

# Michigan Child and Adolescent Needs and Strengths Tool MichiCANS

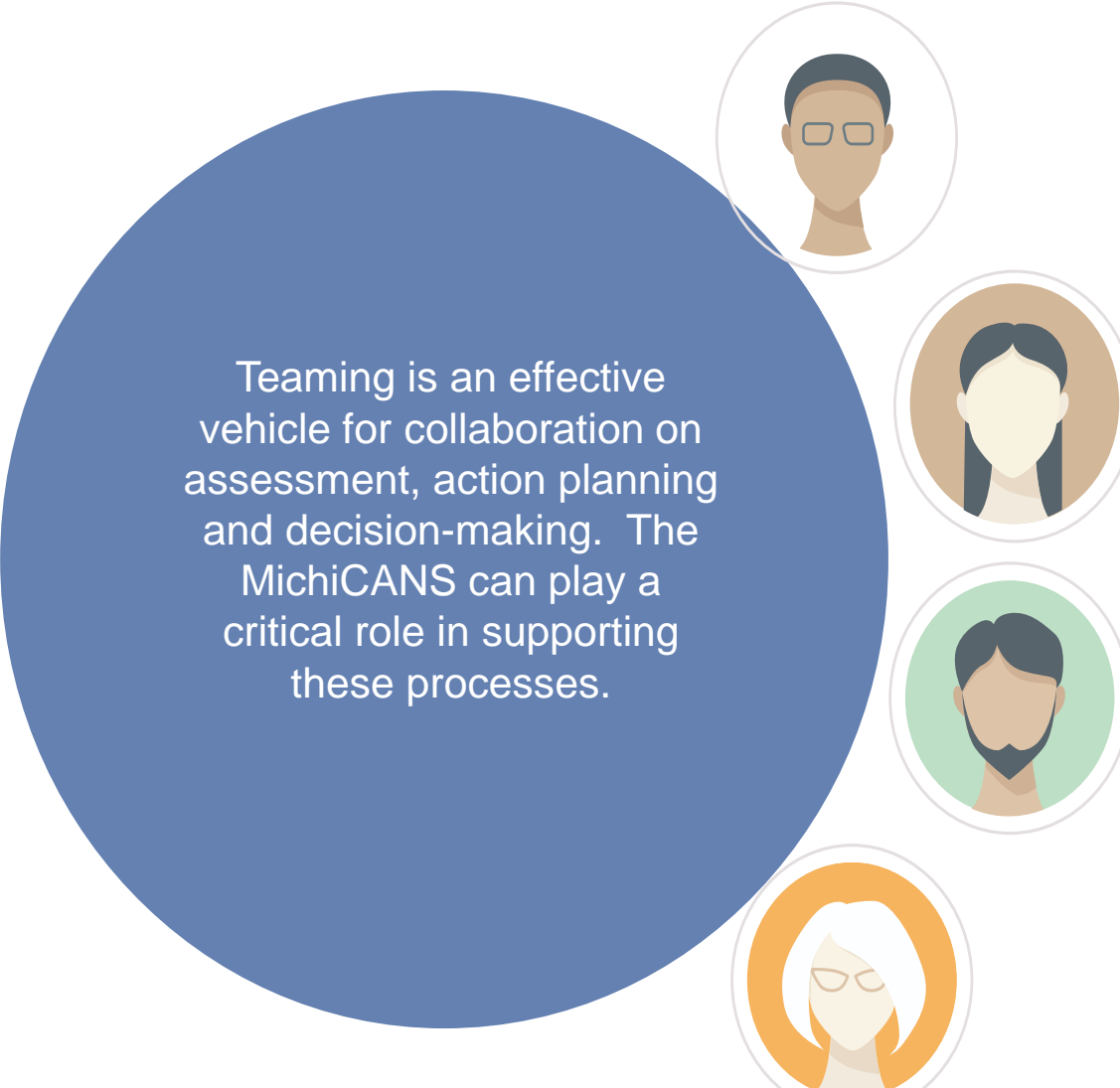


## Mission:

The Michigan Department of Health and Human Services (MDHHS) provides opportunities, services, and programs that promote a healthy, safe, and stable environment for residents to be self sufficient.

