Innovations and Applications in Trauma-Informed Child and Family Assessment: A Breakthrough Series Collaborative Expert Panel Meeting
Chicago, IL
August 12, 2014
Welcome!

Welcome To Chicago
MAYOR RAHM EMANUEL
1. Name & where you’re from
2. Why this work is important to you? (OR)
3. Why you think you were invited to this meeting to share your experience and expertise?
<table>
<thead>
<tr>
<th>Time</th>
<th>Agenda Item</th>
</tr>
</thead>
<tbody>
<tr>
<td>9:00-9:30</td>
<td>WELCOME AND INTRODUCTIONS</td>
</tr>
<tr>
<td>9:30-10:00</td>
<td>Review of Meeting Objectives: Background, Overview and Context for Collaboration</td>
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<tr>
<td>10:00-10:45</td>
<td>Overview of Breakthrough Series Collaborative and Collaborative Change Framework</td>
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<tr>
<td>10:45-11:00</td>
<td>BREAK</td>
</tr>
<tr>
<td>11:00-12:15</td>
<td>Focused Discussions on Themes: Small Group Work 1</td>
</tr>
<tr>
<td>12:15-1:00</td>
<td>LUNCH</td>
</tr>
<tr>
<td>1:00-2:00</td>
<td>Drafting and Proposing Revisions: Small Group Work 2</td>
</tr>
<tr>
<td>2:00-2:15</td>
<td>BREAK</td>
</tr>
<tr>
<td>2:15-3:30</td>
<td>Report Out: Sharing &amp; Discussing Small Group Recommendations</td>
</tr>
<tr>
<td>3:30-3:50</td>
<td>Collaborative Change Framework in Action: Brainstorming Challenges and Solutions</td>
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<tr>
<td>3:50-4:30</td>
<td>Large Group Discussion: How Will We Know when Progress has been Made?</td>
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<tr>
<td>4:30 – 4:45</td>
<td>CLOSING AND NEXT STEPS</td>
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Expert Panel Meeting Objectives

Refine the Collaborative Change Framework (CCF) that will be used to guide the work of faculty and sites participating in the Breakthrough Series Collaborative (BSC).

Receive input on how to best select and support teams’ successful participation in the BSC.

Brainstorm and document possible barriers/challenges to implementing the CCF as well as potential strategies for addressing those barriers/challenges.
The Collaborating Centers

**Northwestern CANS Team**
- NCTSN Category 2 Center focused on developing and disseminating trauma-focused assessment strategies (CANS) across providers/service settings.
- Translation of CANS in trauma-informed treatment planning, engagement, psychoeducation and systems planning.

**FITT Center FANS Team**
- NCTSN Category 2 Center bringing a family lens to the field of child traumatic stress.
- Building family level tools. Strengthening Families Coping Resources, Trauma Adapted Family Connections and FamilyLive, FANS Trauma and FITT Toolkit.
CANS-Trauma and FANS-Trauma

Child and Adolescent Needs and Strengths (CANS)-Trauma
Comprehensive Version
Manual
A Comprehensive Information Integration Tool for Children and Adolescents Exposed to Traumatic Events

Updated March 2013

FAMILY ASSESSMENT OF NEEDS & STRENGTHS
Trauma Version

FANS-Trauma
An Information Integration Tool for Families Exposed to Traumatic Events
Manual

Copyright, 2009

This project was funded by the Substance Abuse and Mental Health Services Administration (SAMHSA), US Department of Health and Human Services (HHS). The views, opinions, and conclusions expressed are those of the authors and do not necessarily reflect those of SAMHSA or HHS.
Our Collaborative Goal
• **Meaningful Use** of assessments is the link between gathering assessment information (from any range of formats or sources) and using this information to guide, inform, and support practice and the delivery of services.

• The term **Assessment Translation** has also been used to describe how to apply assessment information and data in a meaningful way to inform clinical practice.

