Trauma-Informed, Assessment-Driven Casework Practice Using the CANS

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Expert Meeting
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Who’s in the Room?

1. Name

2. Where I’m “from”

3. Why I think I was invited to this meeting/ what I hope to contribute
The overall goal of this Expert Meeting is to inform the development of resources, such as concrete tools or guidelines, to enhance the use and application of the CANS in trauma-informed casework practice. Such resources may include:

- Concrete guidelines for how to develop clear and measurable casework objectives with the CANS
- Methods for staff to engage and share feedback with families as the CANS is completed over time.
- Strategies to support collaborative sharing of CANS information across staff roles and systems.
Background and Context for This Meeting

• Brief history of the CANS/use in practice
• What we’ve heard from the child welfare field about challenges / gaps
• Need to focus on:
  - CANS as part of assessment process and a tool (beyond an administrative / compliance “form”)
  - CANS as part of an engagement / partnership strategy with family members
  - CANS used to inform and support case / service planning and casework practice
Background of the CANS- Trauma Version: Comprehensive Assessment Process to Support Effective Trauma-related Services

- Provides a framework for understanding the complex effects of trauma and ‘connecting the dots’ in trauma-informed planning.
- Provides data and information to support clinical decision-making about service and treatment planning.
- Develops “common language” to enhance understanding and communication about the effects of trauma between caregivers and providers.
- Highlights the link between trauma experiences, a range of reactions, and strengths early on to intervene effectively and potentially prevent more serious outcomes over time.
- Ideally, assessment will be used to inform and support ongoing casework and clinical practice = Meaningful Use
Summary of Existing Challenges: Use of Assessment Information in Practice

- Not enough time/sufficient resources to gather information
- Difficult to capture information across areas of need/strengths
- Multiple and interconnected needs of families
- Translation of “research” tools or data into clinical practice
- “Buy in” to the assessment process/utility across roles
- Training of professionals
- Access to trauma-focused services
Trauma- and Family-Informed, “Data Driven” Planning and Engagement

Collaborative Treatment and Service Planning

Data-driven decision making

Strengths Identification and Building

Caregiver/Family Engagement and Support

Systems Planning

Trauma-focused, Family-informed Comprehensive Assessment
What is Assessment Translation?

Assessment translation is like a bridge between assessment data and the application of that data to improve clinical practice.
The CANS in Practice: Collaboration with Providers and Families

**Using the CANS to support trauma-focused collaboration and planning across staff/within supervision/with families**

- The CANS is a tool for **INTEGRATING, TRANSLATING and SHARING** information from a comprehensive assessment (including the CANS and other tools).

- Share information with family members/ youth and other staff in a way that makes sense: helping them ‘connect the dots’ across various needs

- Utilize CANS information to educate, communicate, and advocate for client’s needs across settings– using a complex trauma ‘lens’

- Utilize CANS information to support the case consultation and supervision process: identifying and responding to the range of complex trauma-related needs and building upon strengths that exist
What Illinois Foster Parents Told Us...

Would you...

- **Like to see the actual forms or questionnaires** that the caseworker/therapist completes? 89% YES
- **Like to complete the actual forms** WITH the caseworker/therapist? 78% YES
- **Like to participate in developing goals, recommendations or next steps?** 100% YES
- **Like to see feedback** from the assessment? 89% YES
- **Like to be involved in tracking progress** over time using info from the assessment? 100% YES
What You Told Us

- Over 60% report developing goals and objectives using the CANS;
- Over 60% report having used the CANS as a method of sharing information with other professionals
- 100% describe their casework / service planning processes as either a little or moderately trauma-informed (0% not at all; 0% highly)
- 100% describe their casework / service planning processes as either a little or moderately assessment-driven (0% not at all; 0% highly)
- 94% reported the CANS tool is used as part of planning

....But there are still many challenges......!
Why Assessment Matters

Lisa Conradi, Psy.D.
Chadwick Center for Children and Families
Rady Children’s Hospital – San Diego
Setting the Stage
An in-depth exploration of the nature and severity of the traumatic events, the impact of those events, current trauma-related symptoms, and functional impairment

Designed to direct case planning efforts

Occurs over at least 2-3 sessions

Includes information gathered from multiple sources, such as an interview, use of objective measures, behavioral observations of the child, and collateral contacts with family, etc.
What do we want to know?

- Symptoms
- Family History
- Strengths
- Trauma History
- Medical History
- Developmental History
- Contextual History
Trauma Assessment Process

Assessment
- Interview
- Standardized Measures
- Behavioral Observations
- Multisystemic (child, caregiver, psychiatrist, teacher, etc.)

