

TCOM:
Transformational
Collaborative
Outcomes
Management

Bringing it Alive in Supervision



Introductions:

1. Name
2. Organization
3. Hopes for this meeting

Agenda

- Brief Abstract Overview

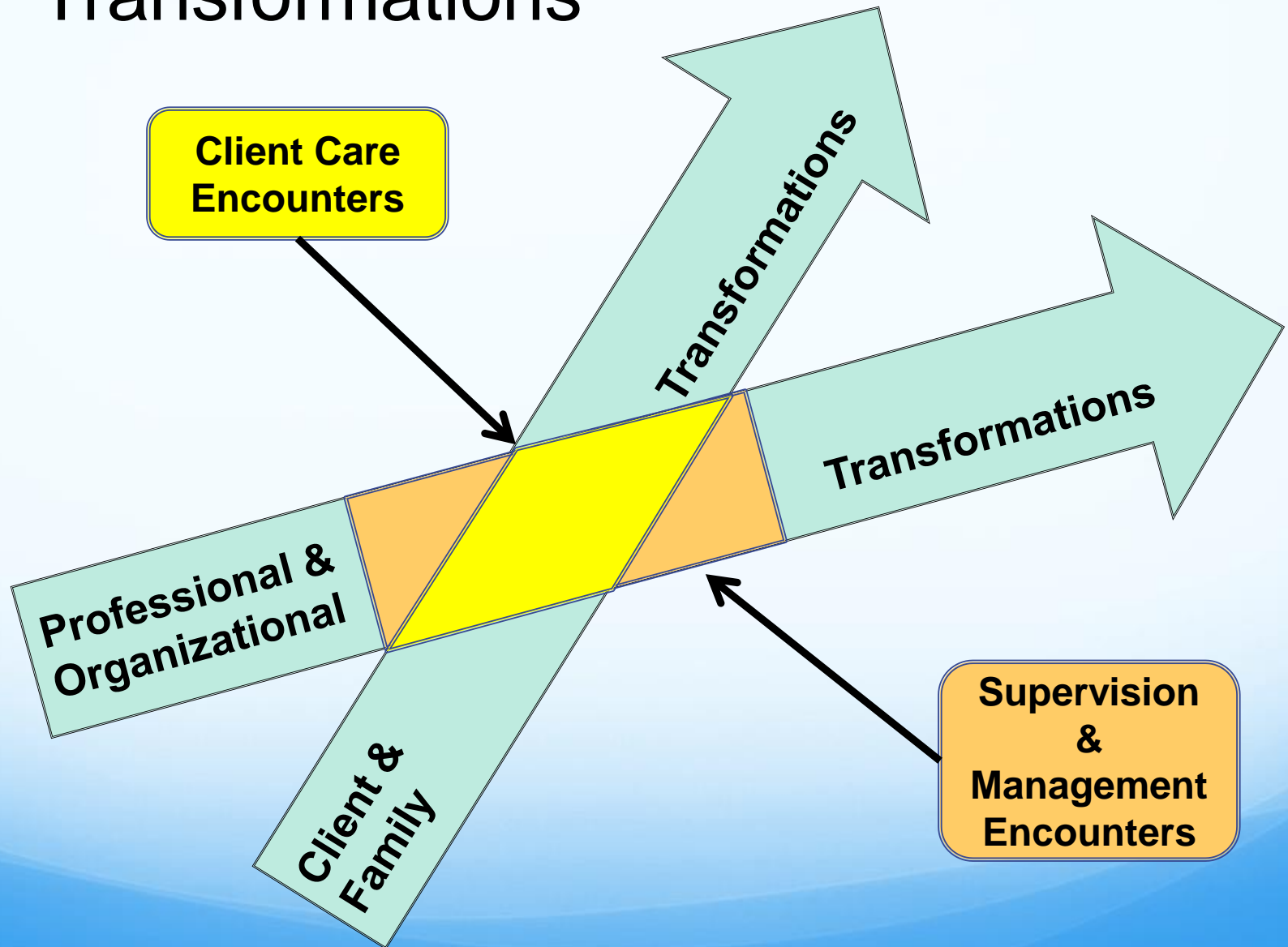
Any, all or none of the following:

- Elements of Supervisory TCOM Support
- Practice scanning ratings/narratives in documentation
- Bridging Assessment and Treatment Planning
 - How to weave items into treatment planning
 - Getting back to the “Why?”
i.e. – Co-Creating Formulations/Interventions

Brief Abstract Overview: Part 1

Gap between goals/reality

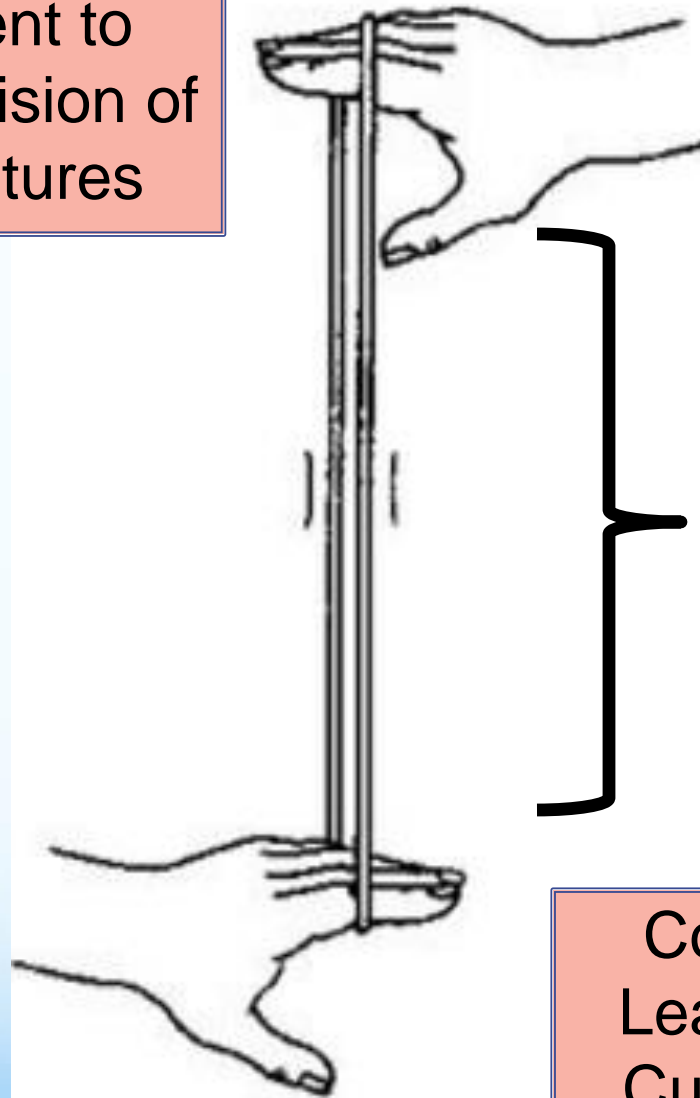
Concurrent, Intersecting Transformations