CMS Stages of Meaningful Use

- **Stage 1:** Data Collection and Sharing
- **Stage 2:** Advance Clinical Process
- **Stage 3:** Improve Outcomes
Trauma- and Family-Informed, “Data Driven” Planning and Engagement

Collaborative Treatment and Service Planning

Strengths Identification and Building

Caregiver/Family Engagement and Support

Data-driven decision making

Trauma-focused, Family-informed Comprehensive Assessment

Systems Planning
Meaningful Use of Assessment

“How can we effectively utilize and translate into practice trauma- and family-informed assessment?”
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
- Translation of “research” tools or data into clinical practice
- Training of professionals
- Multiple and interconnected needs of families
- “Buy in” to the assessment process/utility across roles
- Access to trauma-focused services
<table>
<thead>
<tr>
<th>CANS-Trauma</th>
<th>FANS-Trauma</th>
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<tbody>
<tr>
<td>Online tool</td>
<td>Hard copy or Online scoring</td>
</tr>
<tr>
<td>Online Training and Videos</td>
<td>Face to Face Training (one day with fidelity follow up and ongoing TA)</td>
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<tr>
<td>Large Database and number of users</td>
<td>Piloted tested with 3 NCTSN teams</td>
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What is Assessment Translation?

Assessment translation is like a bridge between assessment data and the application of that data to improve clinical practice.
Total Clinical Outcomes Management (TCOM): Applications of the CANS/FANS approach across all levels

- **Individual child & family**: a shared understanding of their needs & strengths, decreased suffering, increased strengths and progress moving through the system
- **Therapist**: interventions that will help my clients
- **Program heads**: referrals and staff investment
- **Agency heads**: data to support expenditure and justify requests for additional assistance
- **State**: rationale for maintenance of or increased support
- **Federal Government**: convinced that appropriated money is being used to meet policy expectations
An Integrated and Functional Assessment: Strengths of Trauma and Family Informed Approach

- A Comprehensive and Flexible Assessment Strategy
- An Information Integration Tool
- A Decision Support Tool
- A Communication Tool
- An Outcomes Management/Quality Improvement Tool
- Action-oriented Treatment Planning Tool
- A Prospective and Retrospective Rating Tool
CANS-Trauma Model: Assessing Complex Trauma Exposure, Responses, and Contextual Factors/Supports

Child Strengths

Life Functioning
Acculturation
Behavioral/Emotional Needs
Risk Behaviors

Traumatic Stress Symptoms

Caregiver Needs/Strengths

Child & Family Outcomes

Traumatic/Adverse Experiences

NCTSN
The National Child Traumatic Stress Network
FANS and the FITT Model: Increase awareness of the impact of trauma on family systems

- Child Response
- Sibling Relations
- Parent-Child Relations
- Parenting Practices & Quality
- Adult Intimate Relations
- Intergenerational response
- Adult/Parental Response

Time*
- Acute and longer-term effects
- Individual development
- Family life cycle

Child and Family Outcomes

NCTSN
The National Child Traumatic Stress Network
Breakthrough Series Collaborative: Purpose and Overview
What is a BSC?

• Institute for Health Care Improvement (1995)- *Bridge the gap between knowledge and practice*

• Adapted by NCTSN (2005) – *Move from training on EBPs to implementation*

• Key elements:
  – Collaborative learning
  – Focus on broad scope
  – System transformation approach to change
  – Emphasis on quality improvement, implementation, and sustainability
  – Focus on testing, adapting, spreading, and sustaining practices across multiple settings.

