

**Date:** March 26, 2019

**CYF Memo:** # 07- 18/19 (Replaces CYF Memo # 03-18/19)

**To:** CYF Mental Health Treatment Programs

**From:** Yael Koenig, CYF Deputy Director

**Re:** **Updated CANS sharing**

- Client Plan- CANS Sharing Confirmation page
- CANS Family Letter

In July 2018, the California Department of Health Care Services (DHCS) disseminated an All County Letter (ACL) [No.18-85](#) mandating that the Child and Adolescent Needs and Strengths (CANS) assessments be shared between County placing agencies (Child Welfare Services [CWS] and Probation) and Mental Health Plans (MHPs). The ACL identifies parameters around sharing specific CANS items. When an Authorization to Disclose Protected Health Information (including the 04-24A; 04-29) is in place, our local process allows for the providers to release the full CANS to the placing agency.

In an effort to align with this mandate, the County of San Diego Behavioral Health Services (BHS) created the CANS Family Letter to provide a systematic and consistent manner for BHS providers to discuss CANS results with families in advance of CWS or Probation representatives sharing the CANS results in a Child and Family Team (CFT) meeting.

After receiving feedback from Mental Health providers and working in partnership with the Mental Health Contractors Association (MHCA), the following expectations were established:

- CANS Sharing Confirmation page shall be completed within the Client Plan
- The confirmation page will serve as verification that a discussion about the CANS results has occurred with the client and family which also might include offering a copy of the CANS Family Letter and CANS results to the family

The attached revised CANS Family Letter provides a brief explanation about the CANS and can also serve as a space for the family to take notes on the various domains pertaining to strengths and needs. While sharing a copy of the CANS Family Letter or CANS results with client and family is one optional way to share the information, it is important to remember that for system-involved children and youth, Child Welfare representatives are routinely sharing CANS results in CFT meetings. CWS has communicated positive feedback and report productive discussions as a result from this process.

The importance of sharing assessment results with families has been highlighted by the State and originates in feedback received by the State from families. CYF recognizes that there are instances when sharing specific CANS items may not be clinically indicated, and the system has to allow for those exceptions. In an effort to uphold the philosophy of 'nothing about us without us', the system expectation is to communicate as much as clinically appropriate with clients and families.

The CANS Sharing Confirmation page will be live on April 1, 2019 in CCBH and expected to be utilized no later than May 1, 2019.

**Attachments:** CANS Family Letter Rv. 3.11.19 (*Will be available in all threshold languages*)  
CANS Family Letter Explanation Rv. 3.11.19  
Client Plan- CANS Sharing Confirmation page

**CC:** County of San Diego Child Welfare Services  
County of San Diego Probation Department  
Child and Adolescent Research Center (CASRC)  
Health Services Research Center (HSRC)  
County of San Diego Performance Improvement Team  
County of San Diego Quality Management  
Optum Health

## CANS Family Letter

Dear Family,

Part of our work together is to figure out how to successfully achieve your goals by identifying:

- Useful strengths
- Strengths to build on
- Areas that need immediate action
- Areas that need action

If you are part of a **Child and Family Team (CFT)**, during an upcoming meeting your Child Welfare Protective Services Worker or Probation officer will likely ask all of us to talk about the **Child and Adolescent Needs and Strengths (CANS)** assessment tool. This assessment tool is based on your input with a goal of leading to a plan that will support your safety and well-being.

Please use the space below to help you organize your thoughts about these concepts. You can share what you write or simply talk with us about what is important to you.

\_\_\_\_\_  
(Clinician Name)

\_\_\_\_\_  
(Date)

Areas Needing Immediate Action	Areas Needing Action
Useful Strengths	Strengths to Build
Upsetting Experiences	

## County of San Diego Behavioral Health Services

## CANS Sharing Confirmation

**To be completed for Children and Youth up to age 21:**

1. CANS Assessment information was incorporated in the Client Plan

☐ Yes ☐ No If no, please explain:

2. The following approach was utilized to review assessment or reassessment impressions with the family (minimum one option):

- A.
- ☐
- CANS Family Letter was discussed with

☐ Child/Youth on ☐ Parent/Caregiver on 

- B.
- ☐
- CANS Assessment Tool was discussed with

☐ Child/Youth On ☐ Parent/Caregiver on ☐ Discussion occurred in CFT meeting dated 

- C.
- ☐
- CANS Assessment Summary Form was discussed with

☐ Child/Youth on ☐ Parent/Caregiver on 

- D.
- ☐
- Assessment/Reassessment impressions were discussed with

☐ Child/Youth on ☐ Parent/Caregiver on 

- E.
- ☐
- Assessment/Reassessment Impressions were not discussed with

☐ Child/Youth due to: ☐ Parent/Caregiver due to: 

3. Client is a dependent/ward
- ☐
- No
- ☐
- Yes If yes, CANS form was provided to:

☐ PSW on ☐ Probation Officer on ☐ Not provided due to:

County of San Diego Mental Health Plan  
**CHILD AND ADOLESCENT NEEDS AND  
CANS Sharing Confirmation in Client Plan**

2019

**COMPLETED BY:**

1. Licensed/Waivered Psychologist
2. Licensed/Registered/Waivered Clinicians
3. Licensed/Registered Professional Clinical Counselor
4. Physician (MD or DO)
5. Nurse Practitioner

**COMPLIANCE REQUIREMENTS:**

1. CANS certified clinical staff shall discuss assessment impressions with youth (over 12 yrs.) and caregiver(s) upon each completion of the SD-CANS assessment tool.
2. CANS assessment tool is completed at admission; UM cycle or every 6 months (whichever occurs first) and discharge.
3. CANS certified clinical staff shall share the CANS results with placing agency(ies) (Child Welfare Services or Probation) when client is a dependent or ward.

**DOCUMENTATION STANDARDS:**

1. Clinician shall document in the Client Plan on CANS Sharing Confirmation page the date and manner in which assessment/reassessment impressions were discussed with youth and family/caregivers.
2. The following items must be completed on the CANS Sharing Confirmation page in the Client Plan:
  - A. Confirm CANS Assessment information was incorporated in the Client Plan
  - B. Select the method of sharing CANS results with family (at minimum, one option must be selected):
    - a) Sharing CANS Family Letter
    - b) Sharing CANS assessment tool /results; indicate if it occurred as part of CFT meeting
    - c) Sharing CANS Assessment Summary (mHOMS report) discussion
    - d) Assessment / Reassessment impressions discussion
    - e) Reason for not discussing the Assessment/Reassessment impressions
3. Indicate if child/youth has involvement with CWS or Probation. CANS results must be provided to CWS or probation if client is dependent or ward which should be noted and dated.
4. CANS Sharing Confirmation page can be completed as a stand-alone assessment if verification of CANS sharing is not confirmed at the time of final approving the Client Plan.

\* For children/youth involved in Child Welfare Services (CWS), the California Department of Health Care Services (DHCS) disseminated an All County Letter (ACL) No. 18-85 mandating that the CANS assessments be shared between County placing agencies and Mental Health Plans (MHPs). The ACL identifies parameters around sharing specific CANS items. When an Authorization to Disclose Protected Health Information (including the 04-24A; 04-29) is in place, our local process allows for the providers to release the full CANS to the placing agency

*Note: Please see CANS Explanation Sheet for additional information.*