# What is the Child and Adolescent Needs and Strengths (CANS)?

- The CANS is a multipurpose information integration tool designed to summarize information gathered from multiple sources and assessments.
- This tool is used to support *Family Driven, Youth Guided* care planning and level of care decisions, facilitate quality improvement initiatives, and monitor outcomes of services.
- The CANS is customizable and the version of the tool that Michigan will use is called the MichiCANS.



Teaming is an effective vehicle for collaboration on assessment, action planning and decision-making. The MichiCANS can play a critical role in supporting these processes.

## **Summarizes the Assessment Process**

The MichiCANS is intended to be the process by which the assessment information is organized, summarized, used and communicated once it has been collected.

## **Integrates the Family's Story**

The MichiCANS provides a summary of the youth and family's story, and it should be completed as an integration of multiple story tellers.

## **A Shared Vision for Coordinating Care**

The MichiCANS allows for a consensus-based process of determining action levels on items and prioritizing relevant needs and strengths from which a coordinated plan is developed.

## **Supports Change Management**

Mapping the information from the MichiCANS to the plan facilitates outcomes monitoring and management by all members of the team including the youth and family, allowing for plan adjustment, acknowledgement of accomplishments, and celebrating goals that have been met.

# Who is the MichiCANS for and is it required to be completed to access services?



- The MichiCANS screener will be the required tool at the point of access for all infants, toddlers, children, youth, and young adults ages birth through 20 (until the day prior to 21). Information gathered from the MichiCANS screener will provide a recommendation related to potential eligibility for services, help guide initial determination of needs and strengths, and provide information for appropriate referrals for behavioral health services.
- At intake, the MichiCANS comprehensive will be used with all infants, toddlers, young children, youth, and young adults ages birth through 20.
  - DECA will also be used with infants, toddlers and young children ages birth to 6 with SED or SED/IDD
- The MichiCANS comprehensive will help to identify areas of need for each child, youth and young adults' planning process.
- The MichiCANS will be updated annually and when there is a significant change in life circumstances and/or a behavioral health event.
- The MichiCANS may identify the need for additional assessments.

# MichiCANS



- Considerations for infants, toddlers, children, youth and young adults with Serious Emotional Disturbances and Intellectual/Developmental Disabilities.
- Will be used to support the identification of functional limitation for both SED and IDD.
  - 1915i, SEDW, CWP
- Used up to age 21.
- Support cross system understanding for collaboration.
- Elevates strengths and needs for planning.
- May help with early identification of needs for youth and families and supports crisis prevention.