NCCTS Training & Implementation Team (2014). *Overview of Types of Collaboratives.* Los Angeles, CA and Durham, NC: National Center for Child Traumatic Stress.
BSC Timeline
(Agosti & Todd, 2014)

Typically 3 Months

INITIATION
Topic & Scope Definition

Typically 6 Months

PLANNING
Collaborative Change Framework Development
Selection of Faculty
Application / Team Selection

Typically 12-16 Months

IMPLEMENTATION, MONITORING, & SUPPORT

Pre-Work / Launch
Learning Session 1
Learning Session 2
Learning Session 3

Action Period 1
Action Period 2
Action Period 3

PDSA
PDSA
PDSA

Regular Conference Calls
Online Collaboration with Other Teams
Self-Assessments and Priority Setting
Monthly Metrics
Four Important BSC Adages

• Every system is perfectly designed to achieve the results it gets

• We can learn more from collaborating than from working alone

• All improvement requires change, but not all changes lead to improvement

• Bridge the gap between knowledge and practice

(Agosti & Todd, 2014)
Plan – Do – Study – Act Cycle

**PLAN**
Define the objective, questions and predictions. Plan to answer the questions (who? what? where? when?)
Plan data collection to answer the questions

**DO**
Carry out the plan
Collect the data
Begin analysis of the data

**STUDY**
Complete the analysis of the data
Compare data to predictions
Summarise what was learned

**ACT**
Plan the next cycle
Decide whether the change can be implemented
1. **What are we trying to accomplish?** *(Aim)*
Here, participants determine which specific outcomes they are trying to change through their work.

2. **How will we know that a change is an improvement?** *(Measures)*
Here, team members identify appropriate measures to track their success.

3. **What changes can we make that will result in improvement?** *(Changes)* Here, teams identify key changes that they will actually test.
The Collaborative Change Framework: Leading the Way to the BSC.
What We Are Asking You To Do?

• Create the foundation

• Establish the framework - ‘Guiding Charter’ for work

• Develop measures that help guide progress and lasting change
The Role of the Collaborative Change Framework in the BSC

- Alice: I was just wondering if you could help me find my way.
- Cheshire Cat: Well, that depends on where you want to get to.
- Alice: Oh, it really doesn't matter...
- Cheshire Cat: Then it really doesn't matter which way you go.

(Adapted from slides from Agosti & Todd, 2014) and Lewis Carroll’s Alice’s Adventures in Wonderland

NCTSN The National Child Traumatic Stress Network
The Role of the Collaborative Change Framework (CCF) in the BSC

- CCF is the “ideal” vision
- The Mission = Charter and Scope of the Work
- Themes and Objectives = Blueprint for Change
- Offers a frame for ‘where to go’ not how to get there
- Framework of components to be ‘tested out’ to support making actual changes in practice

(Agosti & Todd, 2014)
Collaborative Mission

“How can we effectively utilize, integrate, and translate trauma- and family-informed assessment into practice?”

- Use tools that are designed for and ready for use in the field (CANS-Trauma and FANS-Trauma)
- Use Plan-Do-Study-Act methodology to address barriers and sustain successful use of assessment.
- Collaborate with youth, families, providers, organizations and systems to implement strategies that ensure the meaningful use of the CANS/FANS-Trauma to support positive outcomes for children and families impacted by trauma.
Collaborative Change Framework
Goals (1-7)

1. Staff increase their knowledge and competence in utilizing trauma-focused and family-informed assessment and treatment/service planning to enhance services and improve outcomes.

2. Staff use the CANS-Trauma and/or FANS-Trauma tools (or other CANS-related tools) for case conceptualization.
3. Staff use the CANS-Trauma and/or FANS-Trauma tools (or other CANS-related tools) to support communication with individuals and families.

4. Staff use the CANS-Trauma and/or FANS-Trauma tools (or other CANS-related tools) for communication across providers and systems involved in care.

5. Staff engage youth and families in the assessment and treatment/service planning process at the initial meeting and throughout services in ways that are meaningful and relevant to the client.
6. The organization/agency’s treatment or service plans increasingly reflect needs and strengths related to trauma-focused and family-informed goals and service delivery.

7. Organizations/agencies utilize the CANS-Trauma and/or FANS-Trauma information (or from other related tools) to guide and support trauma-informed systems/agency planning and decision-making.
Large Group Discussion: Reflections and Questions
Break (10:45-11am)
The Collaborative Change Framework: Themes

1. Knowledge Development, Training, and Competence in Trauma Assessment
2. Screening, Assessment, and Planning
3. Engagement and Partnering with Parents/Caregivers and Families
4. Systems-Level Support and Cross-Systems Collaboration
Theme 1: Knowledge Development, Training, and Competence in Trauma Assessment

Staff and stakeholders...