At Any Given Time: There exists an Aspirational Gap



Commitment to
Rich, Vivid Vision of
Desired Futures



Embrace
***Creative
Tension***



Expect
***Emotional
Tension***

Commitment to
Learning Truth of
Current Realities

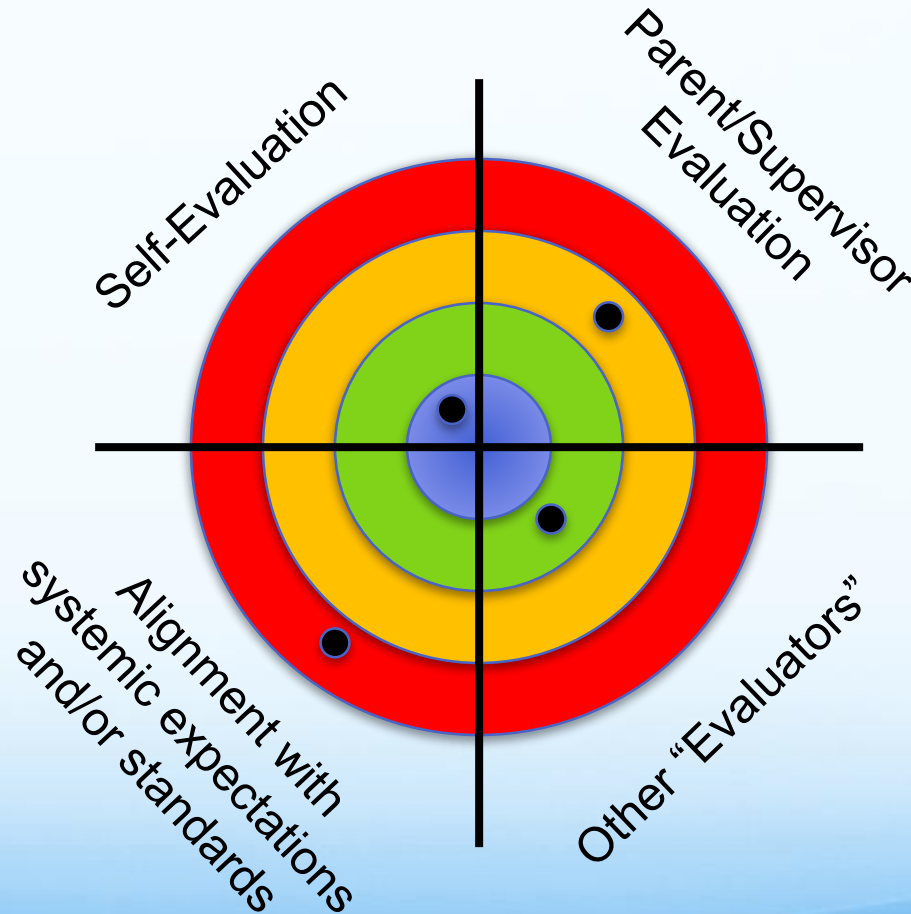
Multiple “Evaluators” of the Gap

Consistent
with goal

Within range
of goal

Needs
Improvement

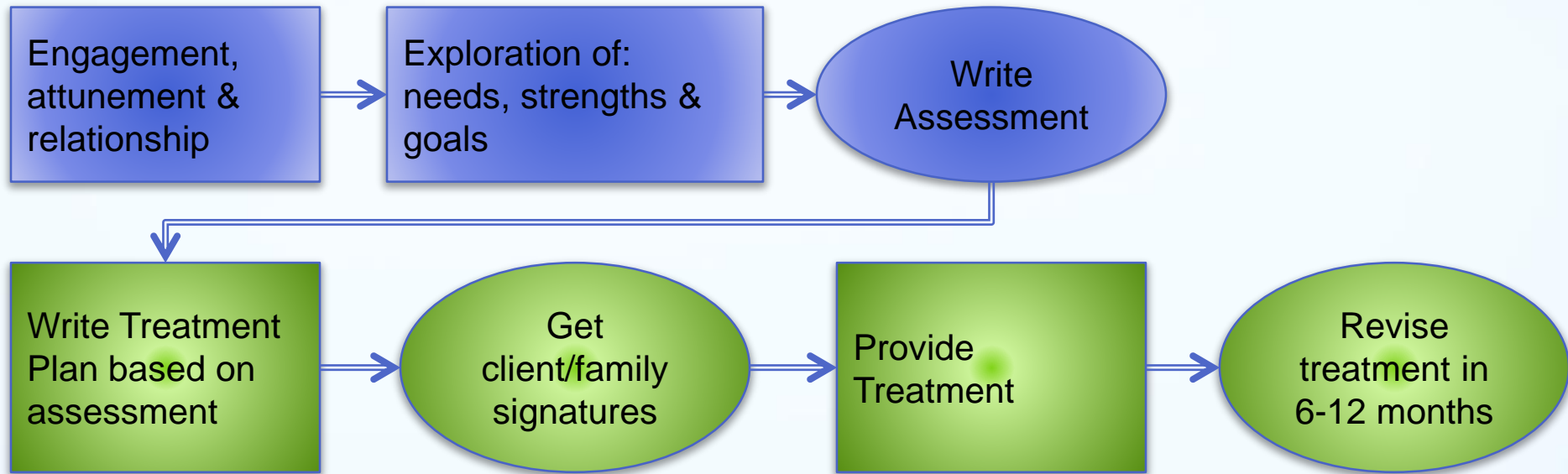
Risk of
consequences



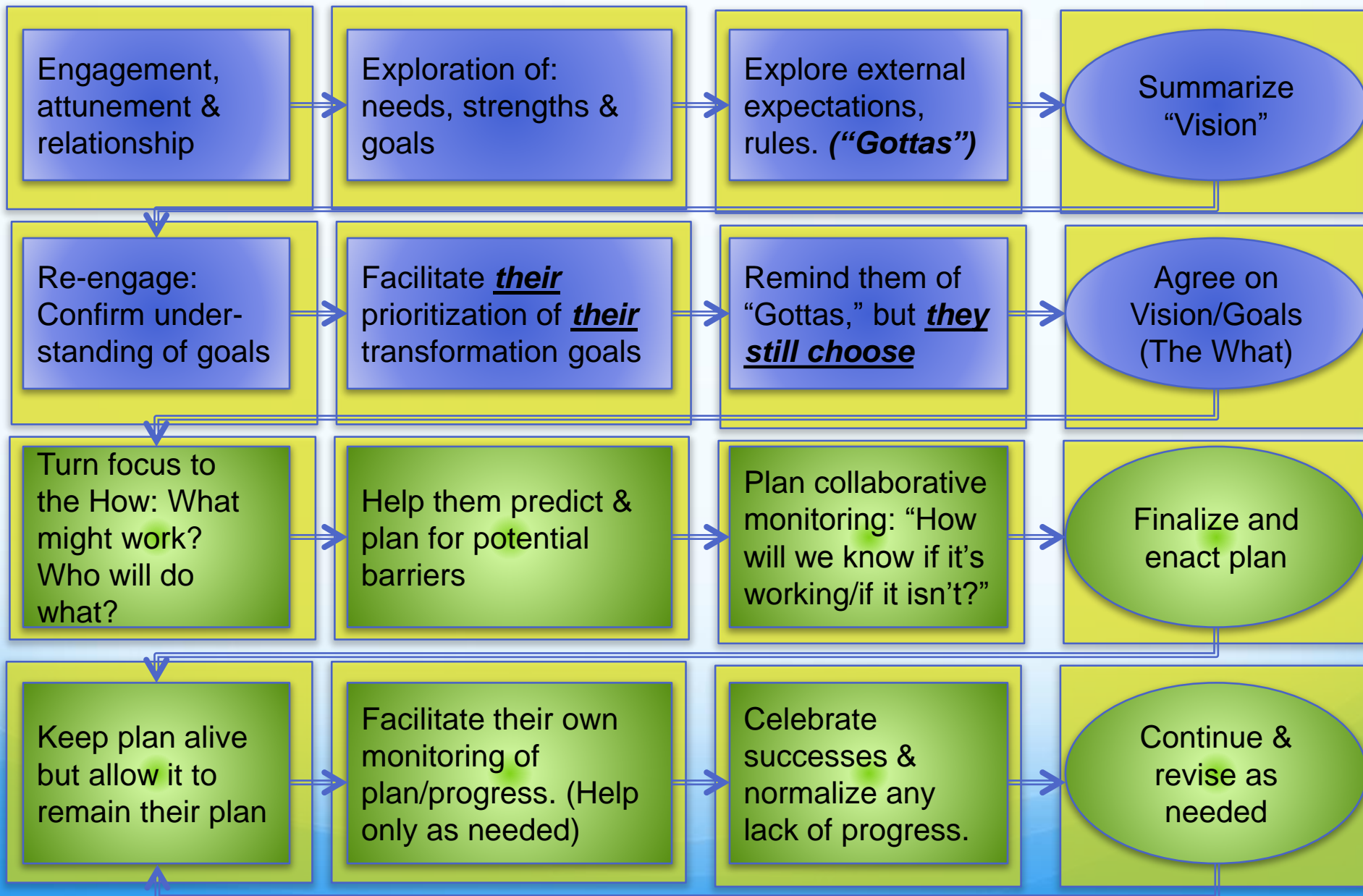
Brief Abstract Overview: Part 2

Some gaps in