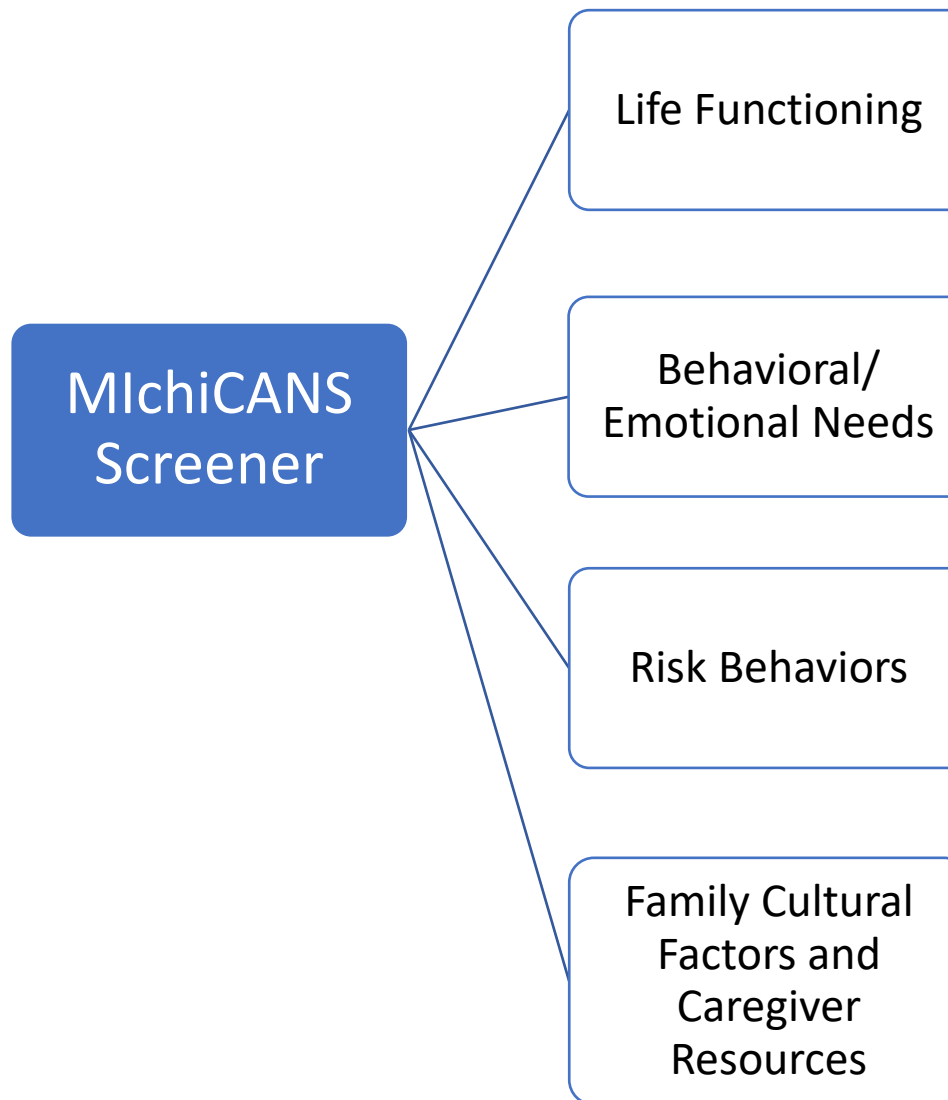
# Current Assessment Tools

- Child and Adolescent Functional Assessment Scale (CAFAS).
  - Phase out use of this tool by September 30, 2024.
- Preschool and Early Childhood Functional Assessment Scale (PECFAS).
  - Phase out use of this tool by September 30, 2024.
- Devereux Early Childhood Assessment (DECA).
  - Continue use of this tool up to age 6 with SED and SED/IDD infants, toddlers and young children.

# MichiCANS Screeners

The MichiCANS Screener will be used at Access Centers as a standard way to guide initial assessment and eligibility determination that guides the level of services children and families will receive, including external behavioral health referrals.

In the future, the MichiCANS Screener will be used by Mobile Intensive Crisis Stabilization Teams to promote access to CMHSP and identify immediate needs.





# Example of Screener

## Life Functioning Domain

**\*\*\*All MichiCANS items and Decision Support Models are still in DRAFT form\*\*\***

### MichiCANS Screener Child and Adolescent Needs and Strengths (Birth through Age 20)

Date: <input type="text"/>		Assessor: <input type="text"/>		Program: <input type="text"/>	
Client Name: <input type="text"/>			Client ID: <input type="text"/>		DOB: <input type="text"/>
Gender: <input type="text"/>	Ethnicity: <input type="text"/>		Grade: <input type="text"/>	Zip Code: <input type="text"/>	

For the **Needs Domains**, use the following categories and action levels:

- 0 – No current need; no need for action or intervention.
- 1 – Identified need that requires monitoring, watchful waiting, or preventive action based on history, suspicion or disagreement.
- 2 – Need is interfering with functioning. Action is required to ensure that the identified need is addressed.
- 3 – Need is dangerous or disabling; requires immediate and/or intensive action.