- Know how to recognize child trauma and its effects
- Understand the use and value of trauma- and family-informed assessment
- Understand how to reliably administer and score CANS/FANS
- Understand how to interpret CANS/FANS for use in planning
- Use an effective approach to interpret and translate assessment information
Staff use information from the CANS/FANS-Trauma to..

- Assess a range of areas of functioning related to trauma
- Inform case conceptualization
- Target trauma-informed, family-informed, strengths-based treatment or service goals
- Share information with family members and collaborate to develop treatment/service goals
- Guide and support agency planning and address resource needs
Theme 3: Engagement and Partnering with Parents/Caregivers and Families

- Provide psychoeducation to families about impact of trauma
- Share purpose and goals of CANS/FANS process
- Share CANS/FANS results with youth and families
- Support to identify and highlight strengths
- Collaborate to develop treatment/service plans and goals that matter to them
- Use follow-up/re-assessments to support and monitor progress and identify additional needs
Theme 4: Systems-level Support and Cross-Systems Collaboration

- Discuss and confirm results of assessment with key stakeholders
- Consistently share assessment results with other relevant staff
- Provided with adequate time to conduct and review CANS/FANS information in meaningful ways
- Procedures and resources allocated to systematically review CANS/FANS information
- Use CANS/FANS information to identify and address service gaps
Small Group Work

• Each group will focus on their assigned theme
• 4 themes = 4 small groups
• Dig in to the material
• Provide constructive feedback (not just critical)
• Try to minimize jargon – use clear language
• Remember the ground rules

(Agosti & Todd, 2014)
Small Group Breakout Part 1: Focused Discussion on Themes

Questions to Discuss

- Is the overall theme clear?
- Are the objectives logical? Do they make sense? What’s confusing?
- What’s missing from this theme area?
- What should be somewhere else (or simply not here at all)?

(Agosti & Todd, 2014)
Lunch (12:15-1:00pm)
Small Group Part II – Writing, redrafting, and recommendations

• Based on pre-lunch discussion, propose better (or just different) language for this theme, including all of the objectives
• Feel free to add or delete objectives
• Feel free to move objectives
• PLAN FOR REPORT BACK!!!

(Agosti & Todd, 2014)
Break (2-2:15pm)
Small Group Report Backs
Large Group Discussion: Report Back Reflections and Questions

• From the small group reports, what stuck with you? What did you find compelling?

• What themes did you hear from a few of the groups?
  – Is it possible that these areas may indicate places to reduce redundancy across themes/objectives?

• Are there areas where there unresolved differences of opinion might remain? If so, what might your recommendations be?

(Agosti & Todd, 2014)
Collaborative Change Framework in Action: Brainstorming Challenges and Solutions

“Lightning Round” Discussions
Addressing Barriers to Meaningful Use of Trauma and Family Informed Assessments

- Family Engagement and System Buy-In
- Well Trained Workforce and Access to Services
- Resources (Time, Tools,)

NCTSN: The National Child Traumatic Stress Network
“Lightning Round” Small Groups

• Identify potential challenges and barriers for each theme area
• Individually brainstorm as many solutions as possible solutions to each challenge.
• Organized and prioritize solutions into concrete strategies.
• Identify “how will we know” what success will look like?
Large Group Discussion
Mapping Mission, Goals and Objectives to Metrics

• How can we effectively utilize, integrate, and translate trauma- and family-informed assessment into practice?

• How will we track change and progress?

• How will we sustain meaningful use of trauma and family-informed assessment in practice and across all levels?
Closing, Evaluation, Feedback, & Next Steps
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Selected Citations

- Agosti, J. and Todd, J. from the Tennessee Trauma Informed Screening and Assessment of Young Children Breakthrough Series Collaborative Expert Meeting, March 2014.

