



A SOLUTION FOCUSED APPROACH TO THE CHILD ASSESSMENT OF NEEDS & STRENGTHS (CANS)

Presented by Brhe Zolber, LCPC and Tracey Sutton, LCSW

WELCOME AND INTRODUCTIONS

Brhe Zolber, LCPC

- Clinical Supervisor St. Luke's
Boise

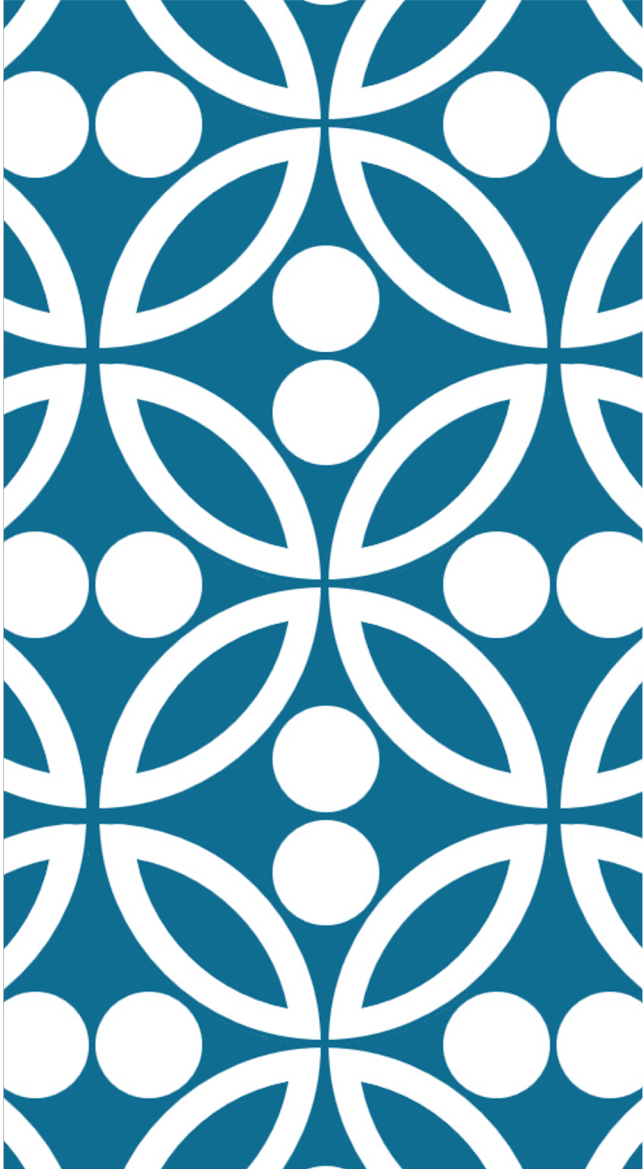
Tracey Sutton, LCSW

- Manager of Therapy Services
Heritage Health – Coeur d'Alene



POLL - INTRODUCTIONS

- **What role do you play in your organization?**
 - ❖ **Therapist**
 - ❖ **Clinical Supervisor**
 - ❖ **Paraprofessional**
 - ❖ **Manager/Director**



This session is NOT an opportunity to complain about the CANS.

This session is NOT brought to you by Optum or Health & Welfare.

This session is NOT an attempt to make you fall in love with the CANS.

This session is NOT a magic pill that will make your work with the CANS more fun!

WHAT THIS SESSION IS NOT!

WHAT THIS SESSION IS...

An opportunity to use a Solution- Focused lens to explore how we can shift our approach to the CANS, adjust our workflow and perhaps even see the CANS as a useful tool.



How many adjustments have we had to make to how we practice mental health treatment over the years?

What is the difference between problem solving and solution finding?

Applying solution-focused approaches to organizational change – the data speaks to progress and efficiency.

SOLUTION-FOCUSED APPROACH TO MANAGEMENT

SOLUTION-FOCUSED THERAPY TO SOLUTION- FOCUSED MANAGEMENT

Future focused

Goal directed

The same but different.

Translating the SF therapy approach to management is challenged by the varied contexts: coaching, reviews, team development, quality groups, leadership, conflict resolution, etc.





1. Solutions not problems
2. In between – the action is in the interaction
3. Make use of what's there
4. Possibilities – past, present and future
5. Language – simply said with emphasis on the positive
6. Every situation is different

Adapted from the work of Paul Z. Jackson and Mark McKergow

THE SIMPLE MODEL

KEY PRINCIPLES OF THE SOLUTION- FOCUSED MODEL

Change happens all the
time

Identify and magnify useful
change

A detailed understanding of
the problem doesn't
translate into a solution

Avoid too much problem
talk

Focus on what's going well

Jackson & McKergow, 2002



**CHANGE
IS GOOD.**

**You go
first!**

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Create a vision of the future without the problem (not life without the CANS!)

Recognize the resources, skills and expertise developed that will help you move toward the solution (Staff, processes & structure)

Develop a scale to measure progress (I-CANS reports)

Identify and celebrate the contributions that people are making in the solution search