CSOC common practices

Assessment & Treatment Planning Common Practices: A Schematic Flowchart



Offering Transformational Support: A Schematic Flowchart



Supervising CANS Users

5 Stages of Supervisor Support & Oversight

Supervisors' Role: Support / Oversight at all Stages

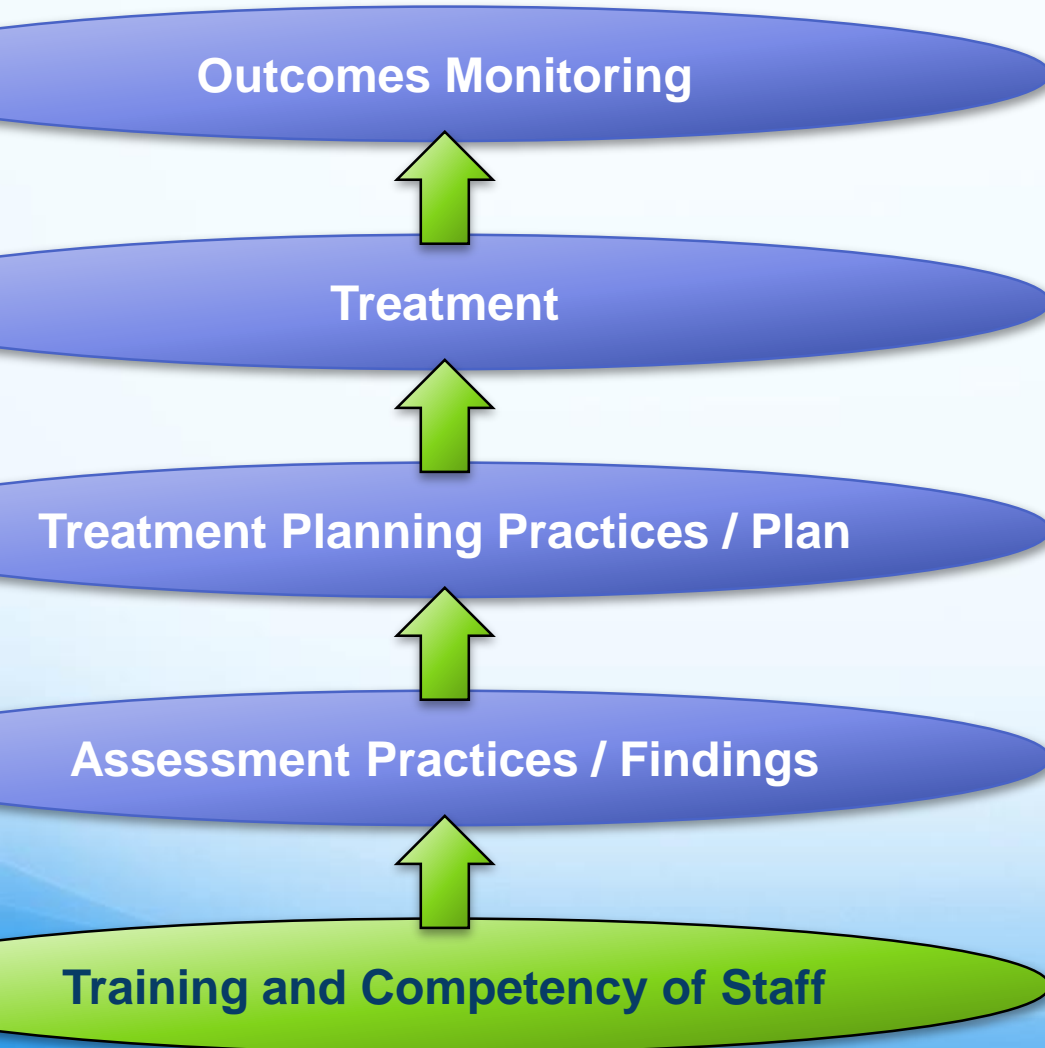


There are five main areas where supervisors impact and support TCOM implementation...

These are not unique to TCOM and may already be a part of your supervisory purview.

Familiar?

