Introduction to the CANS-NY for Managed Care: Webinar 1

TRANSFORMATIONAL OUTCOMES MANAGEMENT, THE CANS-NY AND THE HCBS LOC ELIGIBILITY ALGORITHMS

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Learning Objectives For Today's Webinar

1. Participants will understand the practice and measurement models that inform use of the CANS-NY in practice.

2. Participants will understand how to work with the action levels of the CANS-NY.

3. Participants will learn about the relation between the CANS-NY LOC Algorithm and the story of the youth and family.

4. Participants will understand how specific items on the CANS-NY relate to eligibility for HCBS Services.

What is the CANS-NY?

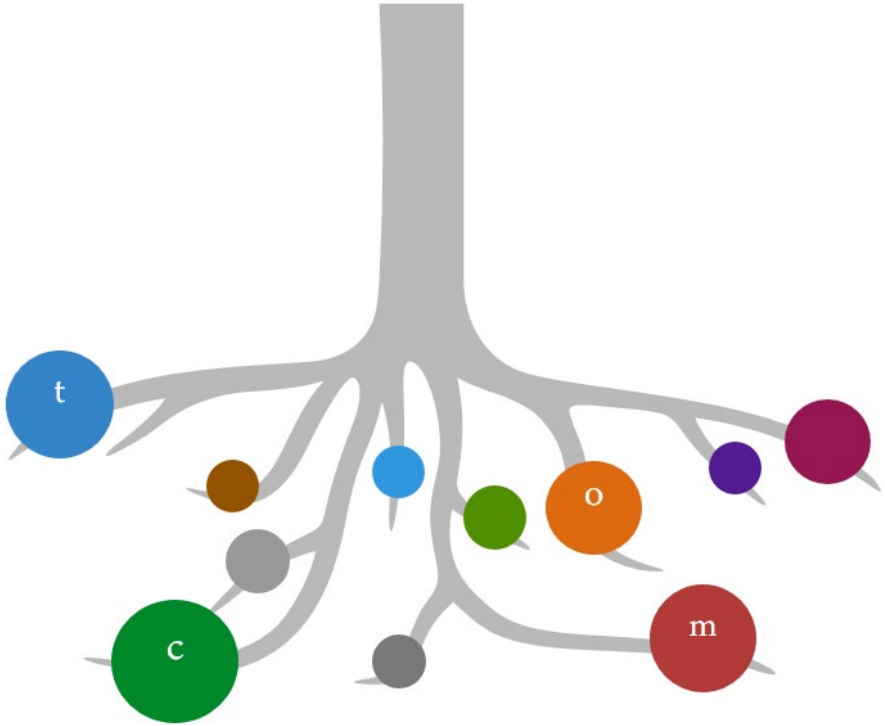
- It is an **information integration tool** used to identify the needs and strengths of children/youth and their families.
- Its underlying philosophy and approach is **person-centered**: continuously aligning the work of all persons with the identified strengths and needs of children and families at all levels of the system.
- It is a support for true collaborative practice at all levels of the system: Consensus ratings by multiple informants across the items of the CANS-NY help achieve a common understanding of presenting issues for care planning and progress monitoring. Consensus ratings also help direct resources and evaluate effectiveness at all levels of the human serving system.