SOLUTIONS NOT PROBLEMS

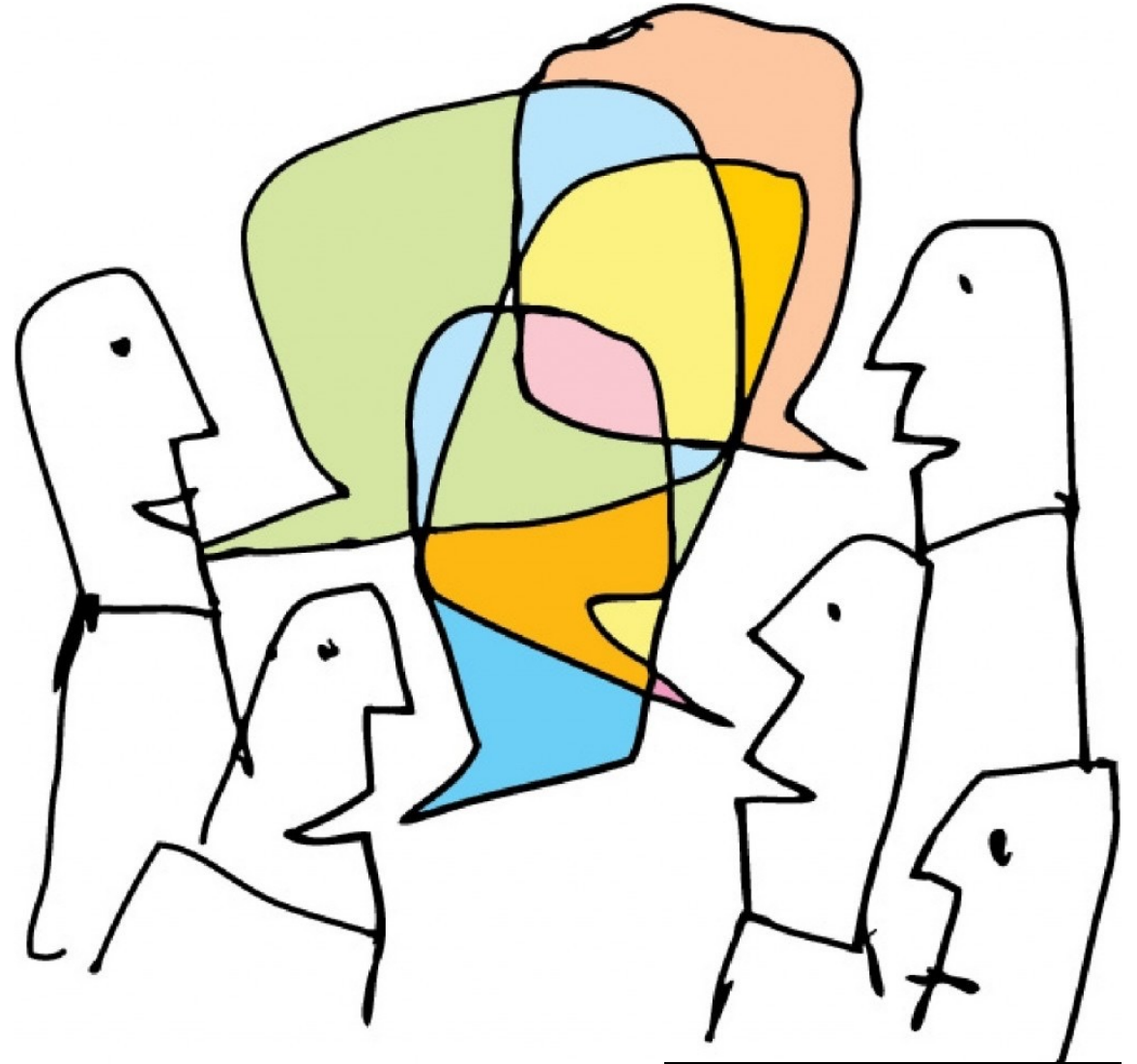
INTERACTION

Individuals are not blamed for systemic problems

Set realistic expectations

Allow people to make the small changes they can in order to have bigger and better results

Recognize that everything in an organization is interdependent with everything else



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THE ANSWERS YOU GET DEPEND ON THE QUESTIONS YOU ASK.

Problem talk versus Solution talk

What kind of limitations have you noticed...?

What kind of benefits have you noticed...?

Steer the interaction with your staff toward solutions instead of problem solving.

We are used to using problem talk: what are your symptoms, how long have you had this problem, what has been the intensity and frequency of this problem?

PARADIGM SHIFT

PROBLEM-FOCUSED APPROACH

Pre-assumption



New tasks (CANS) have deficiencies and challenges that need to be addressed before they can be helpful.

SOLUTION-FOCUSED APPROACH

Pre-assumption



New tasks (CANS) have strengths and can support our work when we identify and build upon the model.

TOO MUCH TO DO AND TOO LITTLE TIME

What changes can be made to ease up on the burden of the CANS?

1. What's already working?

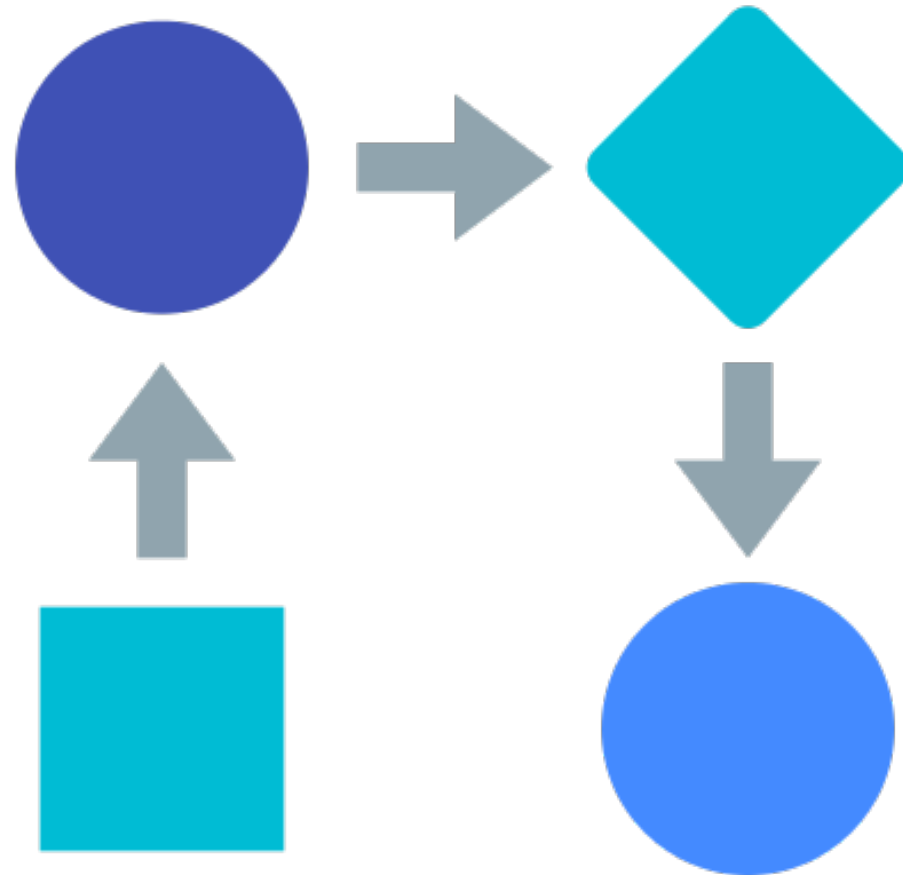
Everyone gets things done to some degree and has some systems in place, however informal. Often people have a well developed system in place until one more thing is added to the work flow...enter the CANS! Rather than discarding the system that's been working, keep the best elements and build on them.