Triage
- Based on results of the assessment
- Identify appropriate interventions/services

Treatment/Services
- Interventions identified within service array
- Emphasis on trauma-informed and evidence-based practices when appropriate
- Meet the unique needs of the individual child/family
Client Feedback and Directing Services

Administration/Scoring
Client feedback
Interpretation
Service planning
Right Tools for the Job
When all you have is a hammer...
Measurement Matters

• **Type** of Tool
  – Evidence for:
    • Reliability and Validity
    • Sensitivity and Specificity
Source of Information?
Why is Trauma Assessment Important?

- Identify high risk clients
- Identify salient symptoms
- Support individualized referrals to appropriate services
- Help guide goals
- Gather information not disclosed during an interview
- Assess changes in symptoms over time
- Support legal system in assessing children’s safety/best interests
- Identify systemic needs and strengths
- Support sustainability in funding by tracking improvements
How Can Assessment be Used in Case Planning Efforts?

- Assists in identifying and prioritizing the needs of children and families who have been impacted by trauma
- Directs treatment/case planning efforts

- Desk Guide on Trauma-Informed Mental Health for Child Welfare

- It provides a structure to code and summarize this information that has been gathered.
- This structure can be translated and communicated to others.

- Child Welfare Trauma Training Toolkit
Examples of Tools and Resources to Assist in Linking Assessment and Casework Planning

  - Includes information on screening and assessment
  - Highlights the critical elements of a trauma assessment for caseworkers

  - Desk Guide on Trauma-Informed Mental Health for Child Welfare
  - Desk Guide on Trauma-Informed Child Welfare for Mental Health Professionals
Why Assessments Matter to Families and Youth

Our Panelists

• Mandy Taylor
• Antron McCullough
• Jeremy Harvey
• Denise Spires
Panel Discussion Questions

- What are thoughts about what an “ideal assessment and planning” process should look like from your perspective?

- How does collaboration, partnership or engagement with family members relate to assessment, your case planning, and any treatment?

- What challenges/barriers did you experience as they relate to using the assessment as an opportunity to plan for your overall child welfare involvement?

- If you didn’t feel like a partner as you were going through the assessment and planning process, can you share what that felt like? For instance, to know there was a file of paper about you/your family, but you didn’t know what it said or meant?
Large Group Reflections

What was the most striking, surprising, or impactful thing you heard the family members share about their experiences with child welfare assessments and case planning?
Facilitate partnership with families and engage in collaborative treatment planning process

Utilize assessment information to validate need for initial/ongoing treatment

Assist with therapist-client/family discussion related to interventions that would be most helpful based on needs

Help clients see “they are not alone” – and also highlight areas in which symptoms are out of the norm

Facilitate understanding how other people view them (cross-informant data)

Help clients/families identify strengths and resources

Help client see how they are making progress and areas of continued need
Take a Break!

Back in 15....
Highlights and Successes with the CANS: Panel Discussion

Our Panelists

• Nena Horton
• Sabrina Townsend
• Megan McCormick
Move to Affinity Groups

Our Small Groups/”Affinity” Groups

• Family members
• Making policy / procedures / other administration efforts related to the CANS
• Supervising others who use the CANS
• Direct use of the CANS with family members
• Partner with CANS Users (OR “Other – Don’t Fall into Any of the Other Groups”)

NOTE: If you fit into more than one, you choose!
Your “Assignment”

Introduce yourselves to one another

Reflect on most significant successes and challenges from your own perspectives / in your own experiences for each of the following...

First Conversation (30 min.): Using the CANS to guide the assessment process

Second Conversation (30 min.): Using the CANS to inform case planning
Questions to Help Focus Your Discussions: Part I

• How do the panel discussions and the issues raised in the panels (both successes and challenges) relate to the work you have already been doing as you use the CANS as part of your assessment process?

• In what ways is the CANS used as part of your assessment process?

• What has made it successful and why?

• What tools and/or resources have supported its success?

• What have been the main challenges and what do you think has limited its success?
Questions to Help Focus Your Discussions: Part II

• How do the panel discussions and the issues raised in the panels (both successes and challenges) relate to the work you have already been doing as you use the CANS as part of your case / service / treatment planning process?

• In what ways is the CANS used as part of your case / service / treatment planning process?

• What has made it successful and why?

• What tools and/or resources have supported its success?

• What have been the main challenges and what do you think has limited its success?
One Last Thing Before Lunch….