CHAPIN HALL
AT THE UNIVERSITY OF CHICAGO

TCOM: Engineering Personal Change

Transformational Collaborative Outcomes Management

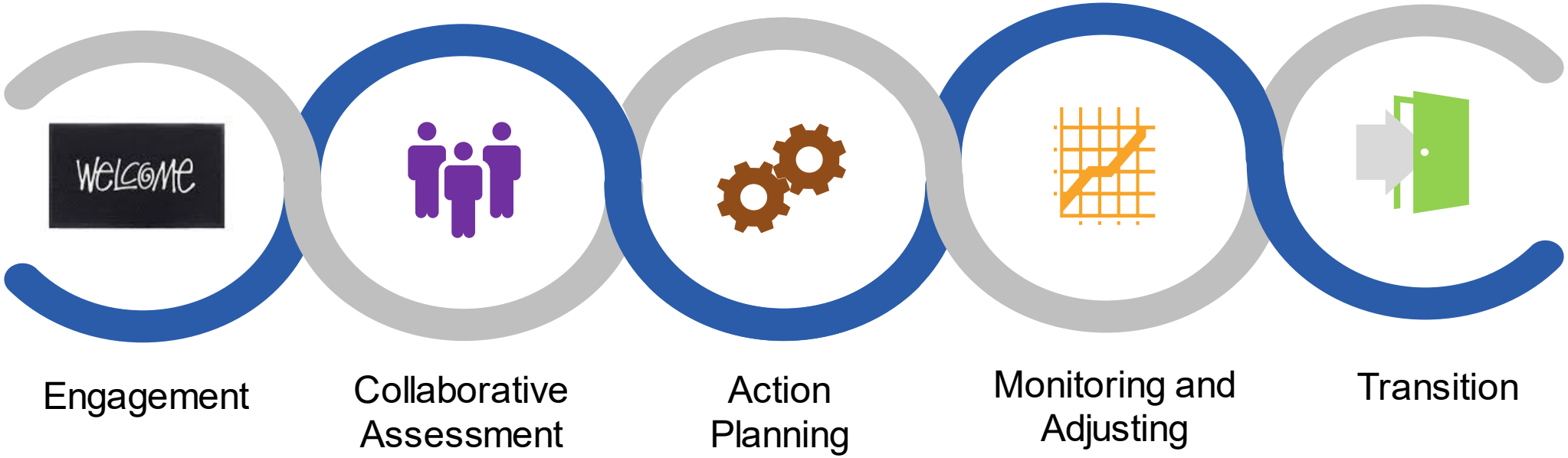
- **Transformational:** Our work is focused on personal change.
- **Collaborative:** We must develop a shared understanding and vision.
- **Outcomes:** What we measure is relevant to the decisions we make about the strategies and interventions we use.
- **Management:** Information gathered is used in all aspects of managing the system from planning for individuals and families, to supervision, and program/system operations.



The Goal of TCOM: Changing the Way We Work

- Experience and research has demonstrated that collaborative practices are at the heart of effective change.
- People vary tremendously in their use of collaborative, data-informed practices.
- TCOM provides a pathway by which people can get the formal feedback necessary to develop expertise.

TCOM: The Journey Through Care



Information from TCOM tools such as the CANS is designed to follow the course of the child/youth and family from system engagement to goal attainment and transition. Person-centered information is used to guide decision-making at every level of the system.

