

Using administrative CANS data for benchmarking and outcomes monitoring in state-wide Wraparound initiatives

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Wraparound Evaluation & Research Team 2815 Eastlake Avenue East Suite 200 · Seattle, WA 98102 P: (206) 685-2085 · F: (206) 685-3430 www.depts.washington.edu/wrapeval CANS is one of many assessments of youth functioning used in SOCs

- Developed by Dr. John Lyons
- Often customized for each site
 - Comprised of 40-50 core items, divided into 5-6 domains
 - In-depth modules can also be used for more information on topics relevant to the particular youth
- A professional administers the tool based on their knowledge of the youth and family, typically every 3-6 months from enrollment
 - Needs are rated from 0, "No evidence" to 3, "Immediate/Intensive Action Needed"
 - Strengths are scored from 0, "Centerpiece Strength" to 3, "No Strength Identified"



CANS and Wraparound are being implemented in nearly every state



CANS and Wraparound: Points of connection

- Focus on the whole family, not just the "identified child"
- Base planning on presence of Needs and Strengths rather than symptoms or deficits
- Aim to identify issues that demand action (Needs) or that could be leveraged into productive strategies that bolster the family's existing capacities (Strengths)



CANS and Wraparound: Points of connection

- Data-informed planning
- Measurement-based treatment to target
- Accountability
- Promoting transparency
- Teamwork
- Individualization of care





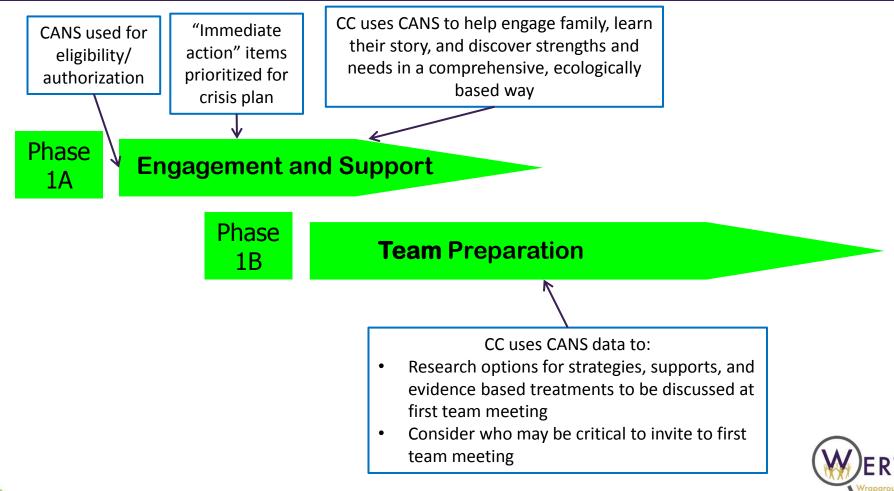
Decision support promoted by CANS

	Family and Youth	Program	System
Decision Support	 Care planning Effective practices Selection of EBPs 	EligibilityStep-downTransition	 Resource Management Right-sizing
Outcome Monitoring	 Service transitions Celebrations Plan of care revision 	 Evaluation of Outcomes 	 Evaluation Provider profiles Performance contracting
Quality Improvement	 Care management Supervision 	Continuous quality improvementProgram redesign	 Transformation Business model design



