

## **New Release of CBHI CANS Application**

**A new release (Release 3.0) has been launched in Feb 2015 for the CBHI CANS application. We have also be updated the documentation for the application ("Reference Guides" and "Learn How To"e-learning modules) on the CBHI website to reflect the changes.**

### **Release 3.0 Updates**

The Commonwealth of Massachusetts and the Executive Office of Health and Human Services (EHHS) have made system enhancements to the Children's Behavioral Health Initiative (CBHI) Child and Adolescent Needs and Strengths (CANS) application (Release 3.0), which is now available to all users.

All documentation related to the CBHI CANS application ("Reference Guides" and "Learn How To" CBTs) has been updated and are posted on the CBHI website.

Visit <http://www.mass.gov/eohhs/gov/commissions-and-initiatives/cbhi/>, click the **Child and Adolescent Needs and Strengths (CANS)** link, then select the **Using the CANS Application on the Virtual Gateway** link.

Below is a summary of the Release 3.0 improvements and new features.

### **New Consent Process**

The new Consent process permits a provider to enter the CANS on the Virtual Gateway (VG) account and share the CANS with all other providers to whom the caregiver has given consent. This will allow all providers caring for the child to have a clear picture of what is happening in the child and family's life. This is particularly important when a child is cared for by multiple providers or requires treatment in different levels of care.

### **New Consent Forms**

The new Consent Form explains to the caregiver that by signing the Consent Form, they are giving permission to a provider to enter the CANS on the VG and share the CANS with any other providers to whom the caregiver has given consent.

Link to CANS Consent Forms: [www.mass.gov/eohhs/gov/commissions-and-initiatives/cbhi/child-and-adolescent-needs-and-strengths-cans/cans-forms.html](http://www.mass.gov/eohhs/gov/commissions-and-initiatives/cbhi/child-and-adolescent-needs-and-strengths-cans/cans-forms.html)).

To learn more about how the Consent process works in daily practice, please view the **CANS Consent Step-by-Step Guide and Flowchart** which can be found at [www.mass.gov/eohhs/gov/commissions-and-initiatives/cbhi/child-and-adolescent-needs-and-strengths-cans/using-the-cans-application-on-the-virtual-gateway.html](http://www.mass.gov/eohhs/gov/commissions-and-initiatives/cbhi/child-and-adolescent-needs-and-strengths-cans/using-the-cans-application-on-the-virtual-gateway.html).

For **Consent FAQ's** and for more information about **faxing consents**, please refer to the Faxing CBHI Consent Forms Reference Guide. It is available on the CANS ([www.mass.gov/masshealth/cans](http://www.mass.gov/masshealth/cans)) Web page of the CBHI Web site along with other CBHI reference materials.

If you have any questions regarding faxing consents, please contact Virtual Gateway Customer Service at **1-800-421-0938** or **(TTY) 617-847-6578** (for those with partial or total hearing loss).

More information about the consent process, including the consent forms and “how-to” Reference Guides, may be found at [www.mass.gov/masshealth/cans](http://www.mass.gov/masshealth/cans). Click on “How to Use the CANS Application on the Virtual Gateway”.

You will also find the CANS Family Guide on the *Clinical Guidance* section of CANS page of the CBHI website. The three-page document that explains the “what” and the “why” of the CANS to family members, including consent. We encourage providers to share this with families during the initial assessment period. Go to [www.mass.gov/masshealth/cans](http://www.mass.gov/masshealth/cans) and click on “Clinical Guidance on the CANS”.

## Other Change to CANS

1. The Diagnoses module has been renamed as Diagnostic Factors and DCM diagnosis of the behavioral health condition is no longer part of the CANS. This change is a better fit for CANS as the CANS is not intended to be a diagnostic tool but rather a way to communicate needs and strengths, and help inform family-driven, collaborative care planning at the right level of care.

2. Discontinuation of Axis I and Axis II.

3. Renaming Axis III, Axis IV and Axis V:

- Axis III has been renamed as Physical Conditions defined as “Physical conditions which play a role in the development, continuance or exacerbation of a behavioral health condition.”
- **Axis IV** has been renamed as **Psychosocial Stressors** defined as “Events in a person’s life, such as the death of a loved one, starting a new job, college, unemployment or even marriage can affect behavioral health condition.”
- **Axis V** has been renamed as **CGAS (Children’s Global Assessments scale)** and selecting the ? will bring up the scale.