2. Pre-existing tools.

Once the needs are identified, look at ways of working which have been tried and tested by others.

3. Custom tools.

Sometimes a unique workflow is needed to be developed based on the new priorities.





The work of your staff is meaningful and important. The CANS can help your staff gather meaningful and important information about clients. You can use the CANS to validate the hard work of therapy with children and families, explore areas needing attention and celebrating progress.

Everything is useful...even things that seem negative.

MAKE USE OF WHAT'S THERE

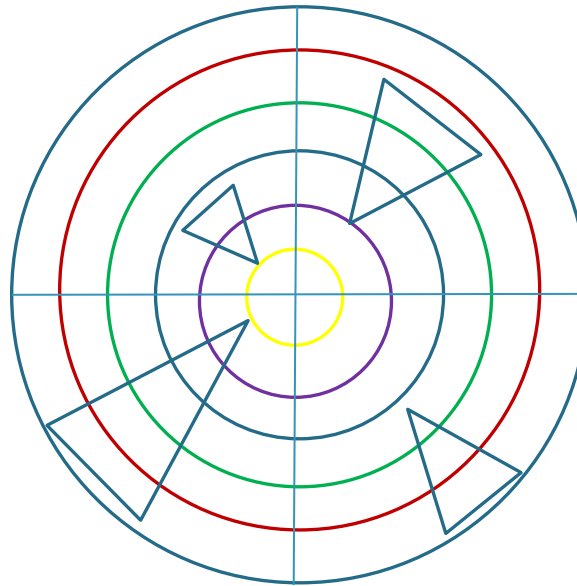
ACTIVITY DESCRIPTION

Using a Solution-Focused approach to the CANS, we want to investigate the strengths of the tool and investigate where there is room for growth and to use those strengths more often. The Strengths Circle will be used to create a graphical representation of the extent to which strengths are used (current use) and the room that exists to use the strength more fully (scope). The center of the circle represents the score of zero and the outer rim is a score of ten.

To what extent are you currently using this strength of the CANS as a tool for your practice.

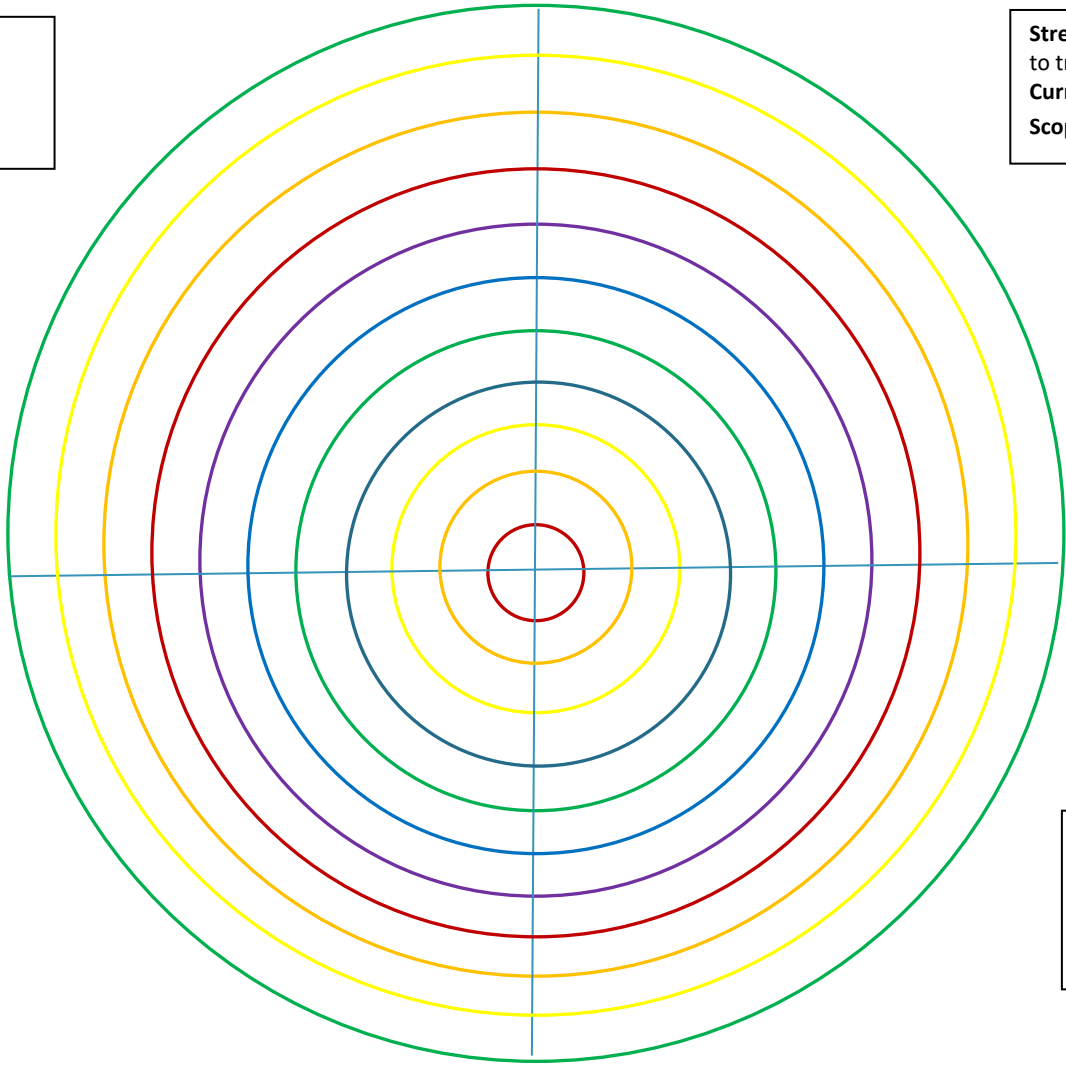
How much scope (potential for improvement) is there for using that strength more in your practice?