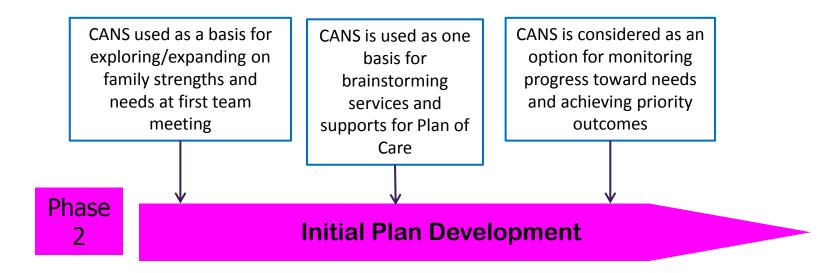


Use of CANS in Wraparound **Phase 1: Engagement and Support**





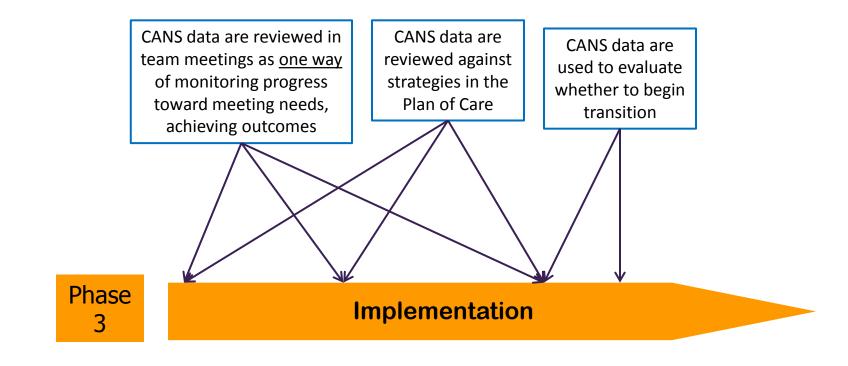
Use of CANS in Wraparound **Phase 2: Plan Development**



National Wraparound



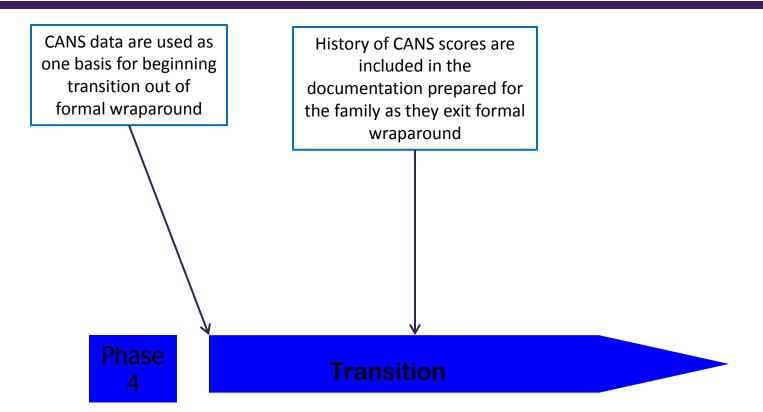
Use of CANS in Wraparound **Phase 3: Implementation**







Use of CANS in Wraparound **Phase 4: Transition**





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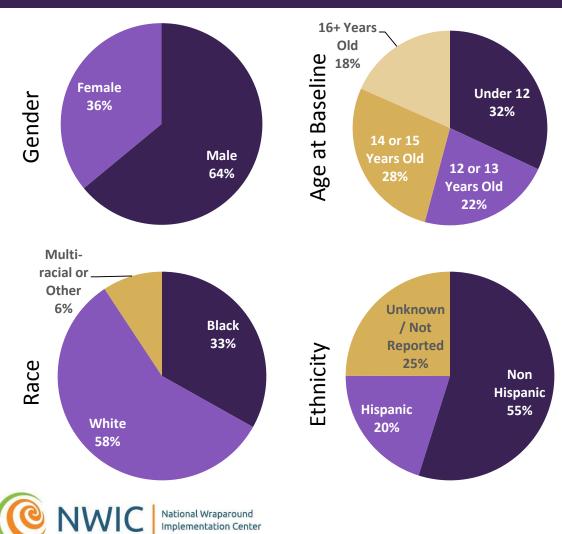
National CANS and Wrap data project:

provide guidance for program and system-level CANS usage

- What are the typical strengths and needs of wraparound-enrolled youth and families?
- What services are needed in service arrays in care management entities (CMEs) and wraparound initiatives?
- What are "benchmarks" for trajectories of improvement on CANS over time?
- What is the variation in CANS profiles across states and sites?