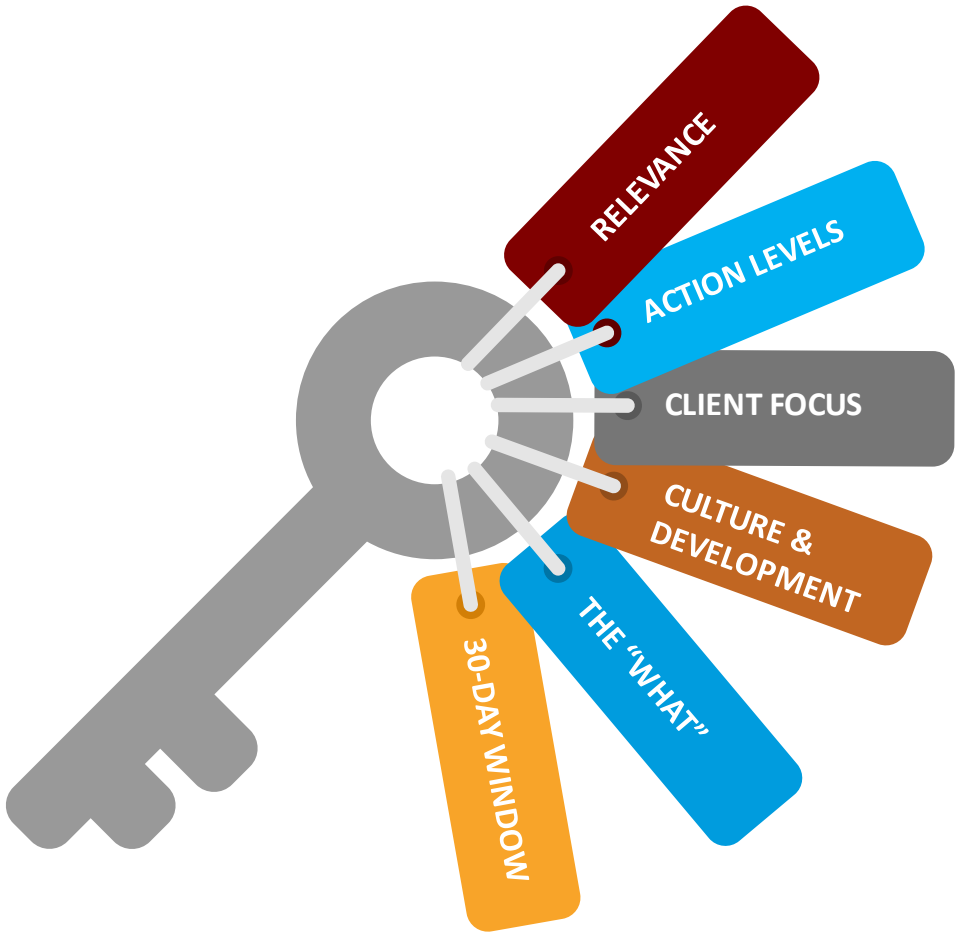
COMMUNIMETRICS

THE PRIMARY REASON TO MEASURE WITHIN THE ENTERPRISE IS TO COMMUNICATE TO SOMEONE ELSE EITHER ON BEHALF OF AN INDIVIDUAL SERVED OR FOR PROGRAM OR SYSTEM AGGREGATES (I.E., SUMMARIES OF INDIVIDUALS SERVED). THEREFORE, WHY NOT CREATE THE MEASUREMENT PROCESS TO OPTIMIZE THE COMMUNICATION UTILITY OF THE MEASURE? IN FACT, WHY NOT RE-CONCEPTUALIZE MEASUREMENT IN THESE SETTINGS ENTIRELY?

Communimetrics is designed to make thinking processes transparent and provide a conceptual organization or framework for the thinkers to be attuned to the relevant factors that must be thought through in any particular circumstance.

Lyons (2009)

6 Key Principles of a Communimetric Tool



01 Items are selected because they are relevant to service/case planning.

02 Each item uses a 4-item rating scale that translates into action.

03 Rating should describe child/youth, not the child/youth in services.

04 Consider culture and development before determining ratings.

05 The ratings are agnostic as to etiology; it's about the *What*, not the *Why.*

06 Use a 30-day window in considering what is relevant to children, youth and their families.

When Should You Override the 30-Day Window?

- Whenever the 30 days just prior to the assessment fail to capture the youth/caregiver needs and/or risk adequately.
- Examples might include: Multiple psychiatric admissions, a chronic diagnosis that requires ongoing attention, suicidality or violence.
- Watchful waiting is required for examples like these.
- More information is available in our downloadable tip sheet: https://cans2017.files.wordpress.com/2019/05/tip-sheet_30-day-window_final.pdf
- Remember that you can reach out for coaching if you have a question about a specific situation: https://cansnyinstitute.org/coaching/

Metrics in Action:

Communimetrics—Needs

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Metrics in Action:

Communimetrics—Strengths

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Relevant Item Grid

Useful Strengths	Strengths to Build
Strengths to Use (0's and 1's) • from Strength Domain for child/youth • from the Caregiver Resources & Needs Domain that constitute strengths for Caregiver(s)	Strengths to Build (2's and 3's) from Strength Domain for child/youth
Target Needs – Child/Youth	**Target Needs – Caregiver(s)**
2's and 3's from all Child Domains & Relevant Extension Modules	2's and 3's from Caregiver Resources & Needs Domain

HCBS Services & the CANS-NY LOC Algorithm

Improving Decision Support in the HHSC Transformation

“The right services, at the right time, in the right amount.”

The HCBS Algorithm is drawn from a subset of items on the CANS-NY.

The full CANS-NY tool represents a minimal understanding for building a good plan of care.

CFTSS (Child & Family Treatment & Support Services

- ✓ Services for any Medicaid eligible youth,
- ✓ NOT part of HH specifically,
- ✓ If CFTSS are adequate to meet needs, child should not be in HCBS waiver services,
- ✓ A child may receive HCBS Waiver Services (if eligible) and CFTSS/SPA services if services are not duplicative and meet specific needs.
- ✓ CFTSS services include psychotherapy, crisis intervention, community psychiatric supports, psychosocial rehabilitation, and family and youth peer support, advocacy, training.

Home & Community Based Services

- ✓Must have a physical health, developmental disability, or mental health diagnosis with related significant needs that place them at risk of hospitalization, institutionalization,
- ✓OR have a physical health, developmental disability, or mental health diagnosis with related significant needs that has resulted in restrictive placement and the need to return safely home;
- ✓AND must meet Level of Care (LOC) Determination based on HCBS LOC CANS-NY ALGORITHM.

