**DEPARTMENT OF CHILDREN AND FAMILIES**

**Division of Safety and Permanence**

**CHILD AND ADOLESCENT NEEDS AND STRENGTHS (CANS) RESULTS 5-21**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name - Child / Youth | | | | | DOB | | | Court File Number | |
|  | | | | |  | | |  | |
| Effective Date | Age at Time of Assessment | Assessment Type | | | Name - Current Caregiver | | | | |
|  |  |  | | |  | | | | |
| **Child / Provider Match** | | | | | | | | | | |
| Child’s Assessed Level of Need (LON): | | | | | Provider’s Level of Care (LOC): | | | | | |
|  | | | | | | | | | | |
|  | | | | | | | | | | |
| **Mental Health Screen** | | | | | | | | | | |
|  | | | | | | | | | | |
| **Child / Youth Results** | | | | | | | | | | |
| **Module** | | | | **Score** | | | | | | |
| Trauma | | | | of | | | | | | |
| Sexual Abuse | | | | of | | | | | | |
| Life Functioning | | | | of | | | | | | |
| Developmental | | | | of | | | | | | |
| Medical | | | | of | | | | | | |
| Legal | | | | of | | | | | | |
| School | | | | of | | | | | | |
| Child and Family Cultural Factors | | | | of | | | | | | |
| Child / Youth Behavioral / Emotional Needs | | | | of | | | | | | |
| Child / Youth Risk Behaviors | | | | of | | | | | | |
| Runaway | | | | of | | | | | | |
| Child / Youth Strengths | | | | of | | | | | | |
| TOTAL SCORE | | | | of | | | | | | |
| **Current Caregiver Results** | | | | | | | | | | |
| **Name** | | | | **Score** | | | **Level of Care** | | | |
|  | | | | of | | |  | | | |
| **Identified Permanent Resource Results** | | | | | | | | | | |
| **Name** | | | | **Type** | | | | **Score** | | **Level of Care** |

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**CHILD AND ADOLESCENT NEEDS AND STRENGTHS (CANS)**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name - Child / Youth | | | | DOB | | | Court File Number | | | |
|  | | | |  | | |  | | | |
| Effective Date | | Age at Time of Assessment | Assessment Type | Name - Current Caregiver | | | | | | |
|  | |  |  |  | | | | | | |
| **Signatures** | | | | | | | | | | | |
|  | | | | | | | | | | |
|  |  | | | |  |  | |  | | |
|  | **SIGNATURE** – Child / Youth | | | |  | Date Signed | |  | | |
|  |  | | | |  |  | |  | | |
|  |  |  | | |
|  | **SIGNATURE** – Parent / Legal Guardian | | | |  | Date Signed | |  | | |
|  | | | | | | | | | | |
|  |  | | | |  |  | | |  |  |
|  | **SIGNATURE** – Parent / Legal Guardian | | | |  | Date Signed | | |  |  |
|  | | | | | | | | | | |
|  |  | | | |  |  | | |  |  |
|  | **SIGNATURE** – Current Caregiver | | | |  | Date Signed | | |  |  |
|  | | | | | | | | | | |
|  |  | | | |  |  | | | | |
|  | Name – Worker | | | |  |  | | | | |
|  | | | | | | | | | | |
|  |  | | | |  |  | | |  |  |
|  | **SIGNATURE** – Worker | | | |  | Date Signed | | |  |  |
|  | | | | | | | | | | |
|  |  | | | |  |  | | | | |
|  | Name – Supervisor | | | |  |  | | | | |
|  | | | | | | | | | | |
|  |  | | | |  |  | | |  |  |
|  | **SIGNATURE** – Supervisor | | | |  | Date Signed | | |  |  |

**ACTIONABLE ITEMS FOR CHILD / YOUTH**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name - Child / Youth | | | | | DOB | Court File Number |
|  | | | | |  |  |
| Effective Date | | Age at Time of Assessment | Assessment Type | | Name - Current Caregiver | |
|  | |  |  | |  | |
| **Immediate / Intensive Action Needed (3s)** | | | | | | |
|  | **Item and Module** | | | **Actions to be Taken and by Whom** | | |

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| **Action Needed (2s)** | | |
|  | **Item and Module** | **Actions to be Taken and by Whom** |

START\_DYNAMIC\_TABLE=AIFC2

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| **Watchful Waiting / Prevention (1s)** | | |
|  | **Item and Module** | **Actions to be Taken and by Whom** |

START\_DYNAMIC\_TABLE=AIFC1

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END\_DYNAMIC\_TABLE=AIFC1

**ACTIONABLE ITEMS FOR CURRENT CAREGIVER**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name - Child / Youth | | | | | DOB | Court File Number |
|  | | | | |  |  |
| Effective Date | | Age at Time of Assessment | Assessment Type | | Name - Current Caregiver | |
|  | |  |  | |  | |
| **Immediate / Intensive Action Needed (3s)** | | | | | | |
|  | **Item and Module** | | | **Actions to be Taken and by Whom** | | |

