



Quality Assurance Bulletin

Quality Assurance Division

County of Los Angeles – Department of Mental Health

Jonathan E. Sherin, M.D., Ph.D., Director

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CANS & PSC IMPLEMENTATION

This Bulletin provides information related to the implementation of the Child and Adolescents Needs and Strengths (CANS) and Pediatric Symptom Checklist (PSC) within Los Angeles County Department of Mental Health (LACDMH). Per Department of Health Care Services (DHCS) Information Notice 17-052, DHCS has selected the CANS-50 and PSC-35 tools to measure child and youth functioning as required under Welfare and Institutions Code Section 14707.5. While DHCS is requiring the use of the CANS-50, LACDMH has elected to require the use of the CANS-IP (described below) to best support our Department of Child and Family Services partners who are required by the California Department of Social Services (CDSS) to utilize the CANS-IP.

The CANS-IP is a structured evaluation tool used for identifying youth and family needs amenable to intervention and strengths that can be capitalized upon. It provides a framework for developing and communicating a shared vision for addressing the needs. It utilizes youth and family information to inform planning, support decision making and monitor outcomes.

The PSC-35 is a brief questionnaire completed by a caregiver and scored by a practitioner that helps identify and assess changes in emotional and behavioral problems in children. It covers a broad range of psychosocial problems and assists practitioners to understand the types and severity of problems reported by caregivers. It is designed to assist in earlier detection and treatment of psychosocial problems leading to better outcomes for children.

REQUIREMENTS EFFECTIVE JULY 1, 2019

For all newly active clients between the ages of 6 and 21, the CANS-IP must be completed at initial assessment, every 6 months throughout treatment, and at the end of treatment.

- The CANS-IP must be completed by a practitioner certified by the PRAED Foundation, a public charitable foundation. Practitioners must be re-certified annually and the certification must be through the PRAED Foundation. Any certification through the PRAED Foundation is transferrable to LA County.
- LACDMH recommends that a practitioner eligible to complete an assessment (e.g. utilize procedure code 90791) initially complete the CANS-IP at the time of mental health assessment. Similar to mental health assessments, providers should utilize any previously completed CANS-IP as a baseline and update as appropriate.
- The CANS-IP must be completed using a collaborative process with the client and caregiver (minimally). Per DHCS Information Notice 18-007, when a client has a Child and Family Team (CFT) meeting, the CANS-IP must be informed by CFT members. The CANS-IP results must be shared, discussed, and used within the CFT process to support case planning and care coordination.

For all newly active clients between the ages of 3 and 19, the PSC-35 must be completed at initial assessment, every 6 months throughout treatment, and at the end of treatment.

- The client's caregiver must complete the PSC-35. While the caregiver may be any significant support person in the client's life including agency staff when the client resides in a residential setting, LACDMH recommends that the client's primary caregiver complete the tool and, when possible, have the same caregiver complete it for repeat administrations.
- If a caregiver is not available, the client may complete the tool if he/she is 11 years or older. Providers should make every effort to have the caregiver complete if they are involved in the client's treatment.
- A practitioner, typically the primary contact, must review the PSC-35 and score it upon completion by the caregiver/client.

NOTE: Newly active client is defined in LACDMH Policy 401.03 as a new client requiring the opening of a new clinical record or an existing client returning for services after the termination of services per LACDMH Policy 312.01

or an existing client returning for services after 180 days of inactivity requiring the resumption of documentation in an existing clinical record.

The Quality Assurance Division will be updating the Organizational Provider's Manual to include detailed information related to the CANS-IP and PSC-35 requirements.

NOTE: Due to existing screening/outcome requirements within the Juvenile Halls and Camps, clients residing in those settings are excluded from these requirements unless they have been adjudicated for suitable placement. If only crisis intervention or indirect services (i.e. Community Outreach Services) are provided to a client, the CANS-IP or PSC-35 is not required.

FORMS & SUBMITTING DATA

The CANS-IP differs from the CANS-50 in that it includes additional trauma/risk questions, allows for the capture of additional caregiver resources and needs, and has ordered differently a few questions in the Behavioral/Emotional Needs Domain and Risk Domain. A Clinical Forms Bulletin will be issued shortly with additional information related to the CANS-IP and PSC-35 forms and will include paper versions of the forms.