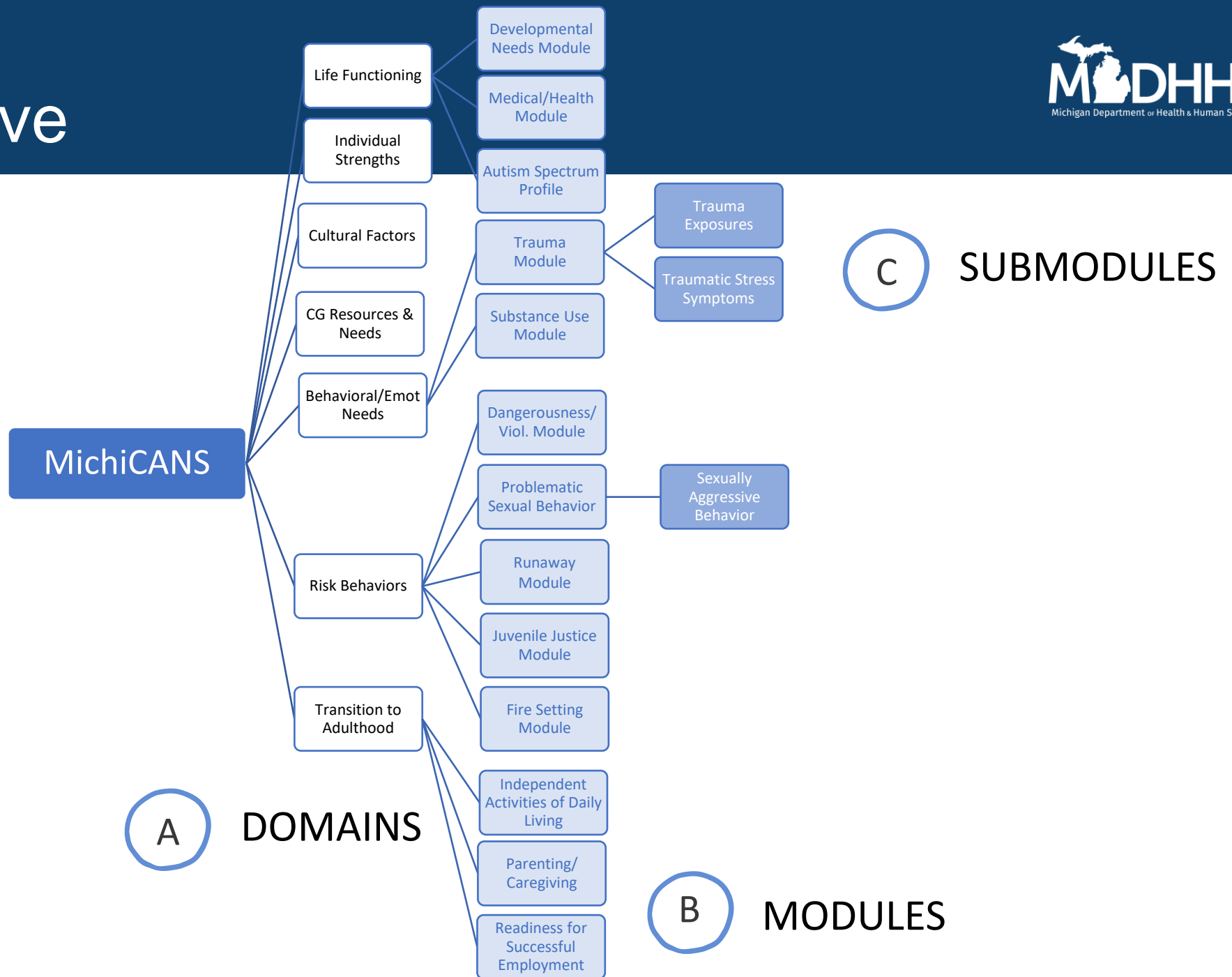
LIFE FUNCTIONING DOMAIN									
AGES 0-5					AGES 6+				
	0	1	2	3		0	1	2	3
Family Functioning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Motor (Fine/Gross)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Early Education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sensory Responsiveness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social and Emotional Functioning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Communication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Developmental/Intellectual	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Restricted Interests	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical/Physical	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Autism Spectrum*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family Functioning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical/Physical	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Living Situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sleep	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Functioning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	School	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Developmental/Intellectual	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Job Functioning (age 16+)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Autism Spectrum	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Decision Making	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Legal (age 11+)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Autism Spectrum*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

\*Flag for Autism Spectrum Disorder (ASD) = Autism Spectrum item rated '1', '2' or '3'.

Please write a rationale for any item rated actionable ('2' or '3').

# MichiCANS Comprehensive

The MichiCANS Comprehensive will be used by clinical and care coordination service providers to guide initial and ongoing treatment service planning.