Supervisors' Role: Support / Oversight at all Stages



- All users must be certified annually
- Alameda County and your agency are responsible for facilitating this
- As a supervisor, you should understand and support buy-in and compliance

Supervisors' Role: Support / Oversight at all Stages



- Supervisors help ensure that engagement, informed consent and assessment practices are:
 - collaborative,
 - authentic
 - culturally attuned
 - Strengths / needs based
- Supervisors ensure that
 - client & family are appropriately introduced to the CANS/ANSA and
 - Needs and strengths in all life domain areas are assessed
- Supervisors review item ratings and check for agreement with
 - Written narrative material
 - Diagnosis

Advice for clinicians as they get to know the items...

As you go through the manual

1. Read the ***description/definition*** of the item to make sure you understand it.
2. Make note of the items whose definition ***matches*** your intuitive understanding from the item label
3. Make note of the items that ***do not make intuitive sense to you***. Seek clarification on these and make a mindful effort to add them to your thinking
4. Notice which items are ***second nature*** to you: Those you will always gather information about even when not reminded
5. Make note of those items that you ***may not always think to cover*** without reminders as you assess needs and strengths. Make a mindful effort to remember these

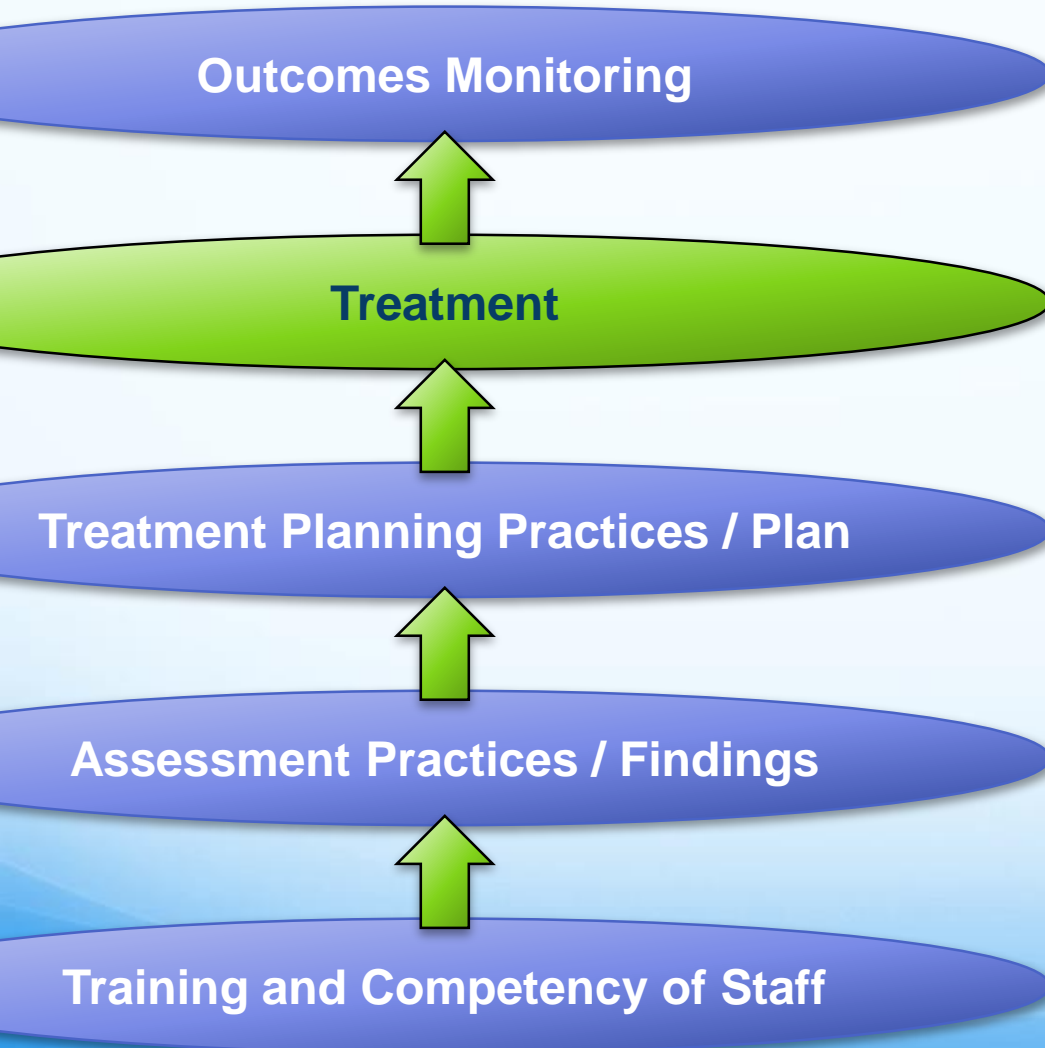


Supervisors' Role: Support / Oversight at all Stages



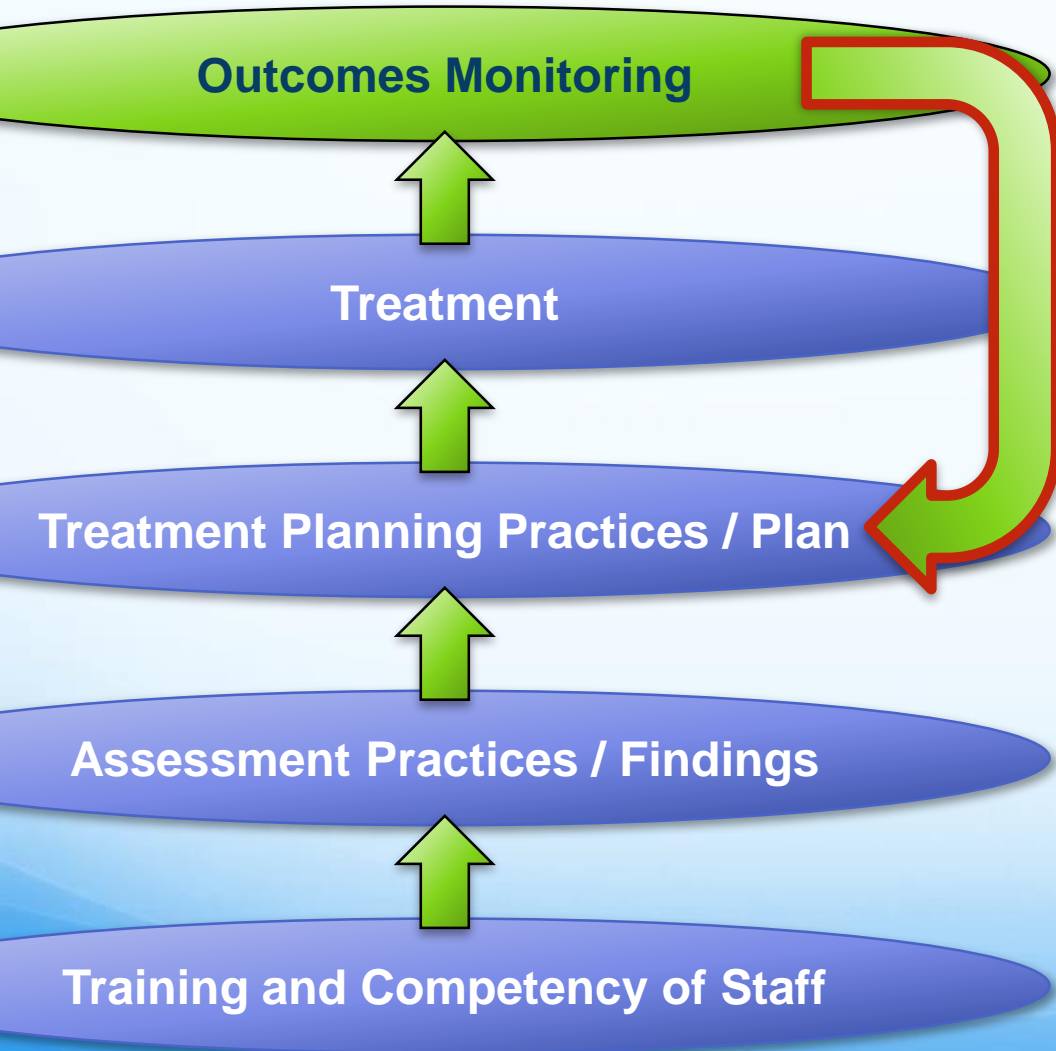
- Supervisors help ensure that treatment planning and the resulting treatment plan are:
 - Collaborative
 - Culturally attuned
 - Capacity-building
 - Needs & strengths based
 - Evidence based, blending
 - Info. from research
 - Clinical expertise
 - Client/family wishes
- Supervisors review item ratings and check for agreement with
 - Written narrative material
 - Diagnosis