Based on your poll responses we will draw triangles connecting those two data points. The bigger the gap between the numbers, the bigger the triangle will be and the more potential there is for using that strength more fully.



Strength: Clinical
Feedback
Current Use: _____
Scope: _____

Strength: Application
to treatment
Current Use: _____
Scope: _____



Strength: Strengths based
Current Use: _____
Scope: _____

Strength: Efficient to
use
Current Use: _____
Scope: _____

POLL

Please rate the following on a scale of 1-10

Application to Treatment – Current use and Scope

Efficient to Use – Current use and Scope

Strengths Based – Current use and Scope

Clinical Feedback – Current use and Scope

I-CANS SUITE OF REPORTS



I-CANS Suite of Reports:

- 1. Yes, I know what this is and I use it**
- 2. I have heard of it but never used it**
- 3. I did not know this existed**

POLL

I-CANS REPORTS PAGE

Idaho CANS | icans-training.cansportal.org/#/portal/idahocans/agency/112 | ICANS Training 20.8.2 | Community Provider Training Agency, Community Provider Tng Agency | ICANS Training, Birte Zoeller | Logout

Home | Search... | Search

Home | Consents/Referrals

Clients

Unique Client Number	Last Name	M.I.	First Name	Birth Date	Medicaid Number	SSN	Next CMH CANS Due
10625215000014I	bo		Nicole	06/25/2015		***-**-0000	
20724218010118A	Brite		Rainbow	07/24/2018		***-**-0101	12/27/2020
21226201000010A	Doe		Jane	12/26/2001		***-**-0000	
20101203234101N	ICANS Training201		Anna	01/01/2003	78923y768334089234089	***-**-2341	12/17/2020
20827218999116E	Jax		Peaches	08/27/2011		***-**-9991	
10515211678902O	Johnson		Bob	05/15/2011		***-**-6789	
20707167707002E	Kiddo		Beatrix	07/07/1967		***-**-7070	04/07/2021
10912205000013I	Mouse		Mickey	09/12/2005		***-**-0000	
20912205000013I	Mouse		Minnie	09/12/2005		***-**-0000	
20815215000018A	Palpatine		Rae	08/15/2015	1515646841651	***-**-0000	04/04/2021
10102200851503H	Robin		Christopher	01/02/2000	0000123456	***-**-1234	12/06/2018
20301210000012E	Skywalker		Leia	03/01/2010		***-**-0000	03/08/2021
10201210000012U	Skywalker		Luke	02/01/2010		***-**-0000	03/08/2021
10223210750910O	smith		john	02/23/2010		***-**-7509	
10614210000008A	Solo		Han	06/14/2010		***-**-0000	03/30/2021
21216203999901N	Turner		Ann	12/16/2003		***-**-9999	10/20/2019
20326208000008A	Tyler		Hailey	03/26/2008		***-**-0000	
10101210000004A	Vader		Darth	01/01/2010		***-**-0000	03/08/2021

Caseload Summary

Last Name	First Name	LOC	Assessment Date
Vader	Darth	3	12/08/2020
Skywalker	Luke	1	12/08/2020
Skywalker	Leia	1	12/08/2020
Solo	Han	3	12/30/2020
Skywalker	Leia	1	01/06/2021
Skywalker	Luke	1	01/06/2021
Vader	Darth	3	01/06/2021
Solo	Han	3	01/19/2021

Caseload By Recommended Level Of Care

● LOC 0 ● LOC 1 ● LOC 2 ● LOC 3 ● In Progress

Caseload By CMH Assessments Due

● Grouped ○ Stacked

● LOC 0 ● LOC 1 ● LOC 2 ● LOC 3

Reports

- Item Breakout Progress Report
- Key Intervention Needs Over Time Report
- Strengths Development Over Time Report
- Caseload Progress Report
- Clinician's Support Intensity Report

ACCESSING REPORTS

The screenshot displays the ICANS Training portal interface. At the top, the browser address bar shows the URL `icans-training.cansportal.org/#/portal/idahocans/agency/112`. The page header includes the ICANS Training logo, the text "Community Provider Training Agency, Community Provider Tng Agency", and a user profile for "ICANS Training, Brhe Zolber" with a "Logout" link.

The main content area is divided into several sections:

- Home:** A search bar with the text "Search..." and a "Search" button.
- Table:** A table with columns for ID, Name, Location, Date, and Status. The visible rows are:

ID	Name	Location	Date	Status
20301210000012E	Skywalker	Leia	03/01/2010	***-**-0000
10201210000012U	Skywalker	Luke	02/01/2010	***-**-0000
10223210750910O	smith	john	02/23/2010	***-**-7509
10614210000008A	Solo	Han	06/14/2010	***-**-0000
- Caseload By Recommended Level Of Care:** A pie chart showing two categories: LOC 2 (red, 50%) and LOC 1 (olive, 50%).
- Caseload By CMH Assessments Due:** A line chart showing data for LOC 0, LOC 1, LOC 2, and LOC 3. The chart is currently empty.
- Reports:** A list of reports with a "View" button next to "Key Intervention Needs Over Time Report".