**MichiCANS – Comprehensive DRAFT**  
**Child and Adolescent Needs and Strengths (Birth through Age 20)**

Date: <input type="text"/>	Type: <input type="checkbox"/> Initial <input type="checkbox"/> Scheduled Update <input type="checkbox"/> Major Life Event <input type="checkbox"/> Exit
Assessor ID: <input type="text"/>	Program: <input type="text"/>
Client Name: <input type="text"/>	Client ID: <input type="text"/> DOB: <input type="text"/>
Gender: <input type="text"/> Ethnicity: <input type="text"/>	Grade: <input type="text"/> Zip Code: <input type="text"/>

For the **Life Functioning Domain and associated modules**, use the following categories and action levels:  
 0 – No current need; no need for action or intervention.  
 1 – Identified need that requires monitoring, watchful waiting, or preventive action based on history, suspicion or disagreement.  
 2 – Action is required to ensure that the identified need is addressed; need is interfering with functioning.  
 3 – Need is dangerous or disabling; requires immediate and/or intensive action.

LIFE FUNCTIONING DOMAIN		0	1	2	3		0	1	2	3
<b>AGES 0-5</b>										
Family Functioning		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Developmental/Intellectual [A]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social and Emotional Functioning		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical/Physical [B]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Early Education		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Autism Spectrum [C]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>AGES 6+</b>										
Family Functioning		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	School Attendance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Living Situation		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	School Behavior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Functioning		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	School Achievement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recreational		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Decision Making	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Legal (age 11+)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Developmental/Intellectual [A]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sexual Development		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical/Physical [B]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sleep		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Autism Spectrum [C]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

A. DEVELOPMENTAL NEEDS MODULE – ALL AGES (Complete when the Developmental/Intellectual item is rated '1', '2' or '3'.)		0	1	2	3		0	1	2	3
<b>ITEMS</b>										
Cognitive		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Communication (Expressive/Receptive)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Developmental		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Self-Care/Daily Living Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

B. MEDICAL HEALTH MODULE – ALL AGES (Complete when the Medical/Physical item is rated '1', '2' or '3'.)		0	1	2	3		0	1	2	3
<b>ITEMS</b>										
Organizational Complexity		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Diagnostic Complexity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medication Management		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Impairment in Functioning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intensity of Treatment		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Child/Youth's Emotional Response	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chronicity		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Family Stress	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Life Threatening		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					

C. AUTISM SPECTRUM PROFILE MODULE – ALL AGES (Complete when the Autism Spectrum item is rated '1', '2' or '3'.)		0	1	2	3		0	1	2	3
<b>Functioning</b>										
Temperament/Emotional Responsiv.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Communication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parent/Child Interaction		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Augmented Communication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adaptation to Change		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Receptive Communication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transitions		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Expressive Language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Autonomy		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Speech-Sound Production	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sensory/Motor Functioning		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Social/Pragmatic Use of Language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gross Motor		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Stereotyped Sound Output	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fine Motor		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gestures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Coordination		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Maladaptive Behaviors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vision and Hearing		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Repetitive Behaviors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sensory Responsiveness		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Restricted Interests	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						Flight Risk/Bolting (age 6+)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Example of Comprehensive

Life Functioning Domain and Associated Modules

\*\*\*All MichiCANS items and Decision Support Models are still in DRAFT form\*\*\*