Supervisors' Role: Support / Oversight at all Stages



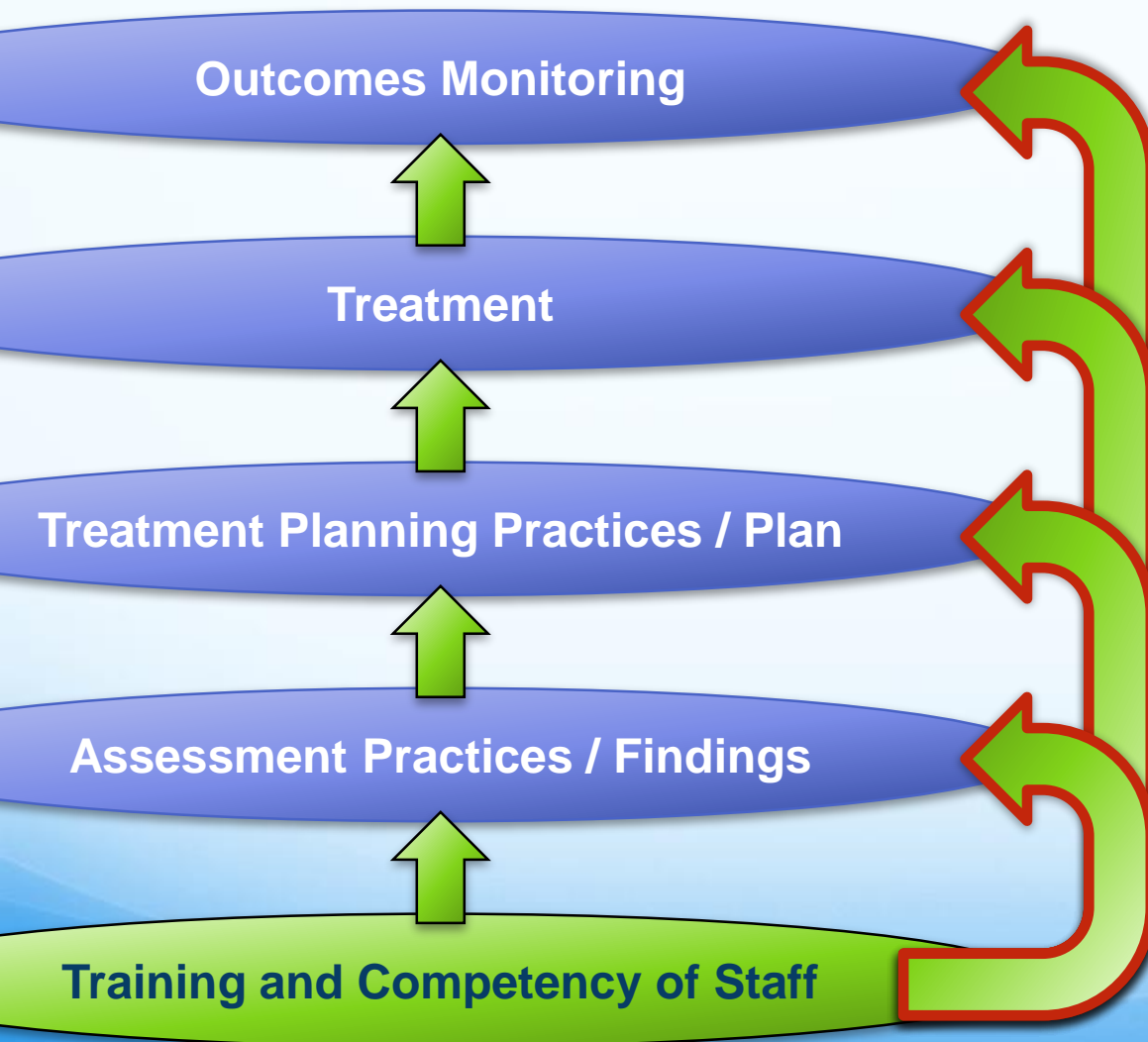
- Supervisors help ensure that
 - treatment interventions – as provided & documented – are consistent with treatment plan
 - Treatment plan is kept alive in treatment for and with client/family – and not just a form that is completed for the QA department

Supervisors' Role: Support / Oversight at all Stages



- Supervisors help their supervisees
 - Engage clients / families in progress measurement
 - Document outcomes – Including **BUT NOT LIMITED TO** adjustment of CANS/ANSA item ratings
 - Re-engage Treatment Planning Stage as needed
 - When goals are reached
 - Then needs and circumstances change
 - When treatment approach not working as hypothesized

Supervisors' Role: Support / Oversight at all Stages



- Supervisors offer honest feedback and appropriate support to help their supervisees recognize and address gaps in their understanding and practice of TCOM
- Supervisors are “TCOM Champions”

Practice Supervising CANS Users

Practice: Diagnosis = PTSD

What is wrong with this picture?