KEY INTERVENTION NEEDS OVER TIME REPORT

Home Consents/Referrals

Reports

← Key Intervention Needs Over Time Report

CANS Version: Children's Mental Health x v

Locality: x v

Clinician: ICANS Training, Brhe Zolber (Community Provider Training Agency) x v

Assessment Time Point 1 Sign Off Date From: x v

Assessment Time Point 1 Sign Off Date To: x v

Assessment Time Point 1: Initial x v

Assessment Time Point 2: Most Recent Assessment x v

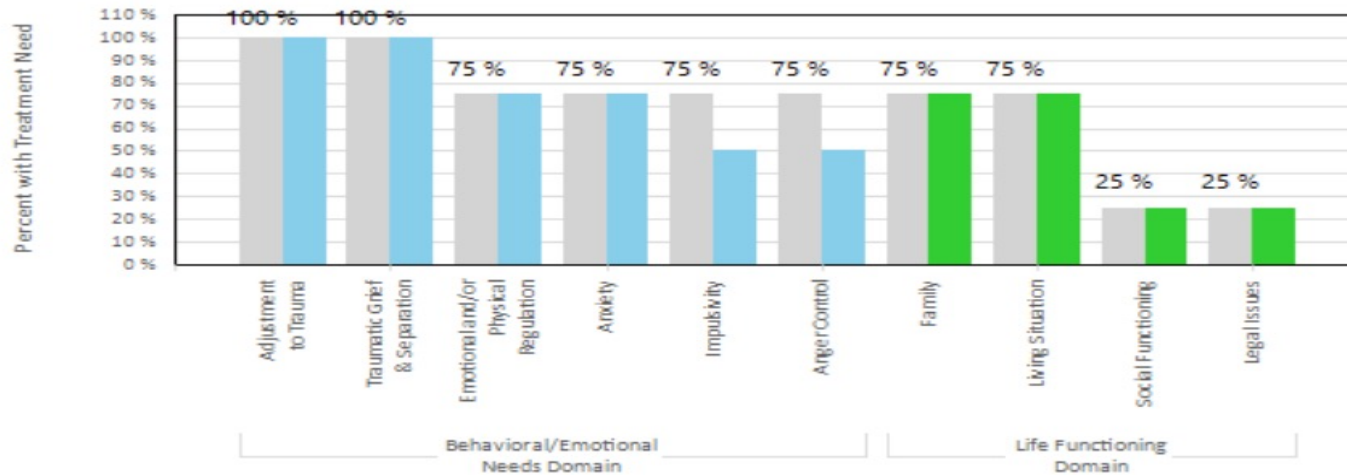
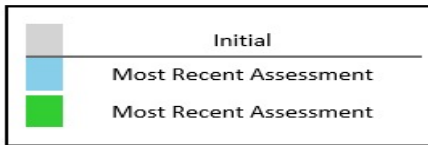
Discharge CANS: Include Discharge CANS x v

1 of 1 200% Find | Next

Clinician: ICANS Training, Brhe Zolber

Key Intervention Needs Over Time

Includes Discharge CANS
n = 4



Note: This chart does not display needs of 0%.

STRENGTHS DEVELOPMENT OVER TIME REPORT

Home Consents/Referrals

Reports

← **Strengths Development Over Time Report**

CANS Version: Children's Mental Health

Locality: Clinician

Clinician: ICANS Training, Brihe Zolber (Community Provider Training Agency)

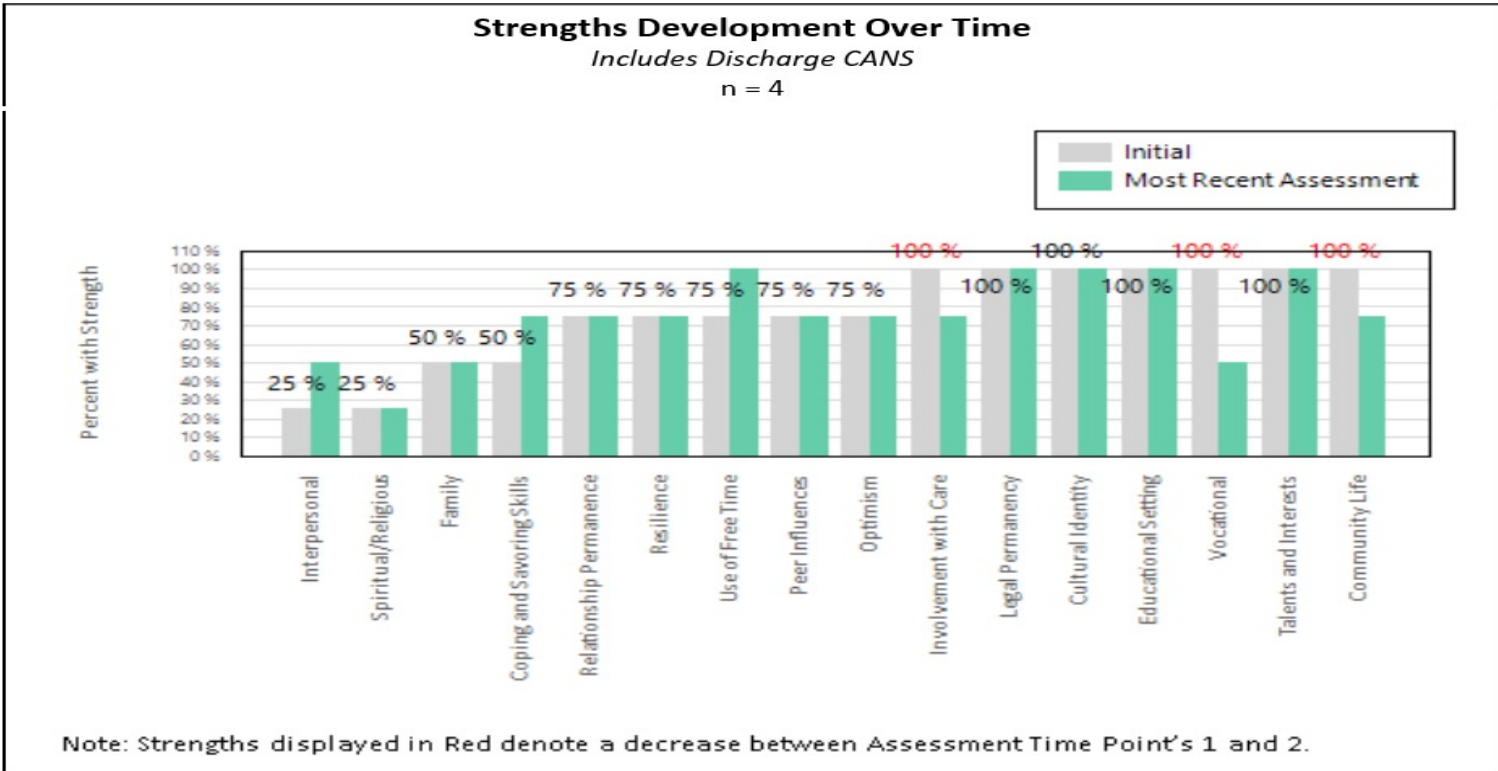
Assessment Time Point 1 Sign Off Date From: [Calendar Icon]