# MichiCANS

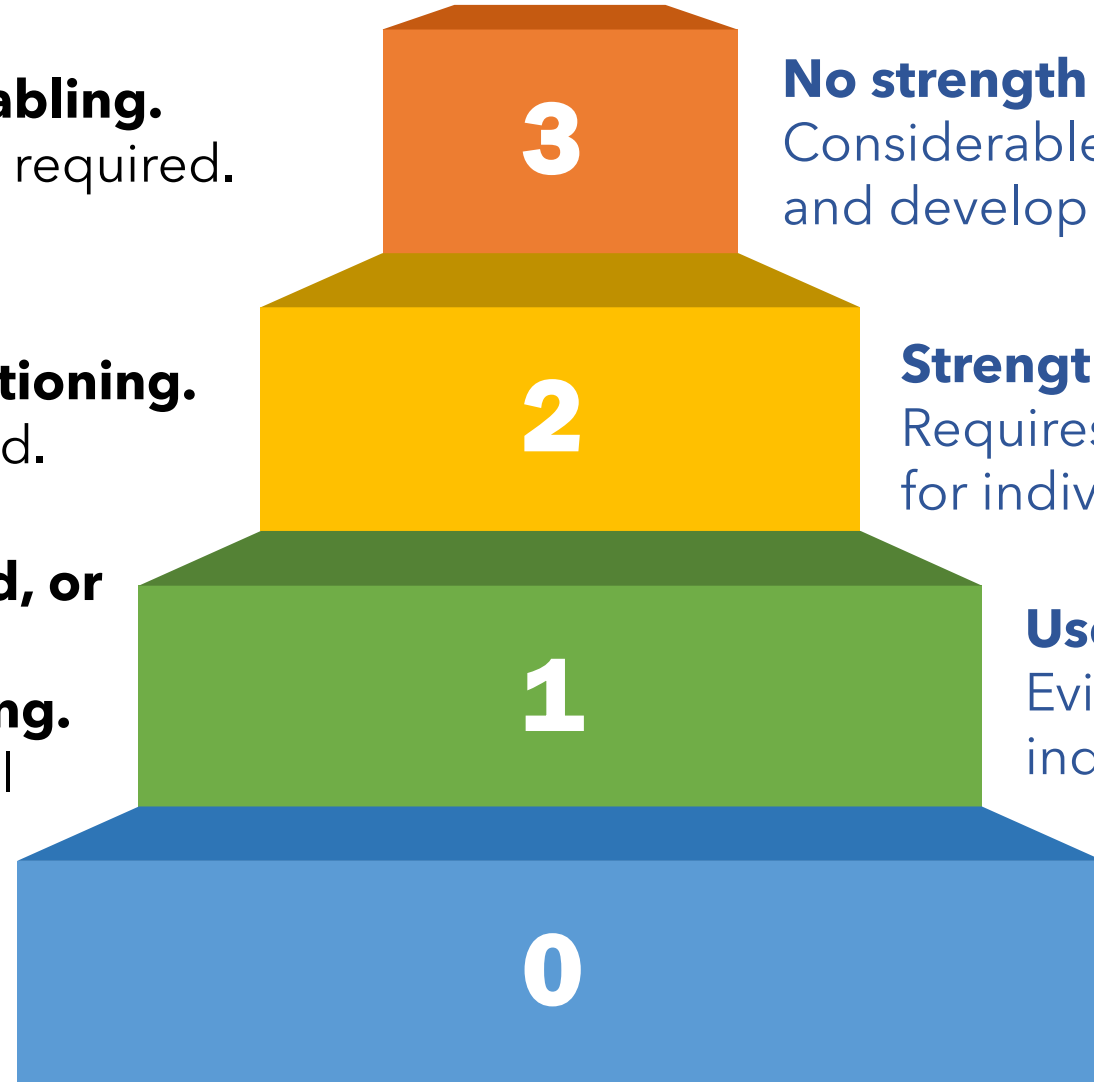
## Status and Impact – Action Levels

**Need is dangerous or disabling.**  
Immediate/intensive action required.

**Need interferes with functioning.**  
Action/intervention required.

**Significant history of need, or possible need that is not interfering with functioning.**  
Watchful waiting, additional assessment.