HCBS Services Are More Extensive & More Intensive

- Community based skill building (habilitation)
- Agency based skill building (day habilitation)
- Prevocational support/supported employment
- Respite (planned or crisis)
- Family supports; self-advocacy supports
- Palliative care (diverse services)
- Non-medical transportation
- Environmental/vehicle modifications
- Adaptive/assistive equipment

CANS-NY LOC Algorithm

Decision Support for Care Algorithms: What Are They? What Are They For?

- An algorithm is a problem-solving rule that helps make decisions about care consistently.
- Algorithms allow the system to make *consistent and transparent* care decisions, based on the *current* intensity of needs, complexity of needs, and risks being experienced by a young person and caregiver.

TCOM Algorithms Are Unique

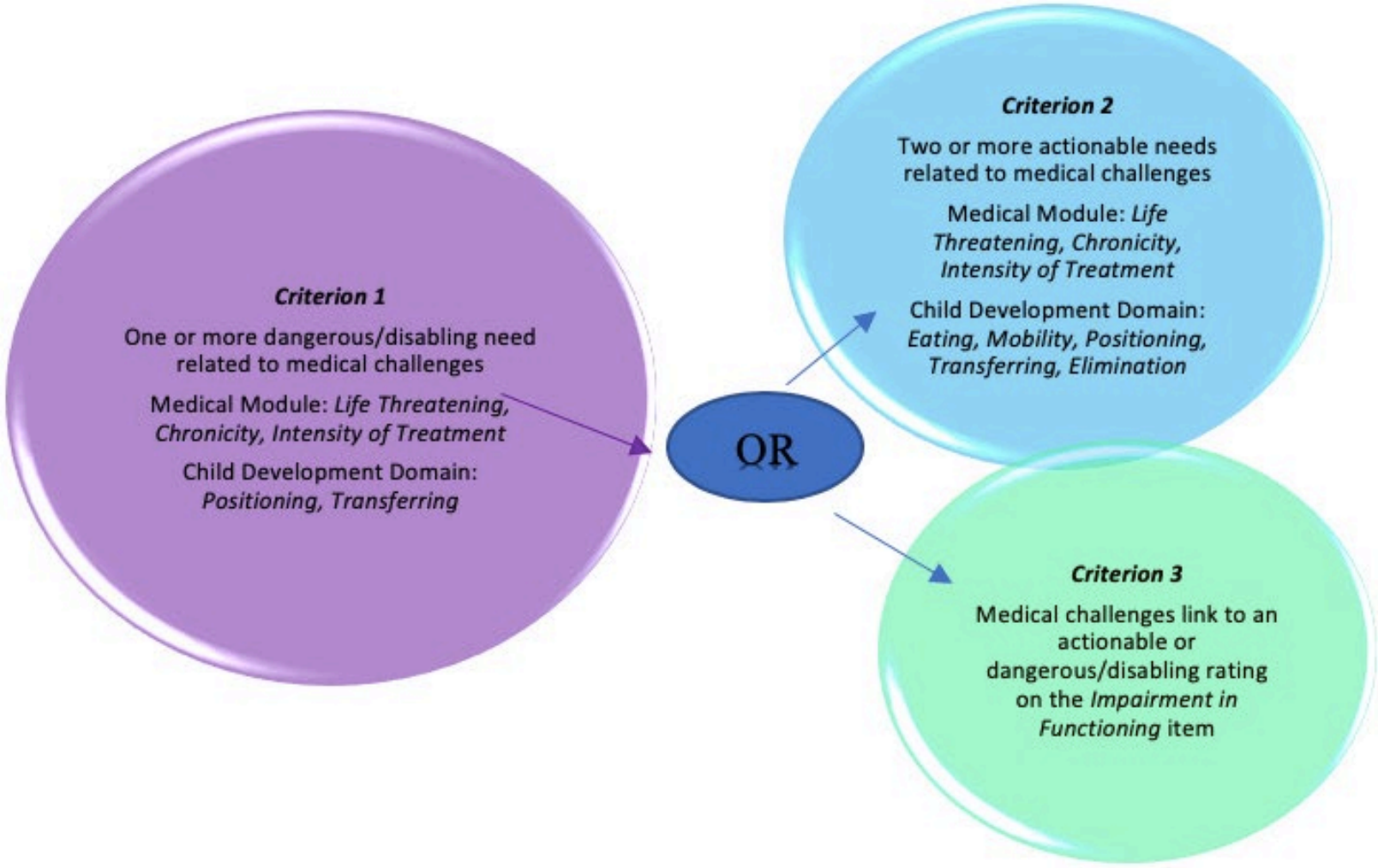
- Most existing measures use total scores with cut-offs for decision support. These approaches can be problematic because very small differences in a total score can lead to very different decisions.
- Because of the item level reliability and action level format, the CANS uses patterns of actionable need to general algorithms using branching logic.
- These algorithms are far more focused on functioning and therefore more defensible as they are easy to describe and the differences between youth at different levels are always meaningful.