• At your affinity team table, count off 1-6.
• Write down your number (or make sure you remember it!)
• Plan to move to your numbered table after lunch
LUNCH!

Back at 1:15
Providing Feedback on Existing Resources:
Small Group Discussion
Resources developed by CCTASP to support use of the CANS and Trauma-Informed Practice

- CANS Tip Sheet: A Guide for using CANS with Clients and Families
- Creative Applications for Different Provider Roles: Using the CANS with Complexly Traumatized Children and Adolescents
- Concrete Guidelines to Treatment Planning and Clinical Application
- Guidelines for Trauma Informed Assessment, Treatment Planning and Treatment with the CANS Trauma Version
- CANS-Trauma Consumer Engagement Video Clips: Use of the CANS in Trauma-Informed Clinical Practice
- CANS-Trauma Item Video Clips
How the CANS can be used to Support Psychoeducation

- Explain your role and who the information you collect will be shared with.
- Talk about WHY you are asking about trauma and other areas of needs/strengths on the CANS.
- Don’t skim over difficult terms on the CANS (e.g., dissociation). Explain these concepts using everyday and developmentally appropriate language.
- Use the CANS to demonstrate that it is okay to talk about difficult things or memories.
- As you are discussing different CANS items, use the opportunity to normalize the child and parent’s reactions.
- Have youth and parent trauma-focused resources on hand to share.
Providing Feedback on Existing Resources

• Introduce yourselves
• Take a few minutes to individually review the resource your table has been assigned
• Discuss:
  - Who seems like the ‘right’ or intended audience for this resource?
  - How could this resource be enhanced or adapted specifically for a casework audience?
  - What do you like about this resource? What makes it most helpful and/or useful?
  - In what specific ways could this resource be improved?
  - What’s missing (if anything)?
Back to Affinity Groups: Brainstorming New and Improved Resources

• 20 minutes to focus on each of three different topics
  • Get specific
  • Focus on the concrete

What pieces of information would you put into a product to do each of the following?
Topic 1: Writing Goals / Objectives

If You Were to Adapt or Create a Resource to...

...use the CANS results to write goals/objectives in case plans / service plans; and

...integrate CANS results with other required case/service plans

• Get specific
• Focus on the concrete
• Try to respond to the following question:

What pieces of information would you put into a product to do each of the following?
If You Were to Adapt or Create a Resource to...

...share CANS results with families; and

...engage and partner with families in writing their own goals and objectives

• Get specific
• Focus on the concrete
• Try to respond to the following question:

What pieces of information would you put into a product to do each of the following?
If You Were to Adapt or Create a Resource to...

communicate with partners/providers for information collection and sharing scores

• Get specific
• Focus on the concrete
• Try to respond to the following question:

What pieces of information would you put into a product to do each of the following?
Getting Resources into Practice
Consider these insights from our family partners as you begin your discussion...

From: *Use of the Child and Adolescent Needs and Strengths (CANS) in Trauma-Informed Clinical Practice: Application for Comprehensive Assessment, Psychoeducation, Client Engagement and Collaborative Treatment Planning.*
Goals of the CANS-Trauma Engagement Video:

- Consider a variety of ways to collaboratively complete CANS
- Identify strategies for using CANS assessment data in practice, including:
  - Reviewing CANS scores with client
  - Use of CANS as basis for collaborative treatment planning with youth and caregivers
  - Use of CANS in tracking client change over time and adjusting treatment plan as necessary.
- Understand how CANS data reports (e.g., graphs) can be used to demonstrate change in therapy over time and as a continued opportunity for engagement and psychoeducation.
Clip #16: Foster Parent Recommendations: Completing the CANS Collaboratively and Sharing Feedback
Getting Resources into Practice: Discussion Questions

• How do we get these types of resources into the hands of caseworkers and others who need them most?

• How do we inspire, encourage, and support people to actually use these types of resources?

• What are the ideal format(s) or procedures for presenting the types of information in these resources?

• How do we know if these types of resources are getting used?
Large Group Reflections and Discussion
Evaluations

A MAGIC 8-BALL?! THIS IS YOUR DEFINITIVE EVALUATION STRATEGY...?
Closing and Next Steps

• Notes from the day will be shared with participants
• Open to additional recommendations and reflections

Appreciation is a wonderful thing; it makes what is excellent in others belong to us as well.

Francois-Marie Arouet de Voltaire
1694-1778, Writer and Philosopher
For more information and to offer further suggestions/ideas, please contact us!

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