**No evidence of need.**  
No need for action.



**No strength identified.**  
Considerable effort or building to create and develop strength.

**Strength identified.**  
Requires building in order to be useful for individual or planning.

**Useful strength.**  
Evident and can be accessed by individual; useful for planning.

**Well developed centerpiece strength.** Easily accessible by individual; essential for planning.

# What is a Decision Support Model?



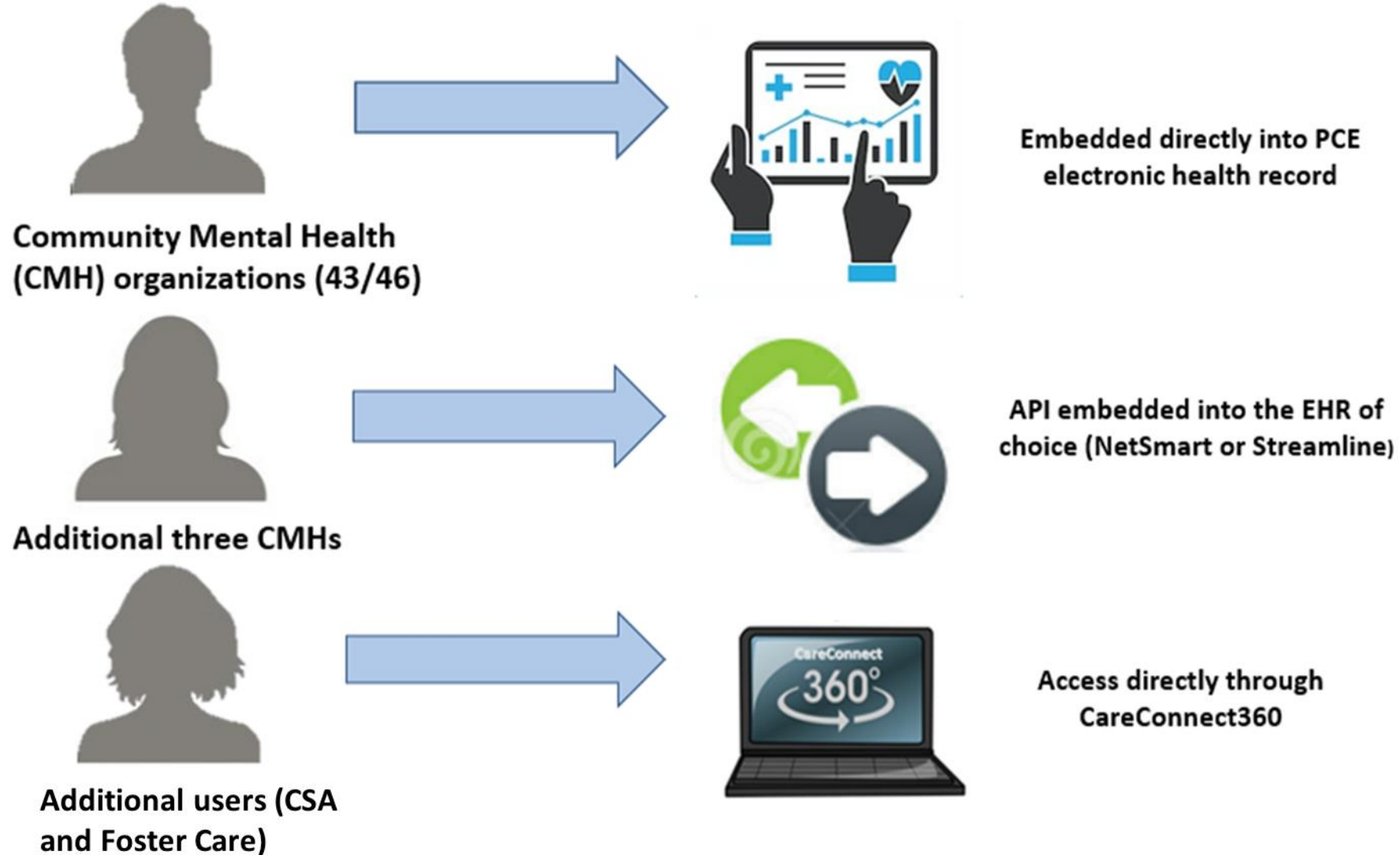
- A Decision Support Model is a model that runs in the background of your Electronic Health Record and they are used to support clinicians in making decisions related levels of need and services.
- These help to ensure the same models are being used throughout the state and help to support data driven decisions.

# MichiCANS – Decision Support Models



- Screener
  - Emergency.
  - Severe.
  - Mild/Moderate.
- Comprehensive
  - Michigan Intensive Child and Adolescent Service (MICAS).
    - Intensive Crisis Stabilization, Home-based Services, Wraparound, Respite Care, Parent Support Partner, Youth Peer Support.
  - Waivers
    - Serious Emotional Disturbance Waiver and CWP

# MichiCANS IT Implementation Plan



# MichiCANS Soft Launch



- The soft launch
  - MDHHS pilot with a small group of CMHSP/PIHPs
    - January – March 2024
  - CSA pilot with 11 counties in which the MichiCANS Screener will be completed with children entering foster care
    - April – June 2024
- Statewide rollout to begin October 1, 2024.