The LOC Algorithm versus the entire completd CANS-NY

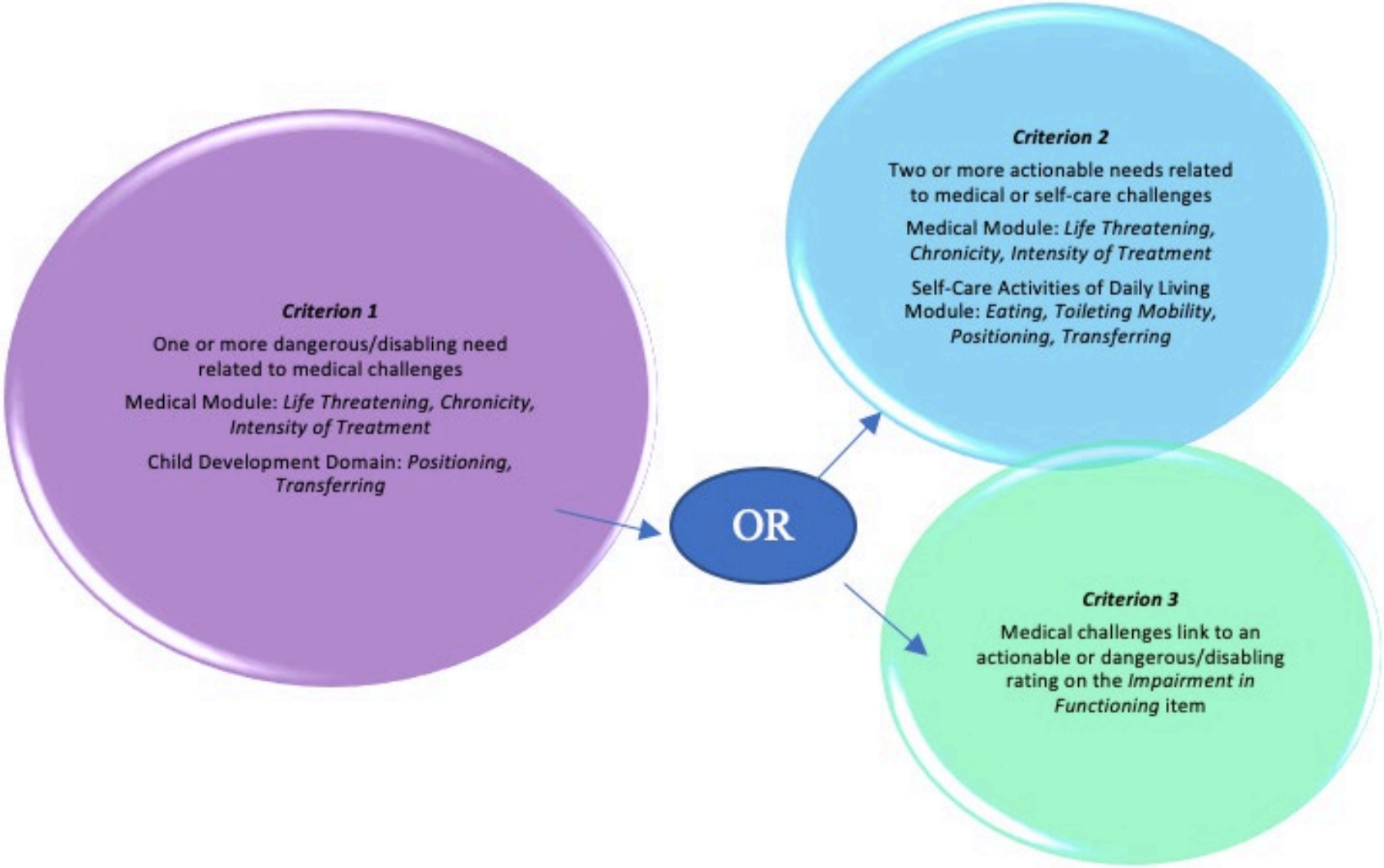
- The select items that feed into the HCBS LOC algorithms are those that tend to link to higher levels of placement risk and need.
- Just these select items determine the level of care eligibility.
- The entire, completed CANS-NY consists of *all* the actionable needs, not just those that feed into the LOC algorithm.
- The actionable needs of the entire, completed CANS-NY show us a minimal understanding to build a good plan of care.

