considerations: CANS Domain Update

s reported in the last issue of CANS, CBHI is working on refining and enhancing the Acculturation domain. The domain will be re-named to be called "Cultural Considerations". After a comprehensive review that included input from multiple stakeholders and conducting a pilot of the revised domain, changes have been finalized and work is underway to prepare for implementation of the new domain. Currently changes are being incorporated in the CANS application and training to support and explain the revisions is being developed. Both the application and the training will be launched at the same time and it is expected that the new domain will be in place by late 2011. Further updates and announcements on this change will be coming in the fall.



#### "Chance" - A Case Study

#### Using the CANS in Collaborative, Family-Centered Practice

BHI, in collaboration with the UMass CANS Training Program is pleased to announce the coming of a new online training tool for certified assessors. "Chance, A Case Study: Using the CANS in Collaborative, Family-Centered Practice" is being created to offer CANS users a post-certification training experience that goes beyond the basics of the tool that are covered in initial CANS certification training. Understanding that certification is the first step in your CANS

education, CBHI is creating "Chance" to provide a more in-depth understanding of the tool, how to better use it in your practice, and to highlight how CANS intersects with the CBHI values, mission, and services. CEUs will be available for completing the Chance training.

When you participate in this on-line module you will meet Chance's mom in a video interview segment, read a letter from Chance, and review collateral documentation. After learning about Chance you will have the opportunity to rate some of the CANS items and review the recommended ratings. Additionally, this training module will offer a discussion of potential treatment plan options for Chance, suggestions of how to use CANS within a team, and more detailed information about integrating CANS into your work with clients. "Chance, A Case Study" is a great learning opportunity to take your CANS practice to the next level.

#### YourFeedback

A CANS Newsletter box has been established to receive your feedback regarding the CANS Newsletter. Send your MassCANS Newsletter comments, suggestions, and contributions to <u>CANSNews@state.ma.us</u>

### Did You Know? . . .

## You can print a copy of the CANS while it is still in progress in the Virtual Gateway

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Life Domain Functioning Child Behavioral / Emotional Needs	MassHea	MassHealth ID 100033025345						
Child Risk Behaviors	Name	TESTA JUSTIN E	Date of Birth	05/05/1994	Age	16 Yr S Mo	Gender	м
Acculturation	Race	White						

#### A few simple clicks!

- 1. Click on "View Certified Assessor" tab
- 2. View CANS
- 3. Click on PDF icon on right hand of screen

## You may review, print or save the record in Adobe Acrobat.

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Home > Government > Special Commissions and Initiatives > Children's Behavioral Health Initiative > Child and Adolescent Needs and Strengths (CANS) > Using the CANS Application on the Virtual **CBHI** has a Troubleshooting Gateway Guide that answers your top questions to the Virtual Gateway CANS FAQ and CANS Training Program Frequently asked questions (PDF) | TEXT about Requirement, Billing and Consent. Helpdesk Frequently asked guestions (PDF) | TEXT about CANS for clinic administrators, behavioral health providers and others using the CANS. Virtual Cate and Manage My Account Page Click anywhere in the picture to access this page ir account on the Virtual Gateway This d (PDF) Troubleshooting The Virtual Gateway compiled the top five reasons why CANS Users call the VG helpdesk, resulting in this guick reference grid (PDF) | TEXT

# **CANSContact**

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Children's Behavioral Health Initiative

(CBHI) Mailbox: CBHI@state.ma.us

Website: <u>www.mass.gov/masshealth</u> Click on CBHI link

#### Virtual Gateway

mation on using the CANS Application on V

Virtual Gateway Customer Service Executive Office of Health and Human Services 100 Hancock Street, 5th floor, Quincy, MA 02171 Phone: (617) 984-1425 Fax: (617) 847-6575

> Customer Service 800-421-0938 TTY: 617-988-3301

*MassHealth* Customer Service Center 800-841-2900 TTY: 800-497-4648

UMMS CANS Training Program 508-856 -1016 Mailbox: <u>mass.cans@umassmed.edu</u> Training Website: <u>https://masscans.ehs.state.ma.us</u>

The University of Massachusetts Medical School is the contracted provider for MASS CANS Training and Certification for the Children's Behavioral Health Initiative (CBHI) of the Massachusetts Executive Office of Health and Human Services