# Soft Launch Data being Collected

What are we looking for during the Soft Launch?



Use of the Tool

How many Screeners or Comprehensives were completed? How long did it take?



Use of Decision Support Model (DSM)

What were the impacts of the MichiCANS Screener and MichiCANS Comprehensive DSMs?



Administrative Burden and Administrative Enhancements

How did your agency make decisions about soft launch implementation and what have we learned from the soft launch?



Electronic Record Implications

What oversight was involved in the changes or enhancements made to your EHR for MichiCANS soft launch?



Clinical Implications

How has the soft launch of the MichiCANS affected your clinical workflows and processes?



Populations Concerns

How have various populations we serve and/or the workflows used to serve various populations been affected by the soft launch of the MichiCANS?



Billing Concerns

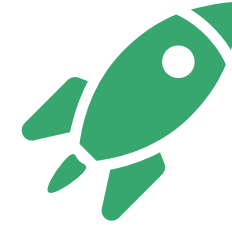
How has soft launch of the MichiCANS affected billing processes and reporting?



Data

How is data from the MichiCANS screener and comprehensive tools being used to make data driven decisions and support continuous quality improvement efforts at a local level?

# MichiCANS Timeline



## January – March 2024

## April – September 2024

## October 2024

Soft launch sites complete the MichiCANS Screener and Comprehensive for all seeking services birth to 21.

Training for those not in soft launch.

Statewide launch and go-live of MichiCANS for all PIHPs and CMHSPs.

Those in soft launch continue with use of tool and learning communities.

Integration of the MichiCANS CC360 version will be fully implemented for CSA and any CMHSP not integrated with PCE.

Soft launch sites participate in structured meetings and learning communities provided by Praed Foundation.

Throughout this time, modify processes and procedures related to access and intake, decision support models, and platform based on input.

# MichiCANS Training- Clinical Staff



- **Clinical Staff**

- **Certification Training-** April through October 2024 and ongoing.
  - TCOM Orientation – 3.5 hours.
  - MichiCANS Overview – 3.5 hours.
    - Upon completion of certification training, individuals must complete a certification exam and receive a .70 or better to be considered a certified user of the tool.
    - Annual re-certification required.
- **Action Planning-** 3 hours.

# MichiCANS Training- Clinical Supervisors



- **Clinical Supervisors**

- **Certification Training**- April through October 2024 and ongoing.
  - TCOM Orientation – 3.5 hours.
  - MichiCANS Overview – 3.5 hours.
    - Upon completion of certification training, individuals must complete a certification exam and receive a .70 or better to be considered a certified user of the tool.
    - Annual re-certification required.
- **Action Planning**- 3 hours.
- **Supervisor Training**- 3 hours.
- **Supervisor Community of Practice**- 1.5 hours.

# MichiCANS Training- Leadership



- **Agency Leadership**

- **Leadership Training- 2 hours.**

- Optional for those who wish to have operational knowledge of the tool.
    - Does not result in certification.

# More Information

- More information related to the original CANS instrument and its development can be located at:
  - <https://praedfoundation.org/>
  - [www.iph.uky.edu](http://www.iph.uky.edu)
- More information about the MichiCANS is available at:
  - <https://www.michigan.gov/mdhhs/keep-mi-healthy/mentalhealth/mentalhealth/childrenandfamilies>
- Any questions or inquiries about MichiCANS or the Soft Launch can be directed to:
  - [MDHHS-MichiCANS@michigan.gov](mailto:MDHHS-MichiCANS@michigan.gov)

# MichiCANS



**The MichiCANS Team greatly appreciates your dedication in making the MICHICANS implementation successful.**

# MichiCANS Contacts



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## **MichiCANS General Inquiry Mailbox**

[MDHHS-MichiCANS@michigan.gov](mailto:MDHHS-MichiCANS@michigan.gov)

## **MichiCANS Website**

[Michigan Child and Adolescent Needs and  
Strengths - MichiCANS](#)