Assessment Time Point 1 Sign Off Date To: [Calendar Icon]

Assessment Time Point 1: Initial

Assessment Time Point 2: Most Recent Assessment

Discharge CANS: Include Discharge CANS



STRENGTHS DEVELOPMENT OVER TIME- AGENCY

Reports

← Strengths Development Over Time Report

CANS Version: Children's Mental Health

Locality: Agency

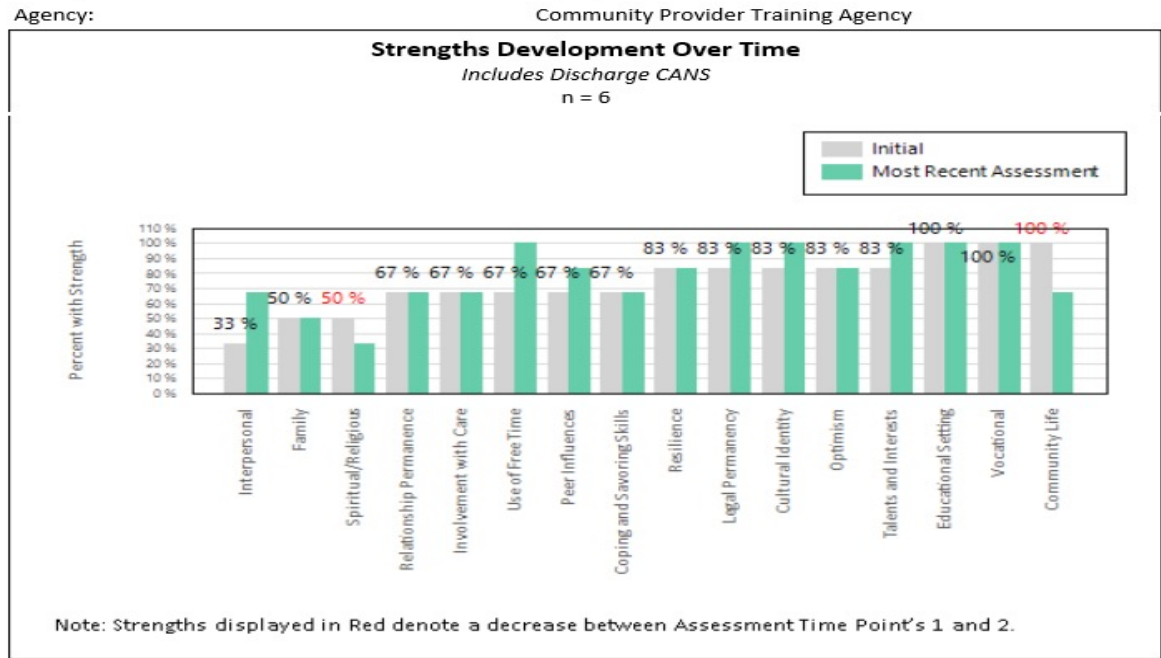
Agency: Community Provider Training Agency

Assessment Time Point 1 Sign Off Date From: Assessment Time Point 1 Sign Off Date To:

Assessment Time Point 1: Initial

Assessment Time Point 2: Most Recent Assessment

Discharge CANS: Include Discharge CANS



CLINICIAN'S SUPPORT INTENSITY REPORT

Home Consents/Referrals

Reports

← Clinician's Support Intensity Report

CANS Version: Children's Mental Health ✕ ▼

Locality: Agency ✕ ▼

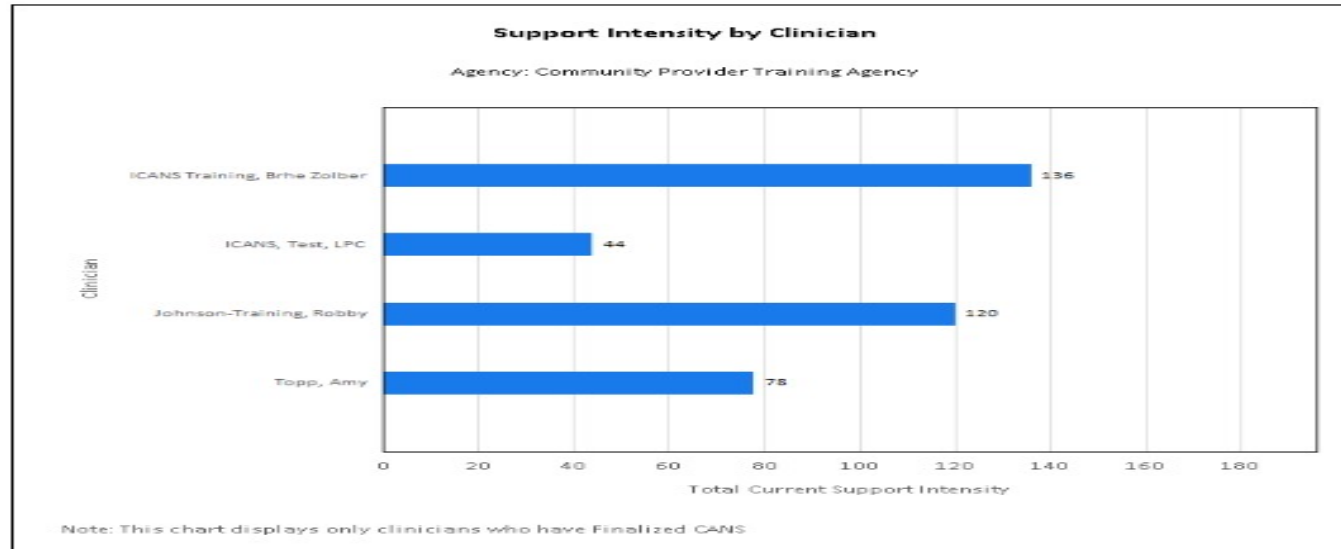
Agency: Community Provider Training Agency

Agency is required.