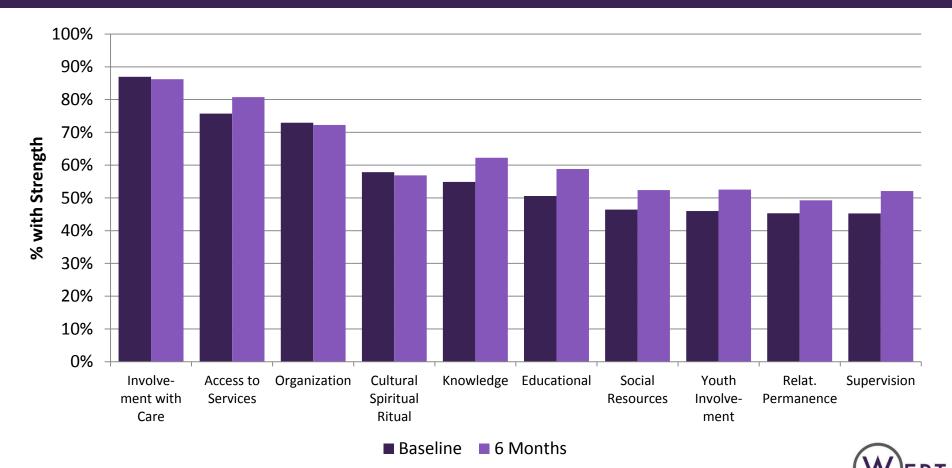
2843 Wraparound youth from 5 states with Baseline and 6 Month CANS



- Average age of 12.2 years
 - Assessments done within 45 days (on either side) of Wraparound enrollment date and 6-months
- Majority of items appear in all four datasets, but may be listed under different domains or modules, therefore data analyzed at an itemlevel