BEHAVIORAL/EMOTIONAL NEEDS

0 = No evidence of any needs.
 1 = History or sub-threshold; watchful waiting or preventive activities.
 2 = Need causing problems, consistent with diagnosable disorder.
 3 = Need causing severe/dangerous problems; requires immediate/intensive action.

	0	1	2	3
30) Attachment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31) Depression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
32) Anxiety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
33) Failure to Thrive	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
34) Atypical Behaviors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35) Self Harm	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
36) Aggression	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
37) Adjustment to Trauma (2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

TRAUMATIC/ADVERSE CHILDHOOD EXPERIENCES

0 = No evidence of any trauma of this type.
 1 = Mild exposure, a single incident or suspicion of this trauma type.
 2 = Moderate degree or multiple incidents of this trauma type.
 3 = Repeated and severe incidents of this trauma with medical/physical consequences.

	0	1	2	3
38) Sexual Abuse (2a)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
39) Physical Abuse	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
40) Neglect	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
41) Emotional Abuse	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
42) Medical Trauma	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
43) Natural Disaster	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
44) Witness to Family Violence	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
45) Witness to Community Violence	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
46) School Violence	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
47) War Affected	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
48) Terrorism Affected	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
49) Witness /Victim – Criminal Acts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
50) Parental Criminal Behavior	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
51) Disruption in Caregiving/Attachment Losses	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. TRAUMA

	0	1	2	3
Traumatic Stress Symptoms				
Affective/Physical Dysregulation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intrusions	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Traumatic Grief	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Re-experiencing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hyper arousal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Avoidance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Numbing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dissociation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Time Before Treatment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sexual Abuse (2a)				
Emotional Closeness of Perpetrator	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Frequency of Abuse	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Duration	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Physical Force	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reaction to Disclosure	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Practice: Diagnosis = Depression

What is wrong with this picture?

BEHAVIORAL/EMOTIONAL NEEDS

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	0	1	2	3
30) Attachment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31) Depression	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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34) Atypical Behaviors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35) Self Harm	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
36) Aggression	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
37) Adjustment to Trauma (2)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Practice: Rating/Narrative Agreement

LIFE DOMAIN FUNCTIONING

0 = No evidence of problems; no reason to believe item requires action.

1 = Watchful waiting; monitoring or possibly preventive action.

2 = Need for action. Some strategy needed to address problem/need.

3 = Need for Immediate action. Safety concern; priority for intervention.

	N/A	0	1	2	3
1) Family Relationships		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Living Situation		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) School (1)		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) Social Functioning		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5) Recreational		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6) Developmental Functioning (2)		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7) Judgment		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8) Job Functioning	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9) Legal		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10) Medical		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11) Physical		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12) Sexual Development		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13) Sleep		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
14) Independent Living	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What is wrong with this picture?

Life Domain Functioning:

Client's behavior and communication strategies do not currently seem to be effective, and his foster parents experience him as very disrespectful.

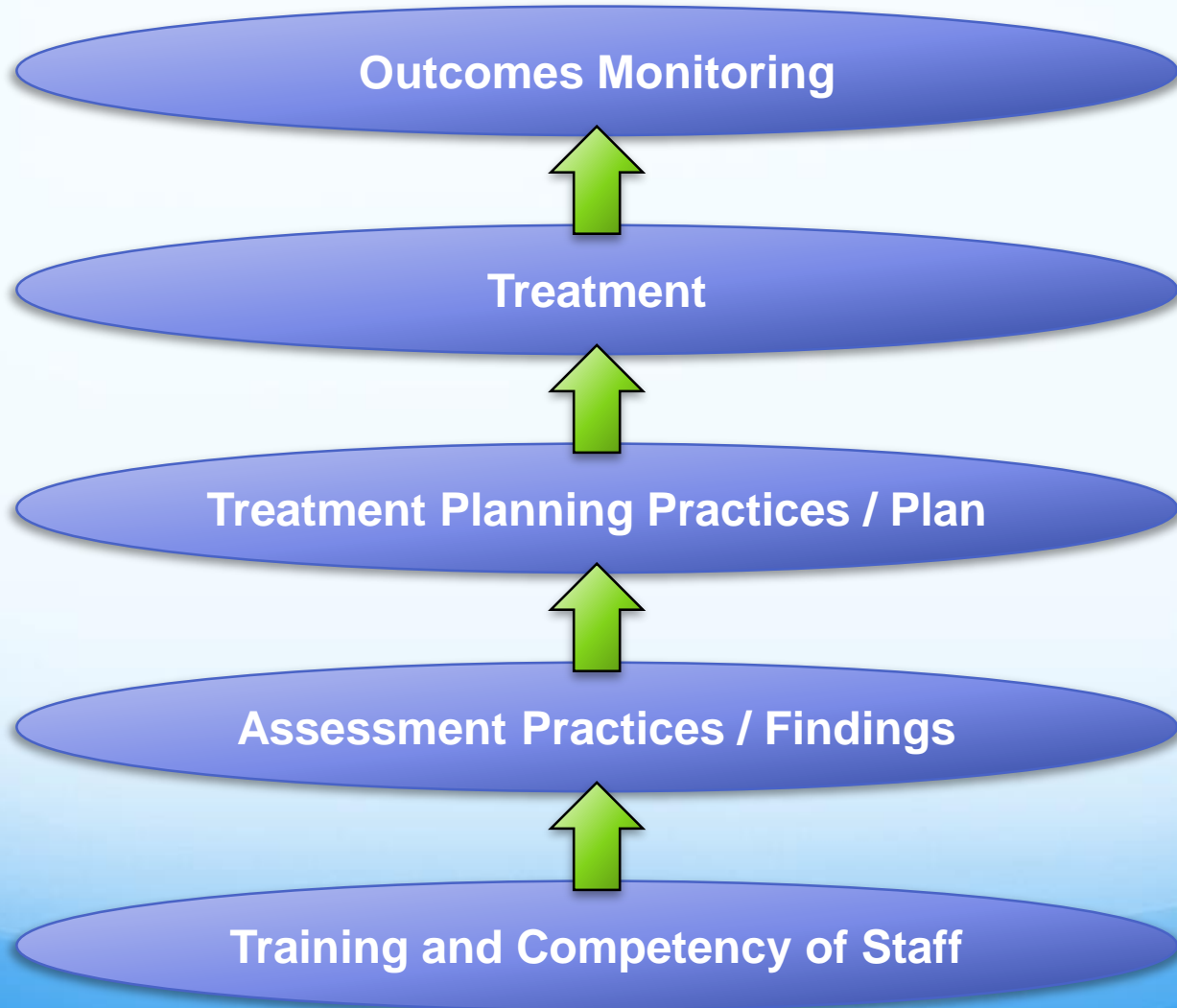
Client is having serious conflict with foster parents which recently led them to threaten him with a 7-day notice. Client says that he is happiest when he is at school or at work where he reports, "People treat me more like my age instead of like a little kid."