LOC Medically Fragile Algorithm

HCBS LOC Eligibility Screen: Medically Fragile, 0 to 5

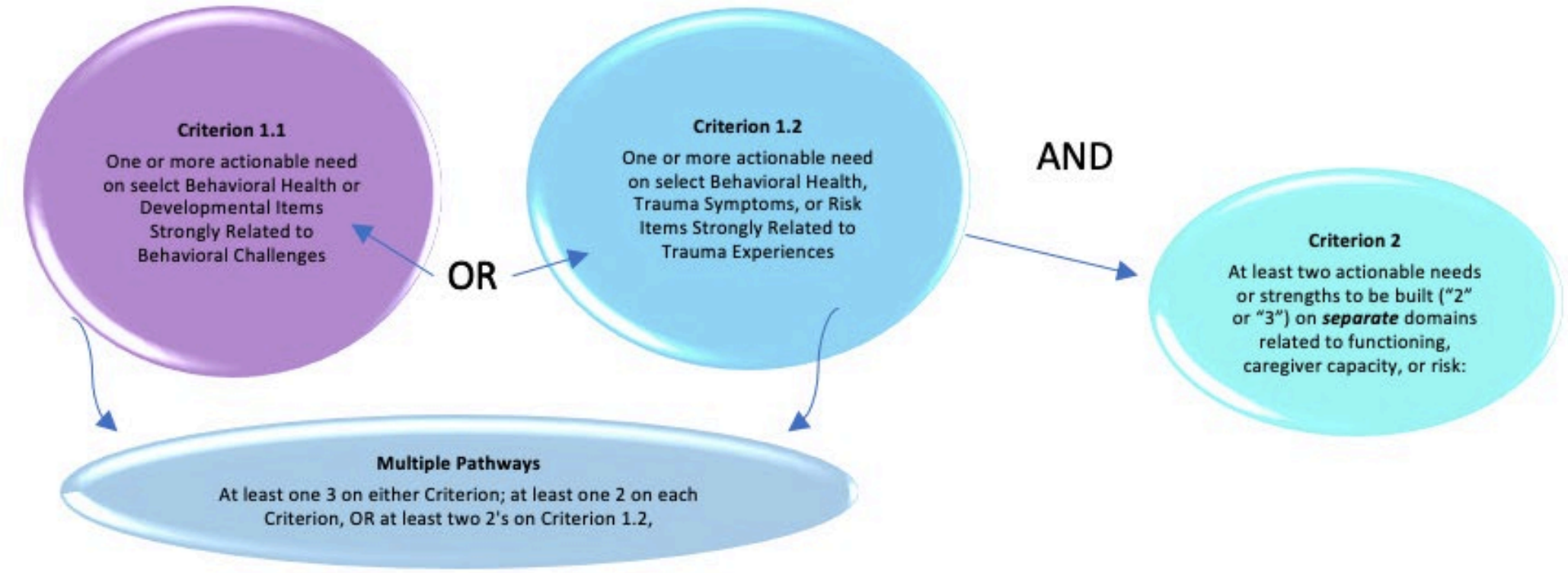


HCBS LOC Eligibility Screen: Medically Fragile, 6 to 21

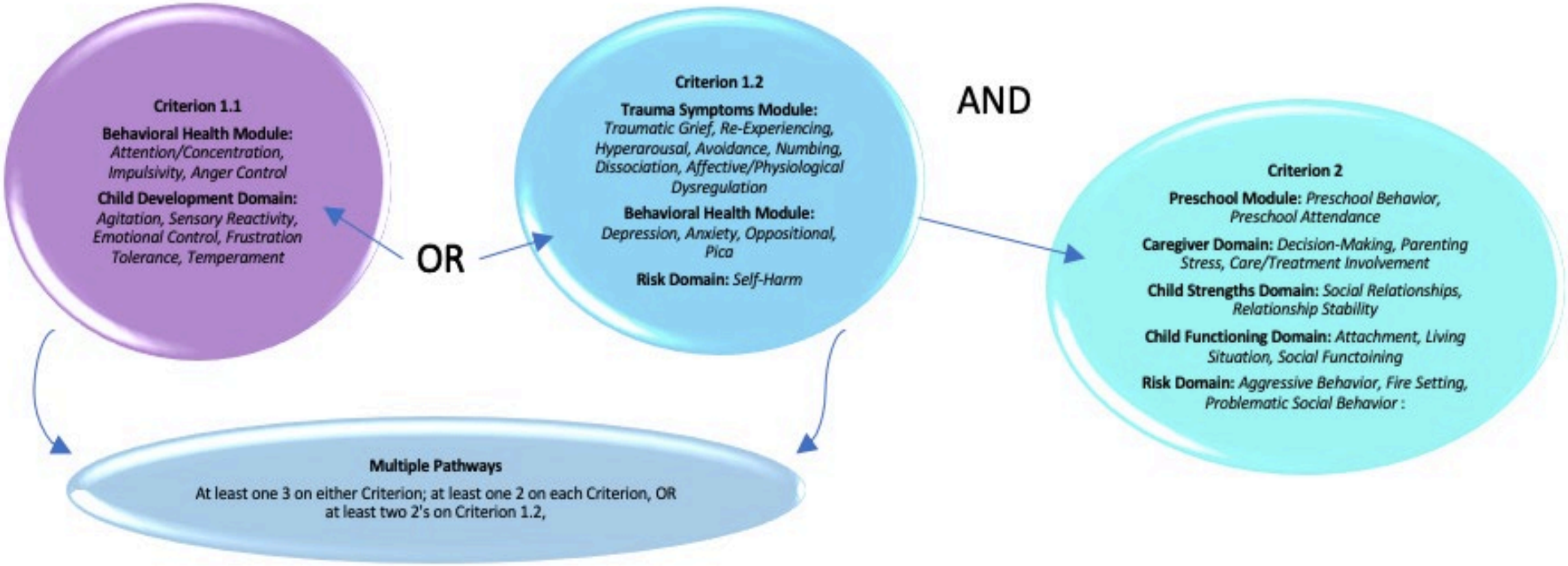


LOC Serious Emotional Disturbance Algorithm