1 of 1 100% Find | Next

Report Criteria:

CANS Version: Children's Mental Health
Locality: Agency
Agency: Community Provider Training Agency



CASELOAD PROGRESS REPORT

Home Consents/Referrals

Reports

← Caseload Progress Report

CANS Version: Children's Mental Health x

Locality: Agency x

Agency: Agency:

No matches found Community Provider Training Agency x

1 of 4 150% Find | Next

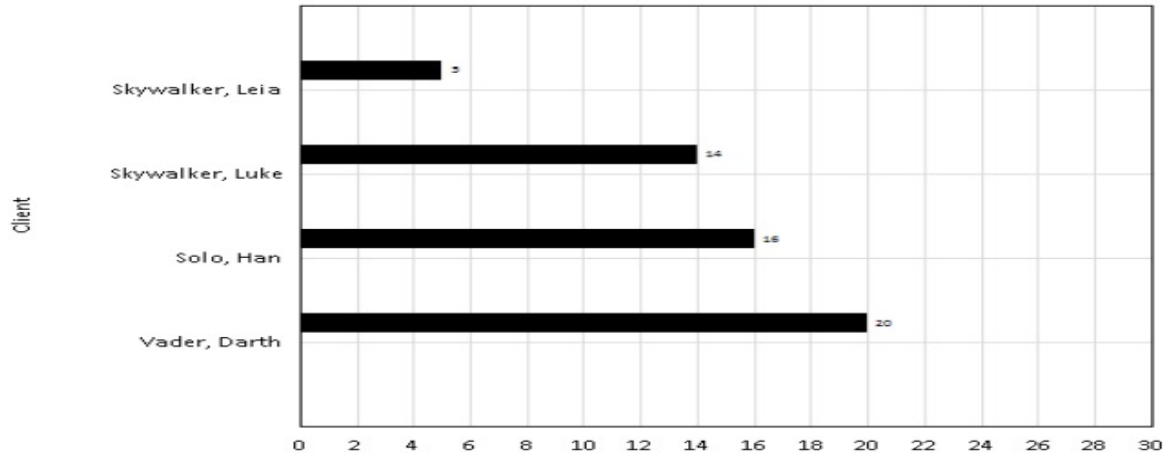
Agency:

Community Provider Training Agency

Clinician: ICANS Training, Brhe Zolber

Agency: Community Provider Training Agency

■ Initial ■ 6-months ■ 9-months



AVERAGE IMPACT REPORT

Home Consents/Referrals

Reports

← Average Impact Report

CANS Version: Children's Mental Health

Locality: Agency

Agency: No matches found

Community Provider Training Agency

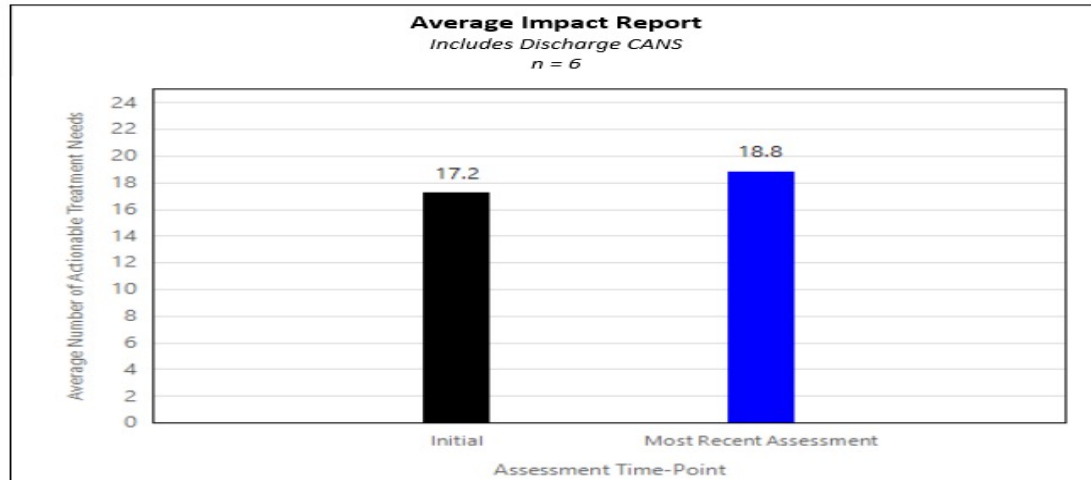
Assessment Time Point 1 Sign Off Date From: Assessment Time Point 1 Sign Off Date To: Assessment Time Point 1: Initial Assessment Time Point 2: Most Recent Assessment Discharge CANS: Include Discharge CANS

1 of 1 150% Find | Next

treatment progress and service effectiveness based on change in the average number of treatment needs for a cohort over time.

