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## Memorandum

To: All Providers of Medi-Cal Specialty Mental Health Services (SMHS)

From: Quality Assurance

Date: May 31, 2018 updated June 26, 2018

RE: DHCS MHSUDS INFORMATION NOTICE NO.: 17-052

Subject: CANS and PSC-35: State Mandated Performance Outcomes Assessment Tools

Dear Providers,

On November 14, 2017 DHCS released Info Notice No. 17-052. Please see: <u>http://www.dhcs.ca.gov/services/MH/Documents/FMORB/Info\_Notice\_17-</u>052\_POS\_Functional\_Assessment\_Tool.pdf

This Memo provides the guidelines for the implementation of the CANS and PSC-35 per info notice 17-052.

## Implementation Date: July 1, 2018

## PSC-35

The PSC-35 is a psychosocial screening tool designed to facilitate the recognition of cognitive, emotional, and behavioral problems so appropriate interventions can be initiated as early as possible. Parents/caregivers will complete PSC-35 (parent/caregiver version) for children and youth ages four (4) up to age eighteen (18).

The PSC-35 does not require training because it is completed by the parent/caregiver. For more information about the tool, including implementation, scoring and clinical utility, please visit the Pediatric Symptoms Checklist webpage at: http://www.massgeneral.org/psychiatry/services/psc\_home.aspx.

The PSC-35 will be entered into Objective Arts directly. The PSC-35 should be offered at the beginning of treatment (by the completion of the full MH assessment), semi-annually (starting at the 5<sup>th</sup> month of service and every six months after that), each time the Client Plan is

updated, and at the end of treatment. DHCS (and ACBHCS) may revisit the administration methodology in the future if it is determined this timeframe is insufficient.

The PSC-35 is also available on the DHCS Performance Outcomes System webpage at: <a href="http://www.dhcs.ca.gov/provgovpart/pos/Pages/Functional\_Assessment\_Tools.aspx">http://www.dhcs.ca.gov/provgovpart/pos/Pages/Functional\_Assessment\_Tools.aspx</a>. Language versions are available in ACBHCS threshold languages except Farsi and Vietnamese. Those are attached here.

## CANS

The CANS is currently used by all BHCS contracted agencies. The state mandated use of the CANS as a performance outcome assessment tool does not in any way change the requirements of all BHCS contracted providers and county operated programs to complete the 96 item CANS tool, and within the timeframes previously established as the Alameda County community standard of care through collaboration with BHCS Child Services providers.

The CANS is used for identifying and prioritizing youth and family actionable needs and useful strengths to inform treatment plans. It provides a framework for developing and communicating about a shared vision and uses youth and family information to inform planning, support decisions, and monitor outcomes.

Providers will complete the CANS through a collaborative process which includes children and their caregivers (at a minimum).

The current CANS has been modified to come in alignment with the CANS 50 required by the state (areas added but not removed). The changes to the CANS will be made within Objective Arts by the implementation date of July 1, 1018.

The CANS needs to be completed at the beginning of treatment (by the completion of the full MH Assessment), semi-annually (starting in the 5<sup>th</sup> month of service and every six months after that), every time the Client Plan is updated, and at the end of treatment.

DHCS may revisit this administration methodology in the future if it is determined this timeframe is insufficient. The CANS versions will be made available by BHCS <u>http://www.acbhcs.org/providers/CANS/cans.htm</u>.

<u>Please note, for all Clients, if a MH Assessment is due, a CANS is now required (along with the PSC-35 for clients age 4 – 17 years).</u>

<u>The only programs which will be exempt from administering the CANS are those providing</u> <u>ancillary services (such as Medication Clinics, Katie A services, and TBS services) where the</u> <u>child has another SMHS provider who is administering the CANS (usually the</u> <u>psychotherapist).</u>

ACBHCS CANS provider trainings will be available regularly. See <u>https://www.alamedatcom.org/</u>

ACBHCS Leadership appreciates your assistance and thanks you in advance for your cooperation with this process.