START\_DYNAMIC\_TABLE=AIFCC3

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| **Action Needed (2s)** | | |
|  | **Item and Module** | **Actions to be Taken and by Whom** |

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**ACTIONABLE ITEMS FOR IDENTIFIED PERMANENT RESOURCE**

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| --- | --- | --- | --- | --- | --- | --- |
| Name - Child / Youth | | | | | DOB | Court File Number |
|  | | | | |  |  |
| Effective Date | | Age at Time of Assessment | Assessment Type | | Name - Current Caregiver | |
|  | |  |  | |  | |
| **Immediate / Intensive Action Needed (3s)** | | | | | | |
|  | **Item and Module** | | | **Actions to be Taken and by Whom** | | |

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| **Action Needed (2s)** | | |
|  | **Item and Module** | **Actions to be Taken and by Whom** |

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**CHILD AND ADOLESCENT NEEDS AND STRENGTHS (CANS)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name - Child / Youth | | | DOB | Court File Number |
|  | | |  |  |
| Effective Date | Age at Time of Assessment | Assessment Type | Name - Current Caregiver | |
|  |  |  |  | |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **TRAUMA** | **0** | **1** | **2** | **3** |  | **SCHOOL** | **0** | **1** | **2** | **3** |
| Sexual Abuse |  |  |  |  |  | Attendance |  |  |  |  |
| a. Emotional Closeness to Perpetrator |  |  |  |  |  | Behavior |  |  |  |  |
| b. Frequency of Abuse |  |  |  |  |  | Achievement |  |  |  |  |
| c. Duration |  |  |  |  |  | Relationships with Teachers |  |  |  |  |
| d. Physical Force |  |  |  |  |  |  |  |  |  |  |
| e. Reaction to Disclosure |  |  |  |  |  |  |  |  |  |  |
| f. Victim of Sex Trafficking |  |  |  |  |  |  |  |  |  |  |
| Physical Abuse |  |  |  |  |  | **CHILD AND FAMILY CULTURAL FACTORS** | **0** | **1** | **2** | **3** |
| Neglect |  |  |  |  |  | Language |  |  |  |  |
| Emotional Abuse |  |  |  |  |  | Cultural Identity |  |  |  |  |
| Medical Trauma |  |  |  |  |  | Traditions and Rituals |  |  |  |  |
| Natural or Manmade Disaster |  |  |  |  |  | Cultural Stress |  |  |  |  |
| Witness to Family Violence |  |  |  |  |  | Knowledge Congruence |  |  |  |  |
| Witness to Community Violence |  |  |  |  |  | Help Seeking Congruence |  |  |  |  |
| Witness / Victim to Criminal Activity |  |  |  |  |  | Expression of Distress |  |  |  |  |
| **ADJUSTMENT TO TRAUMA** | **0** | **1** | **2** | **3** |  |  |  |  |  |  |
| Adjustment to Trauma |  |  |  |  |  |  |  |  |  |  |
| Traumatic Grief / Separation |  |  |  |  |  |  |  |  |  |  |
| Intrusions |  |  |  |  |  | **CHILD BEHAVIORAL / EMOTIONAL NEEDS** | **0** | **1** | **2** | **3** |
| Attachment Difficulties |  |  |  |  |  | Psychosis |  |  |  |  |
| Dissociation |  |  |  |  |  | Impulsive / Hyperactive |  |  |  |  |
|  |  |  |  |  |  | Depression |  |  |  |  |
| **LIFE FUNCTIONING** | **0** | **1** | **2** | **3** |  | Anxiety |  |  |  |  |
| Family - Nuclear |  |  |  |  |  | Oppositional |  |  |  |  |
| Family - Extended |  |  |  |  |  | Conduct |  |  |  |  |
| Living Situation |  |  |  |  |  | Anger Control |  |  |  |  |
| Developmental |  |  |  |  |  | Substance Use |  |  |  |  |
| a. Cognitive |  |  |  |  |  | Somatization |  |  |  |  |
| b. Autism Spectrum |  |  |  |  |  | Behavioral Regression |  |  |  |  |
| c. Communication |  |  |  |  |  | Affect Dysregulation |  |  |  |  |
| d. Self-Care Daily Living |  |  |  |  |  |  |  |  |  |  |
| Medical |  |  |  |  |  |  |  |  |  |  |
| a. Life Threat |  |  |  |  |  |  |  |  |  |  |
| b. Chronicity |  |  |  |  |  | **CHILD RISK BEHAVIORS** | **0** | **1** | **2** | **3** |
| c. Diagnostic Complexity |  |  |  |  |  | Suicide Risk |  |  |  |  |
| d. Emotional Response |  |  |  |  |  | Non-Suicidal Self-Injurious Behavior |  |  |  |  |
| e. Impairment in Functioning |  |  |  |  |  | Other Self Harm |  |  |  |  |
| f. Treatment Involvement |  |  |  |  |  | Exploited |  |  |  |  |
| g. Intensity of Treatment |  |  |  |  |  | Danger to Others |  |  |  |  |
| h. Organizational Complexity |  |  |  |  |  | Sexual Aggression |  |  |  |  |
| Physical |  |  |  |  |  | Delinquent Behavior |  |  |  |  |
| Dental |  |  |  |  |  | Runaway |  |  |  |  |
| Daily Functioning |  |  |  |  |  | a. Frequency of Running |  |  |  |  |
| Social Functioning - Peer |  |  |  |  |  | b. Consistency of Destination |  |  |  |  |
| Social Functioning - Adult |  |  |  |  |  | c. Safety of Destination |  |  |  |  |
| Legal |  |  |  |  |  | d. Involvement in Illegal Activities |  |  |  |  |
| a. Seriousness |  |  |  |  |  | e. Likelihood of Return on Own |  |  |  |  |
| b. History |  |  |  |  |  | f. Involvement with Others |  |  |  |  |
| c. Arrests |  |  |  |  |  | g. Realistic Expectations |  |  |  |  |
| d. Planning |  |  |  |  |  | Intentional Misbehavior |  |  |  |  |
| e. Community Safety |  |  |  |  |  | Fire Setting |  |  |  |  |
| f. Legal Compliance |  |  |  |  |  | Bullying |  |  |  |  |
| g. Peer Influences |  |  |  |  |  |  |  |  |  |  |
| h. Parental Criminal Behavior (Influences) |  |  |  |  |  |  |  |  |  |  |
| i. Environmental Influences |  |  |  |  |  |  |  |  |  |  |
| Eating Disturbance |  |  |  |  |  |  |  |  |  |  |
| Sleep |  |  |  |  |  |  |  |  |  |  |
| Sexual Development |  |  |  |  |  |  |  |  |  |  |
| Life Skills |  |  |  |  |  |  |  |  |  |  |
| Expectant Parent or Parenting |  |  |  |  |  |  |  |  |  |  |