Report Criteria

CANS Version: Children's Mental Health
Locality: Agency
Agency: Community Provider Training Agency



ITEM BREAKOUT PROGRESS REPORT

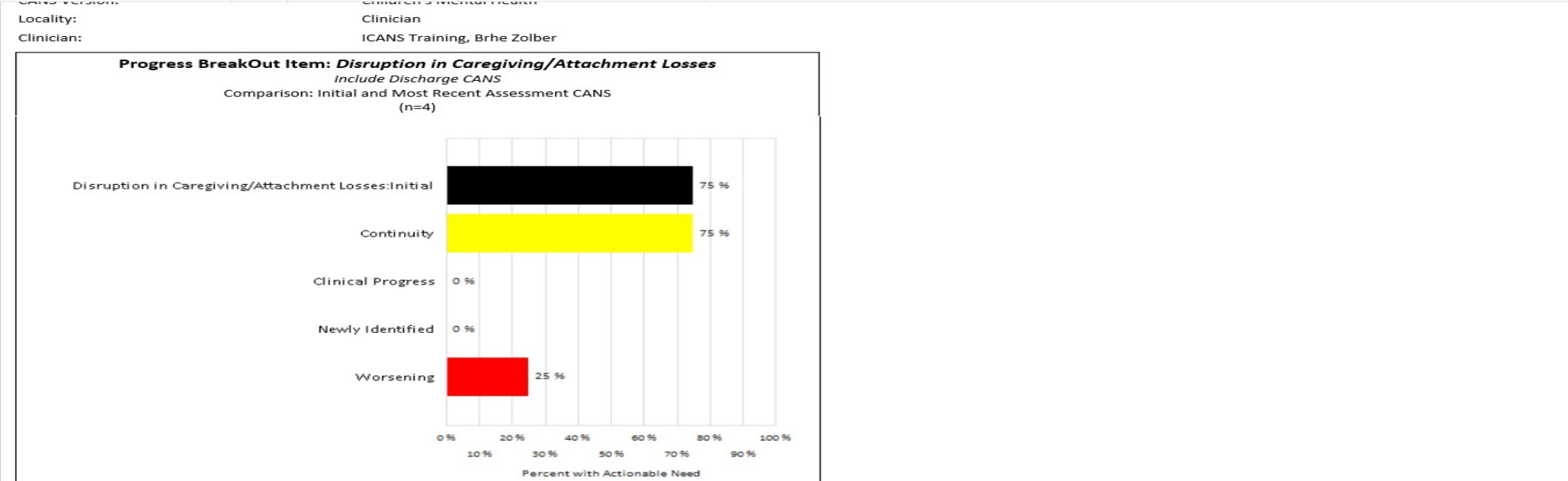
Home Consents/Referrals

Reports

← Item Breakout Progress Report

CANS Version:	Children's Mental Health	Assessment Time Point 1 Sign Off Date From:	
Locality:	Clinician	Assessment Time Point 1 Sign Off Date To:	
Clinician Staff Member Key:	ICANS Training, Brhe Zolber (Community Provider Training Agency)	Assessment Time Point 1 Assessment Type Name:	Initial
Assessment Time Point 2 Assessment Type Name:	Most Recent Assessment	Discharge CANS:	Include Discharge CANS
		Domain:	Traumatic/Adverse Childhood Experiences Domain
		Item:	Disruption in Caregiving/Attachment Losses

Navigation bar with back, forward, refresh, zoom (150%), print, search, and next buttons.



ITEM BREAKOUT PROGRESS REPORT- AGENCY

Home Consents/Referrals

Reports

← **Item Breakout Progress Report**

CANS Version: Children's Mental Health x

Locality: x

Agency: x

Agency Key List:

Agency Key List: No matches found

Community Provider Training Agency x

Assessment Time Point 1 Sign Off Date From: x

Assessment Time Point 1 Sign Off Date To: x

Assessment Time Point1 Assessment Type Name: Initial x

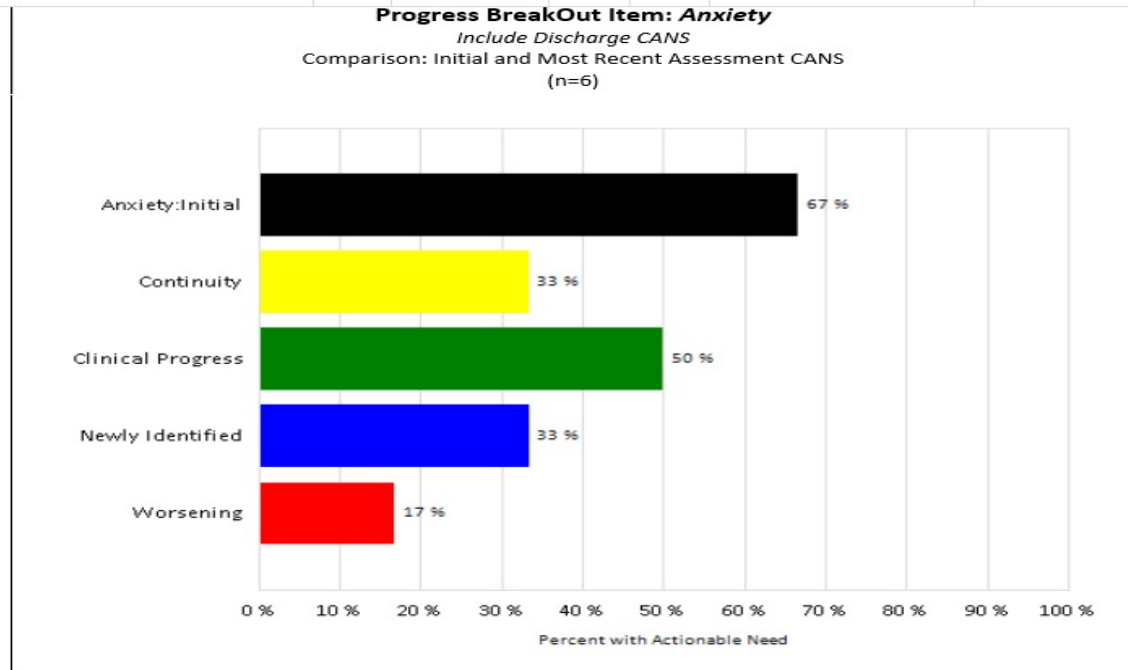
Assessment Time Point2 Assessment Type Name: Most Recent Assessment x

Discharge CANS: Include Discharge CANS x

Domain: Behavioral/Emotional Needs Domain x

Item: Anxiety x

1 of 1 15.0% Find | Next



RESOURCES

- Jackson, P.Z. & McKergow, M. (2002). The Solutions Focus: The Simple Way to Positive Change. Nicholas Brealey Publishing: London
- [http: www.positivepsychology.com/toolkit](http://www.positivepsychology.com/toolkit) Pennock & Alberts
- Sfwork: The Centre for Solutions Focus at Work. www.sfwork.com