**What is the purpose of the CANS?**

All children placed in out-of-home care in Wisconsin will have an assessment completed using the Child and Adolescent Needs & Strengths (CANS) tool. The assessment uses outcome measures to assess clinical status, well-being, level of functioning, and quality of life. The CANS tool will better inform case managers, foster care coordinators, licensing agencies, and foster parents on the needs and strengths of the child being placed in out-of-home care. Each child will be given a Level of Need based on their CANS scoring. Children will be matched using their Level of Need and the foster parents’ Level of Care certification. This will lead to more stability in placement and promote positive outcomes.

In addition to assessing a child, the CANS will also assess a child’s current caregiver, as well as the caregiver who has been identified as the permanent resource for that child. This information will help in matching a child to a caregiver who can meet the needs of that child.

**How do I use the CANS to build consensus on the child’s team?**

The CANS is intended to be a communication tool. The CANS can be used to facilitate communication and consensus within the child’s team by discussing the results and ensuring that all members are in agreement with the assessment. Discussions about agreement on how the child’s needs and strengths are described provides the foundation for what approaches to take to address the child’s needs and identify and build strengths. The CANS items will become the language by which these issues are discussed.

**How does this affect me?**

As a member of a child’s team, you will have input into the CANS assessment. The CANS is to be used to build consensus in a team in order to create a treatment plan for a child. You will be able to express your opinion on the items rated in the CANS, and will have access to a copy of the final assessment. If you do not agree with the outcome of a child’s CANS assessment or do not have input in the CANS, talk with the child’s caseworker.

**Who will complete the CANS?**

The CANS can only be completed by an individual who has been trained and certified in its use. Re-certification is required on an annual basis.

The CANS will be completed within 30 days of placement into a foster home and will be updated every six months.
**How is the CANS different from other measures??**

The CANS is unique in several ways:

- The CANS is about the child, not about the service. If a child is receiving services that are masking a need, this is factored in to the ratings. For example, a hyperactive child on stimulants is still rated a ‘2’ as long as you have to work to control symptoms with medications.
- The CANS is focused on the current behavior, not the reason behind it. Another way to think about this is that the CANS is about the ‘what,’ not the ‘why’ of a behavior.
- In rating items, the CANS uses a 30-day window, unless otherwise specified.

The CANS assesses domains of needs and strengths, and the two are scored on a scale of zero to three.

**For needs:**
- A rating of 0 indicates no evidence, or no need for action on this item.
- A rating of 1 indicates that this item will require some prevention or monitoring.
- A rating of 2 indicates that this item requires action by the child’s team.
- A rating of 3 indicates that this item requires immediate or intensive action.

**For strengths:**
- A rating of 0 indicates a centerpiece strength, something so powerful it can be the focus of a strength-based plan.
- A rating of 1 indicates that this item is a useful strength for that child or caregiver.
- A rating of 2 indicates that this item is a potential strength that has been identified, but must be developed further.
- A rating of 3 indicates no strength has been identified for this item.

**Is the CANS reliable and valid?**

Yes. There is a large body of research demonstrating that the CANS is reliable both in training and field applications. Unlike most assessments, CANS completed in the field can be audited for accuracy. The audit reliability of the CANS has been reported to be 0.85. In order to be certified in the CANS, an individual must demonstrate reliability on a case vignette of 0.70 or greater. The validity of the CANS has been demonstrated with its correlation with other measures and with its demonstrated ability to identify children who will benefit through placement in different programs and levels of care.

**Where can I learn more?**

Visit the CANS page on the Wisconsin Department of Children and Families website: [https://dcf.wisconsin.gov/cans](https://dcf.wisconsin.gov/cans)

You can also visit the Praed Foundation website at [https://praedfoundation.org/](https://praedfoundation.org/) for the most comprehensive description of the history and development of the CANS approach.