**CHILD AND ADOLESCENT NEEDS AND STRENGTHS (CANS)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name - Child / Youth | | | DOB | Court File Number |
|  | | |  |  |
| Effective Date | Age at Time of Assessment | Assessment Type | Name - Current Caregiver | |
|  |  |  |  | |

|  |  |  |  |  |  |  |  |  |
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| **CHILD STRENGTHS** | **0** | | **1** | | **2** | | **3** | |
| Relationship Permanence |  | |  | |  | |  | |
| Family - Nuclear |  | |  | |  | |  | |
| Family - Extended |  | |  | |  | |  | |
| Positive Peer Relations |  | |  | |  | |  | |
| Optimism |  | |  | |  | |  | |
| Decision-Making |  | |  | |  | |  | |
| Well-Being |  | |  | |  | |  | |
| Educational |  | |  | |  | |  | |
| Recreational |  | |  | |  | |  | |
| Vocational |  | |  | |  | |  | |
| Talents / Interests |  | |  | |  | |  | |
| Spiritual / Religious |  | |  | |  | |  | |
| Community Life |  | |  | |  | |  | |
| Youth Involvement With Care |  | |  | |  | |  | |
| Natural Supports |  | |  | |  | |  | |
| Resiliency |  | |  | |  | |  | |
| Resourcefulness |  | |  | |  | |  | |
|  |  | |  | |  | |  | |
| **CURRENT CAREGIVER** | **0** | **1** | | **2** | | **3** | |
| Supervision |  |  | |  | |  | |
| Problem Solving |  |  | |  | |  | |
| Involvement with Care |  |  | |  | |  | |
| Knowledge |  |  | |  | |  | |
| Empathy with Child |  |  | |  | |  | |
| Organization |  |  | |  | |  | |
| Social Resources |  |  | |  | |  | |
| Physical Health |  |  | |  | |  | |
| Mental Health |  |  | |  | |  | |
| Substance Use |  |  | |  | |  | |
| Developmental |  |  | |  | |  | |
| Family Stress |  |  | |  | |  | |
| Cultural Congruence |  |  | |  | |  | |

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| **IDENTIFIED PERMANENT RESOURCE STRENGTHS AND NEEDS** | **0** | **1** | **2** | **3** |
| : |  |  |  |  |
| Residential Stability |  |  |  |  |
| Self-Care / Daily Living |  |  |  |  |
| Accessibility to Child Care Services |  |  |  |  |
| Cultural Stress |  |  |  |  |
| Employment / Educational Functioning |  |  |  |  |
| Educational Attainment |  |  |  |  |
| Financial Resources |  |  |  |  |
| Community Connection |  |  |  |  |
| Legal |  |  |  |  |
| Transportation |  |  |  |  |
| Supervision |  |  |  |  |
| Problem Solving |  |  |  |  |
| Involvement with Care |  |  |  |  |
| Knowledge |  |  |  |  |
| Empathy with Child |  |  |  |  |
| Organization |  |  |  |  |
| Social Resources |  |  |  |  |
| Physical Health |  |  |  |  |
| Mental Health |  |  |  |  |
| Substance Use |  |  |  |  |
| Developmental |  |  |  |  |
| Family Stress |  |  |  |  |
| Cultural Congruence |  |  |  |  |

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