- For Directly Operated providers, the CANS-IP will be entered directly into the Integrated Behavioral Health Information System (IBHIS). The PSC-35 should be completed on paper by the caregiver, then data-entered into IBHIS by the practitioner reviewing the tool. Additional information will be shared on the IBHIS Super User calls related to the CANS-IP and PSC-35 within IBHIS.
- For Legal Entity providers, LACDMH is in development of an EPSDT service to submit and retrieve CANS-IP and PSC-35 data from their electronic health record (EHR) to LACDMH. LACDMH is evaluating if and how providers may be reimbursed for any development that is needed within the providers' EHR. However, until the EPSDT service is up and running, providers must submit CANS-IP and PSC-35 data through the "Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) Outcome Measures" web-based application.

The EPSDT Outcome Measures application will be available in mid-June and can be found at <https://dmhepsdt.dynamics365portals.us/> or through the DMH public facing website at <https://dmh.lacounty.gov/for-providers/web-apps/>. To obtain access to the application, obtain a C-number (if none exists already) using the Guide to Request Access to EPSDT OMA Application (attached) and request access to the application using the EPSDT OMA Request form (attached). The form(s) should be submitted to PEIoutcomes@dmh.lacounty.gov. Any technical issues using the application should be submitted to the DMH Help Desk using the HEAT Self Service Portal. *NOTE: Short-Term Residential Therapeutic Program (STRTP) providers were already given access to the application in January 2019.*

Providers must share with each other completed CANS-IP and PSC-35 data for clients assessed and/or served by multiple providers and/or agencies (e.g. DCFS, Probation) to avoid redundant assessing of clients. LACDMH is working to ensure providers are able to access completed CANS-IP and PSC-35 data through IBHIS, the EPSDT Outcome Measures application and EPSDT service. If it is known a client was newly active at another provider (including DCFS and Probation) after July 1, 2019 and the CANS-IP/PSC-35 information is not available in these applications, providers should contact the previous provider to determine if a CANS-IP/PSC-35 was completed and obtain the completed forms if available.

TRAINING & CERTIFICATION

In order to use the CANS-IP, practitioners must be trained AND certified by the PRAED Foundation. Certification requires passing an on-line test through the PRAED Foundation. LACDMH is currently offering three different training options from the PRAED Foundation:

1. In Person Overview Training (6 hours): Provides an overview of the core concepts and use of the CANS. Staff are eligible to take the certification test upon completion. There are two dates available at this time - June 19th and June 27th. These trainings are ONLY open to staff who will become trainers by also taking the Train-the-Trainer training (see #3 below). Training bulletins with information on how to register is attached. In order to ensure room for all providers who need this training immediately in order to start building training capacity, please limit registration to only those staff who need this training in June. LACDMH is in the process of scheduling additional training; however, these dates will be after July 1, 2019.
2. On-Line Overview Training (2-4 hours): Online course located on TCOMtraining.com that provides training on CANS, including item level videos and quizzes. Staff are eligible to take the certification test upon completion. There are 13,000 slots available. To register, staff must submit registration information via <https://www.surveymonkey.com/r/CANSIP>. Information on accessing the online training will be provided within a week of registration.
3. Train-the-Trainer Training: In person training that includes a review of training structure, core concepts and teaching/coaching strategies for the CANS for those who will provide in-person training to their staff. Staff must attend an in-person "Overview" training prior to attending this training (see #1 above). LACDMH recommends that staff have experience completing the CANS prior to becoming a trainer. At this time, all trainings are full and LACDMH is in the process of scheduling additional training. *NOTE: LACDMH is still evaluating if and how staff who are trained by a staff trainer will obtain certification test coupons. Additional information will be provided as soon as this is determined.*

For Directly Operated providers, staff must code their timesheet as Training (037) and must select the "CANS" project code on their timecard when identifying time spent in CANS training.

For Legal Entity providers, training costs related to the CANS is considered part of doing business and should be included in the appropriate cost categories in the LE cost report for Fiscal Year 18/19. LACDMH is still in the process of evaluating reimbursement options for Fiscal Year 19/20.

Although formal training is not required to administer the PSC-35, free webinar training is available through LACDMH. For more information about PSC training, contact the Prevention and Outcomes Division at peioutcomes@dmh.lacounty.gov.

CLAIMING

The Quality Assurance Division has requested additional information from DHCS related to claiming for time spent providing the CANS-IP and reviewing the PSC-35. The time is reimbursable but questions remain on the details of reimbursement. Additional guidance will be provided as soon as there is confirmation from DHCS.

If Legal Entities or Directly Operated providers have any questions regarding this Bulletin, please contact the QA Division at QualityAssurance@dmh.lacounty.gov.

cc: DMH Executive Management
DMH Administration Managers
DMH QA Liaisons
Legal Entity Executive Management

DMH Clinical Operations Managers
DMH Quality Management Division
DMH CIOB Managers
Legal Entity QA contacts