HCBS LOC Eligibility Screen: Serious Emotional Disturbance, 0 to 5



HCBS LOC Eligibility Screen: Serious Emotional Disturbance, 0 to 5, Specific Items



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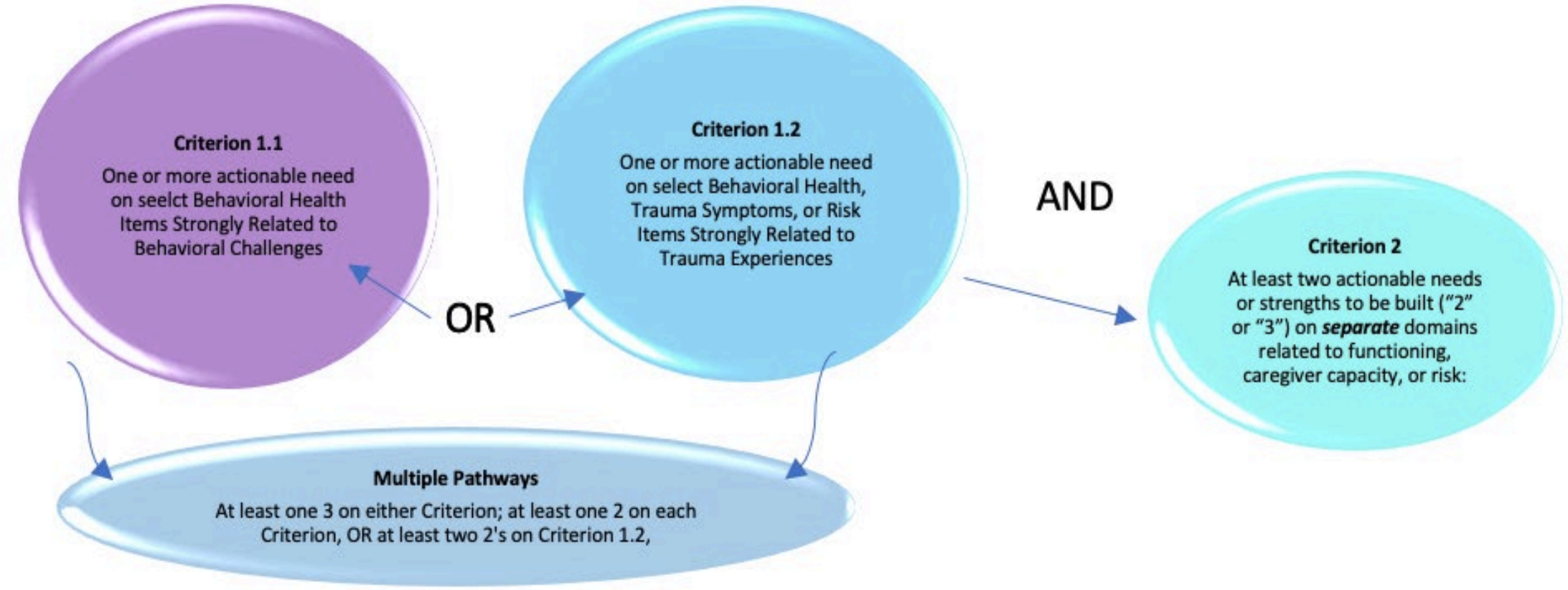