Other things to scan for

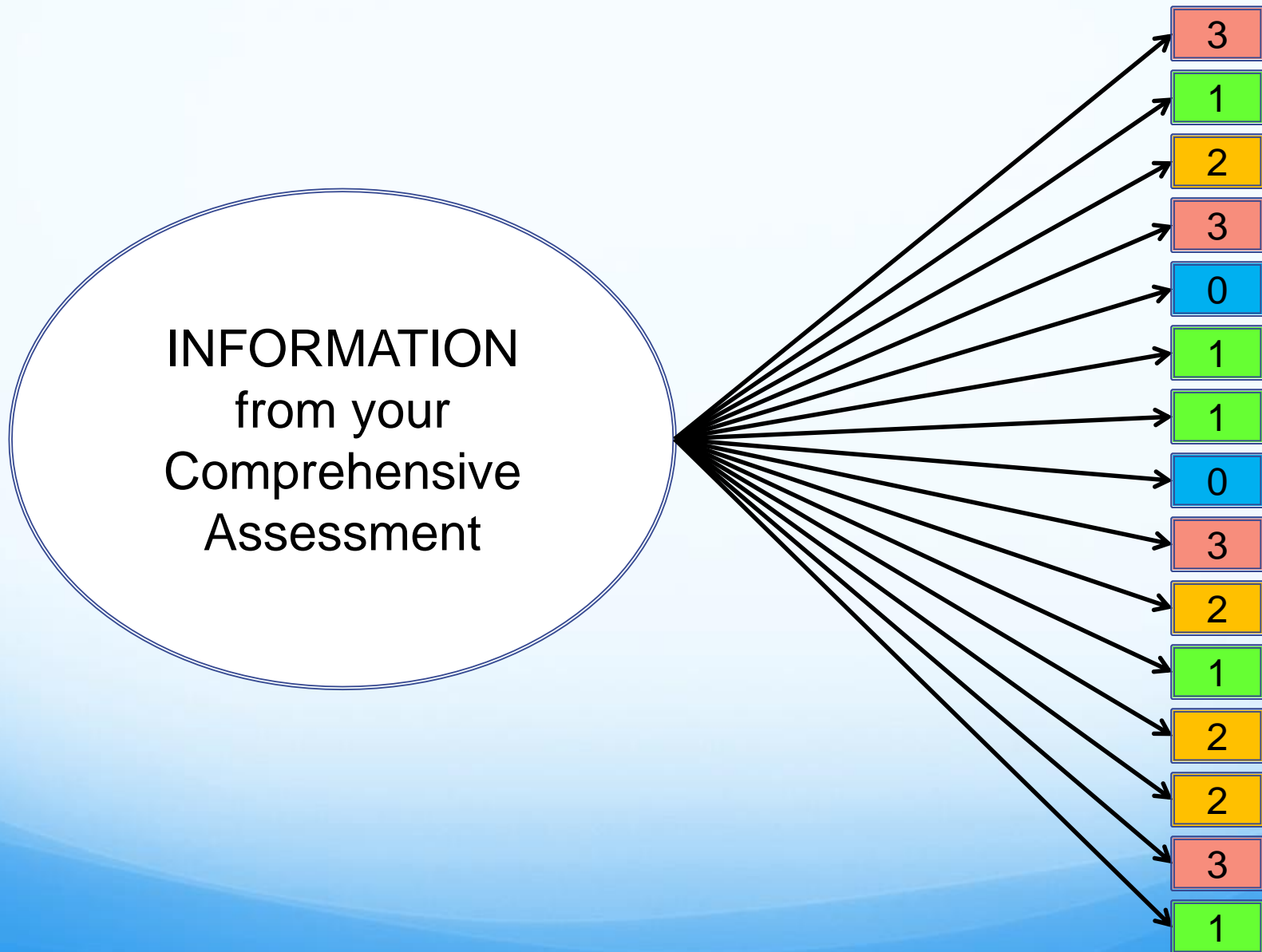
- Clinician who never rates certain items as actionable
- Clinician who ***always*** rates certain items as actionable

How the CANS fits into treatment

From “WHAT” to “WHO, WHAT, WHEN, WHERE, WHY and HOW”



How the CANS fits into treatment



How do items map to Treatment Planning

1

Background Needs:

No change in rating is expected, but these items help us understand the best way to approach things

2

Treatment Targets:

Focus of treatment

3

Anticipated Outcomes:

Areas where we expect to see improvements as a result of effective treatment

How the CANS fits into treatment

Needs

Strengths

Focus of Treatment

3

3

3

3

2

2

2

2

1

1

1

3

3

2

1

1

0

0

NEEDS: Areas where we hope to see change

Treatment Targets

Anticipated 2° Outcomes

NEEDS: Background

Historical Items

Other Non-Focus Needs

STRENGTHS:

Useful Strengths

Strengths to Build

Return to “WHY”

Same Ratings Different Etiologies

Consider two children of same age with following ratings

3 – Anxiety 3 – Trauma History 3 – School Achievement

Child A

Problems with Trauma Adjustment
Causes Anxiety
School Performance suffers

Treatment Target Needs

Treat Traumatic Stress
Teach Anxiety Management

Anticipated 2° Outcomes

Improved School Achievement

Child B

No Problems w/ Trauma Adjustment
School work is over his head
Poor grades causing anxiety