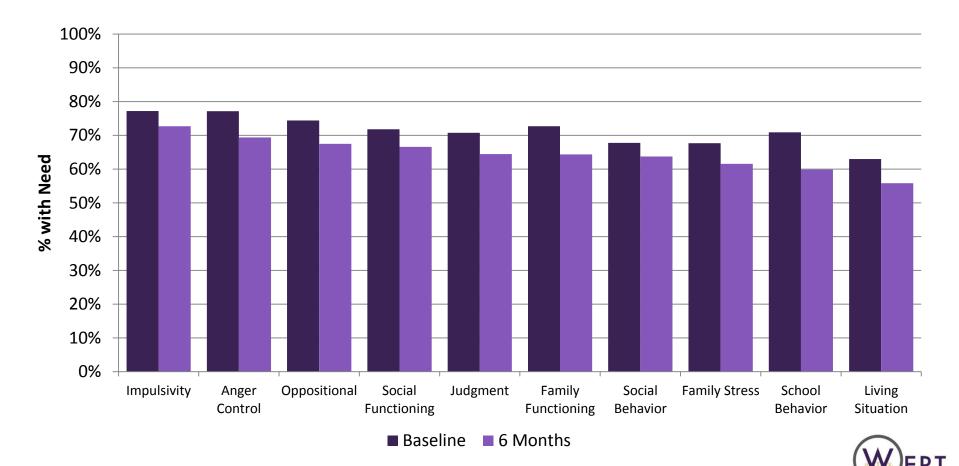


Most prevalent strengths (rated 0 or 1) at Baseline and 6 Months



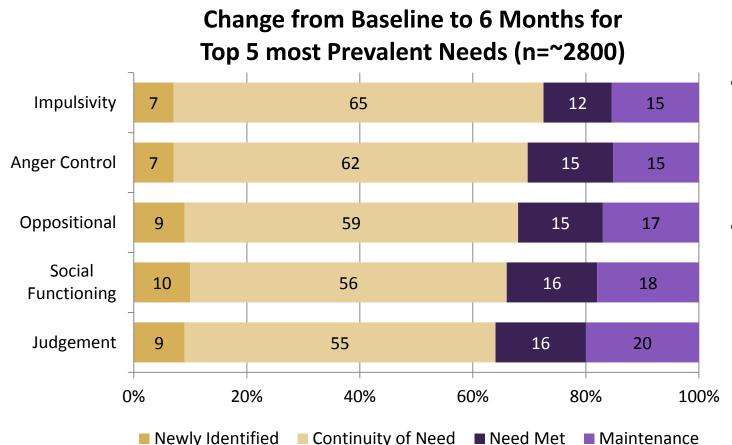


Most prevalent needs (rated 2 or 3) at Baseline and 6 Months





At 6 months, the top 5 most prevalent needs are met for 12-16% of youth

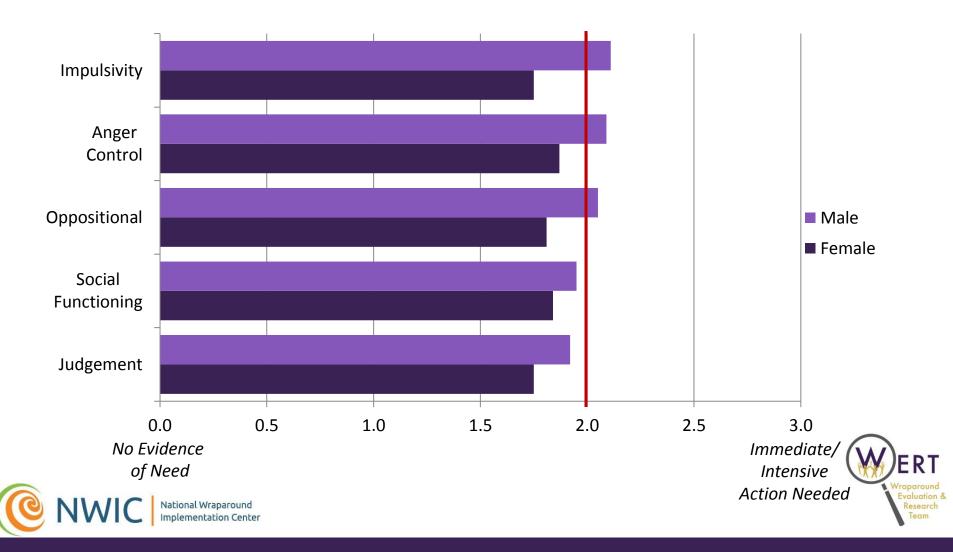


- 10-20% of youth get at least one need met within 6 months
- 7-9% of youth have newly identified needs at 6 months, compared to baseline

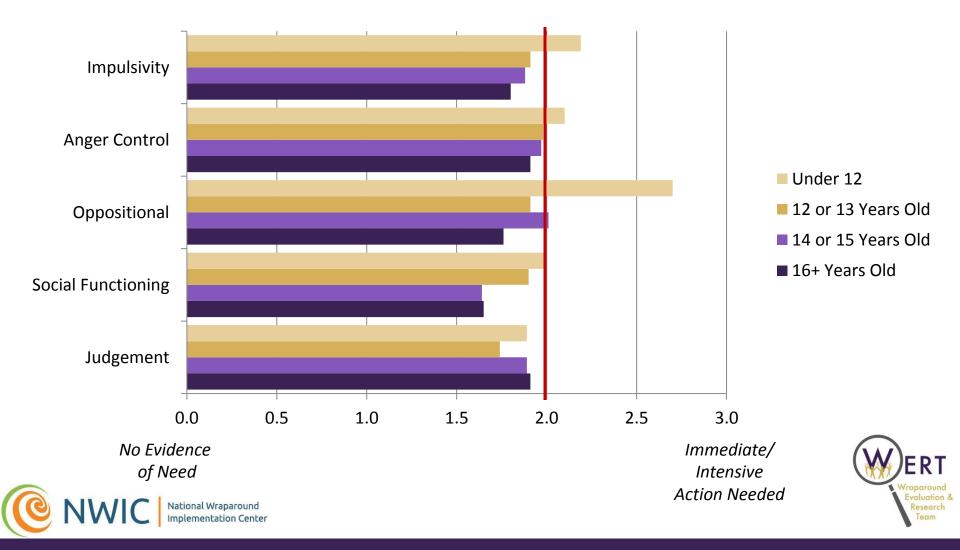


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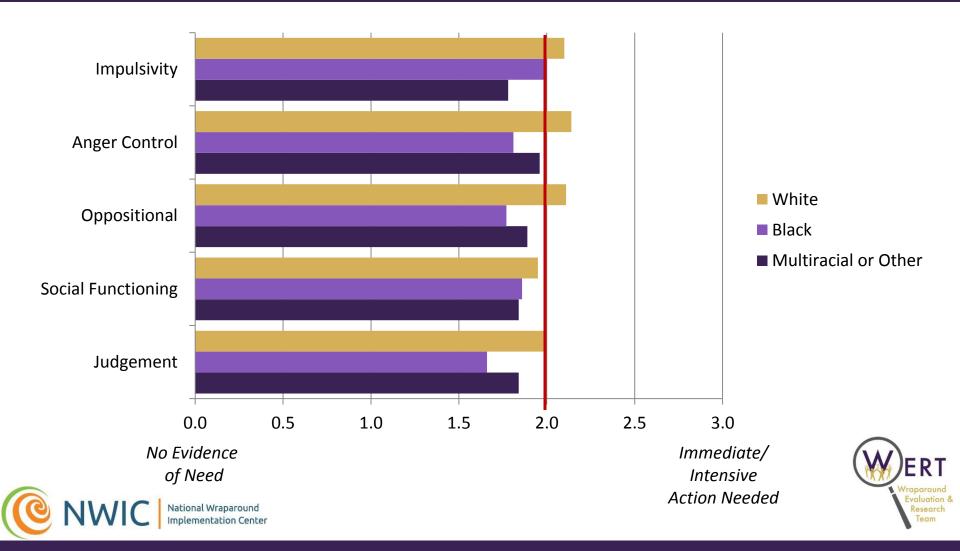
Males have significantly higher needs scores at baseline than females



