



FAIRFAX COUNTY DEPARTMENT OF
FAMILY SERVICES

Does Your CANS Communicate the Story?

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Raise Your Hand



- Case Manager
- Family Member
- Provider
- CSA Employee
- County Agency Employee
- CSA Supporter

Raise Your Hand



- Who has completed a CANS . . .
 - Ever
 - In the last 6 months
 - In the last 90 days
 - In the last 30 days

The CANS Is . . .



An indicator of strengths and needs



A way to demonstrate the relationship between those strengths and needs *and* the services requested

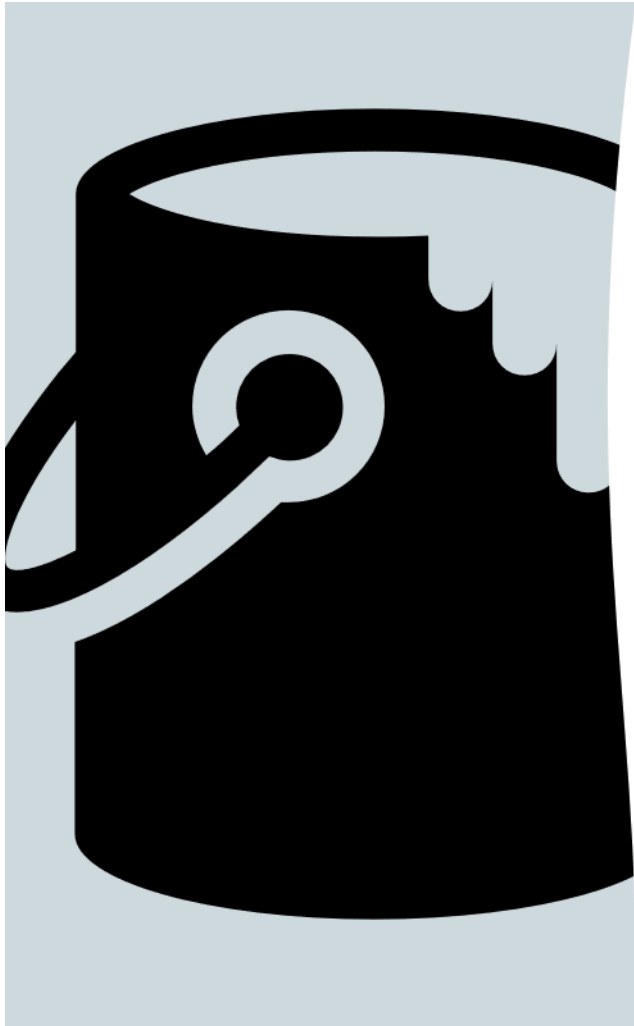


A driver of service planning, rather than allowing service planning to drive the CANS



A tool that should be completed collaboratively

The CANS Is Not . . .



A box to be checked to obtain services



Used as progress monitor



An event

You Tell Us!



When using the CANS to tell the family's story:

What are some of your challenges?

Where do you struggle with rating?

Are you able to use the CANS to direct your treatment planning?

Considerations



Developmental Stages

- Tantrums at age 5 vs age 15?

Neurodevelopment

- Tantrums at age 15 for a youth with ASD?

Cultural Factors!!

- Family systems and communication styles
- Immigration
- Acculturation

Similar but Different



Sexualized Behaviors

- Sexual Development (Life Domain Functioning) – child is experiencing gender identity issues
- Sexually Aggressive (Child Risk Behaviors) – use of force or threat/power differential
- Sexually Reactive Behavior (Child Risk Behaviors) – learned sexual behavior from exposure before child is developmentally “ready”

Conduct Disorder vs. Delinquency

Self-mutilation vs. Other Self Harm

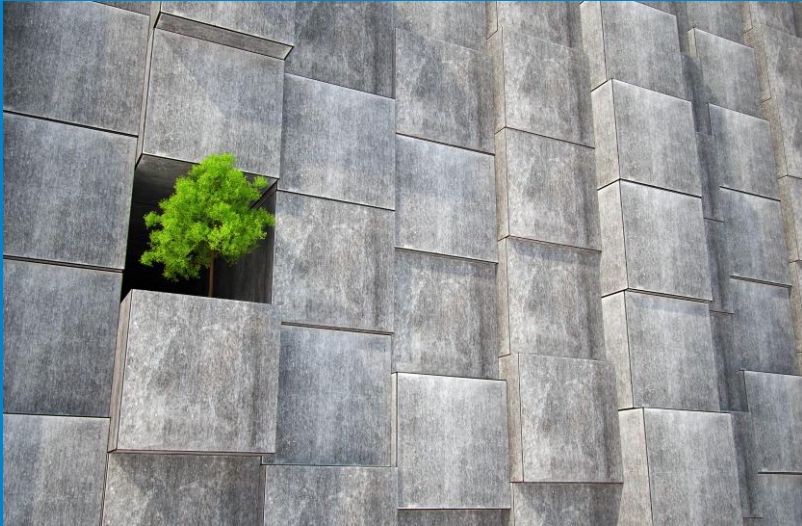
Intersectionality



When a single behavior has many ratings

- Impulsivity
- Substance use
- Runaway
- Sexually Reactive Behavior

A Strengths-based Conclusion



Build on identified, relevant strengths!

- Strengths are not the opposite of needs
- Increasing/building strengths leads to better functioning
- Identifying areas where strengths can be built is a vital element in your case planning

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