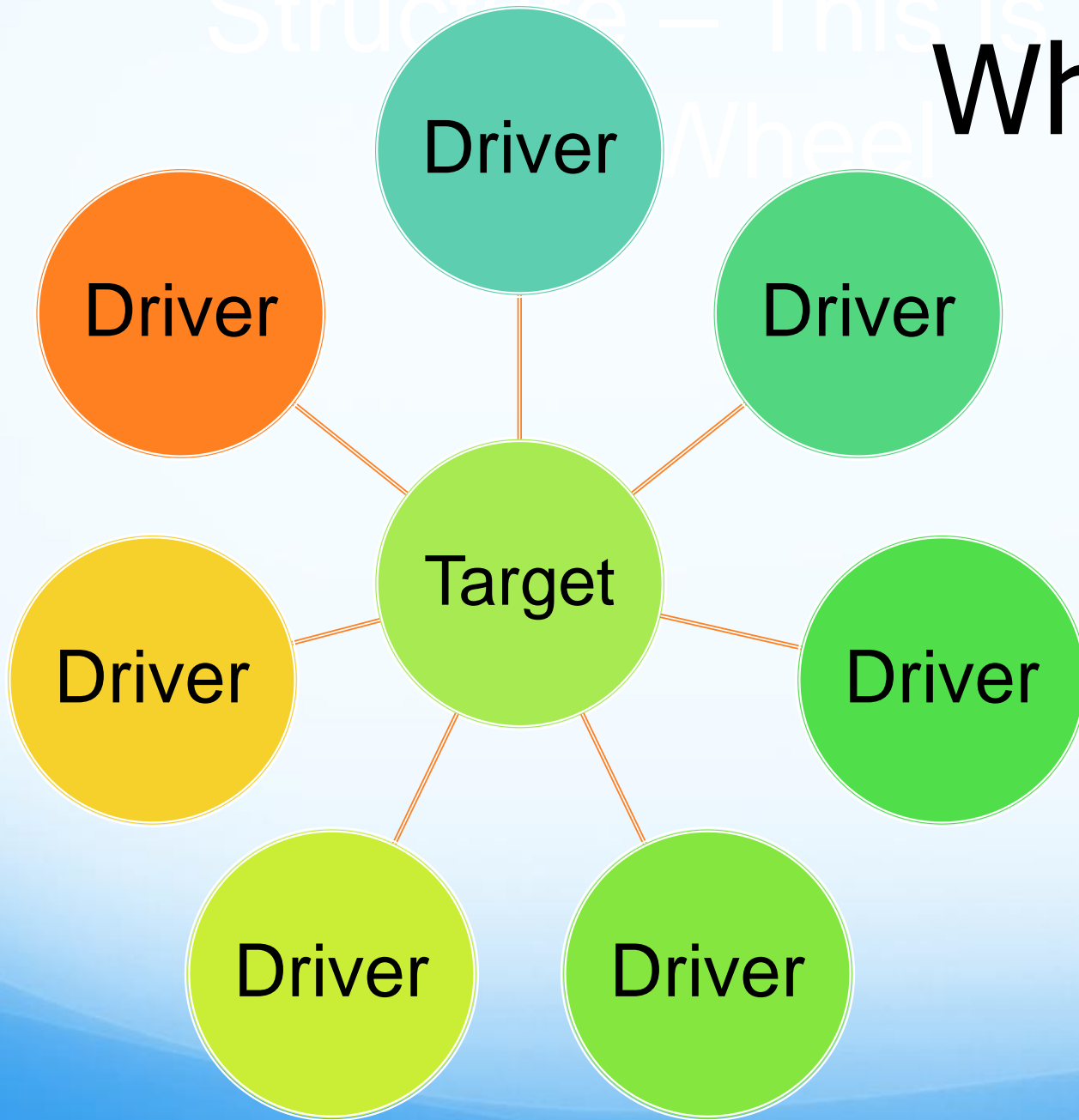
Treatment Target Needs

Academic Support

Anticipated 2° Outcomes

Decreased Anxiety
Improved School Achievement

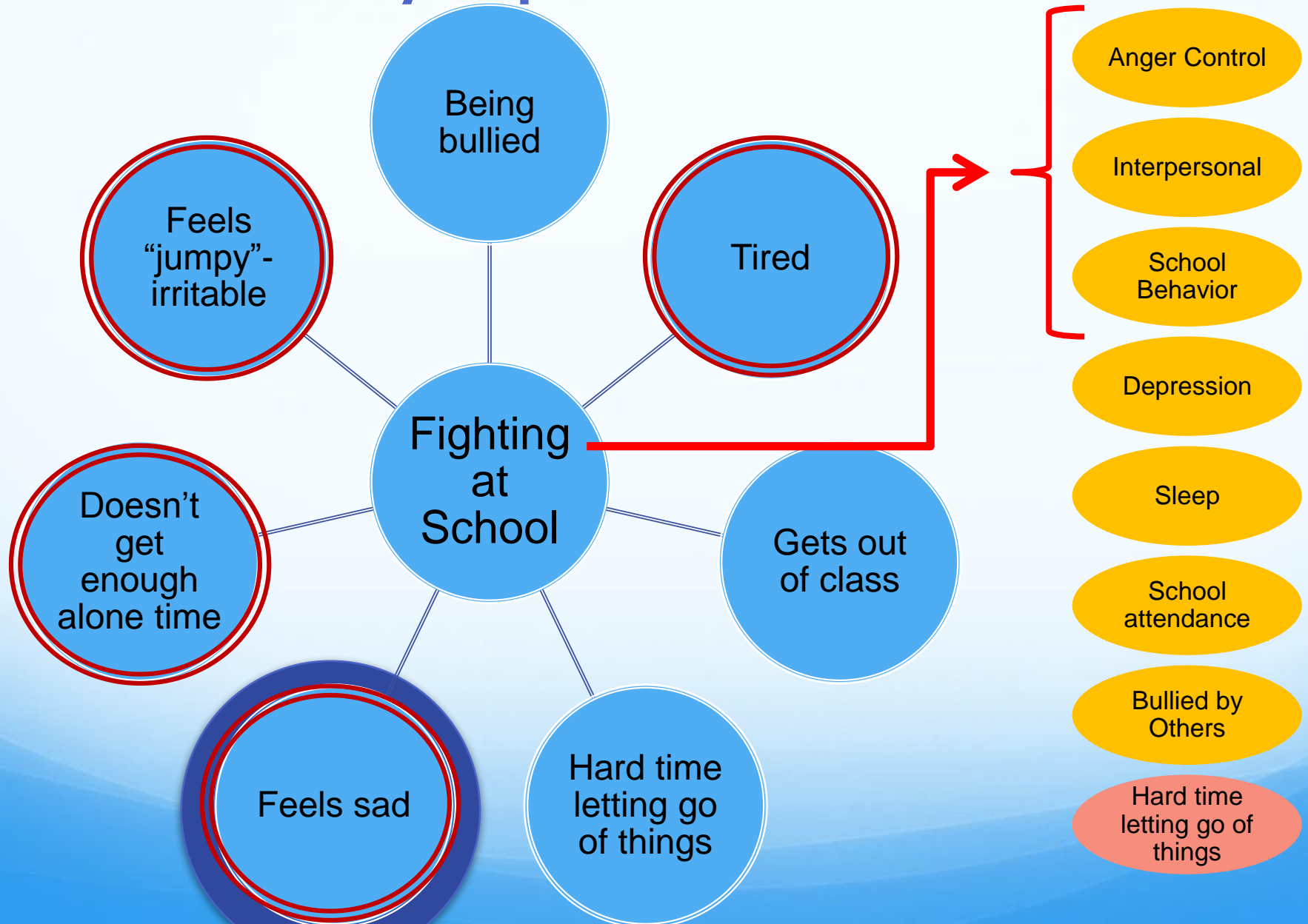
Why Wheels



Foundational Why Wheels



Symptom Clusters



Secondary Why Wheels



Replacement Behavior Wheels



Which appear on multiple why wheels?



Getting to Interventions



Success Why Wheels



Questions before
we wrap up?

For More Information

For more information on the CANS, the CANS Provider Collaborative, Learning Collaborative Groups, please contact:

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