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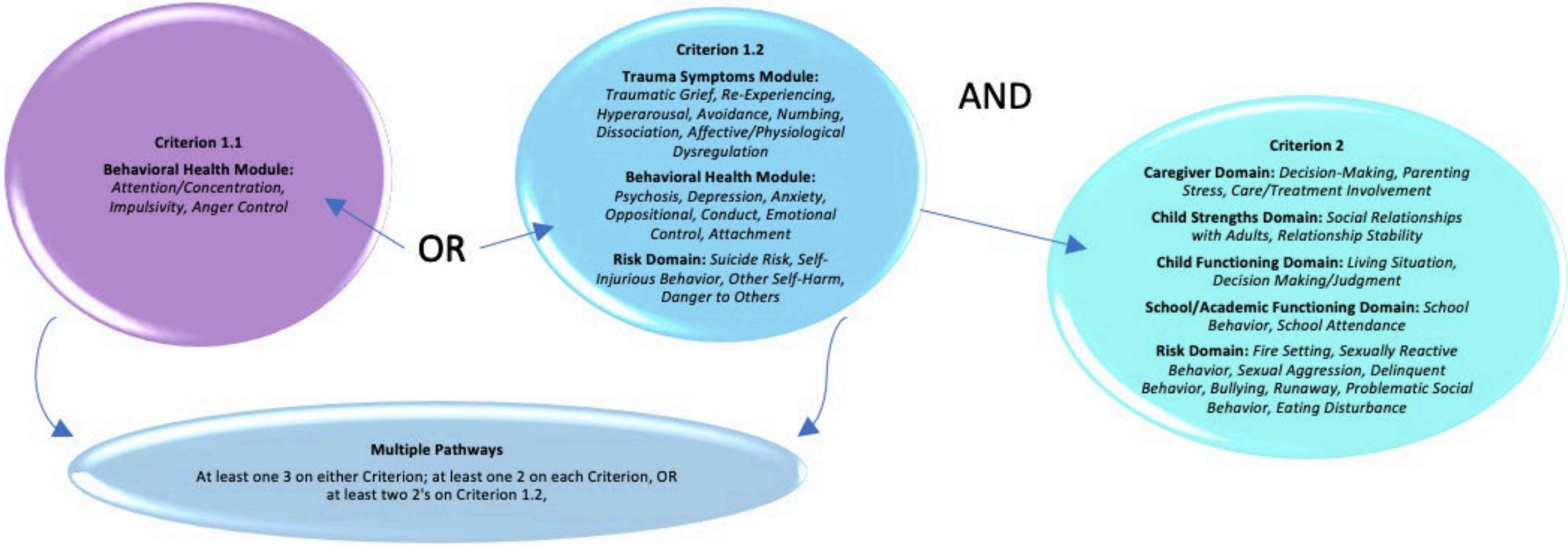

ANY
QUESTIONS
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Thank you for your time and attention!

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