Younger youth who enter Wraparound have significantly more intense needs



Black and multiracial youth enter Wraparound with significantly lower levels of needs

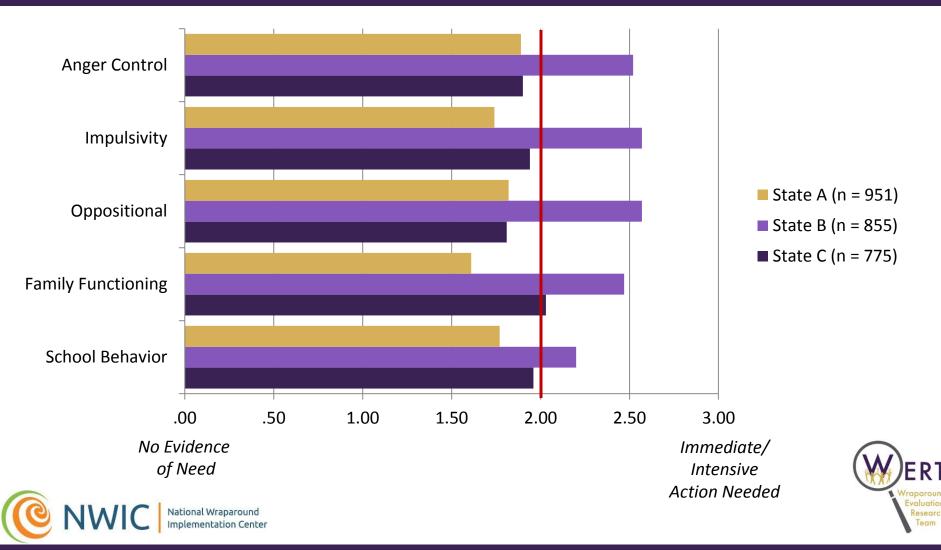


Despite demographic differences, site/state predicts scores a lot more

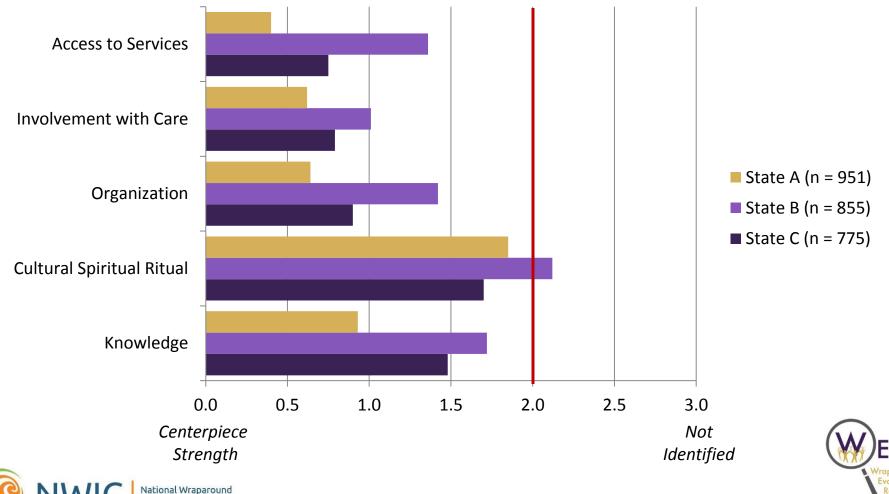
- Preliminary regression analyses indicate that site/state explains more variance in CANS scores than race, age, or gender, combined
 - Differences in CANS implementation may impact scores
- Analysis on data from the three states with the largest samples
 - Each had 700-900 youth with matched baseline and 6-month CANS data; total n = 2581



There are significant differences in intensity of needs by state

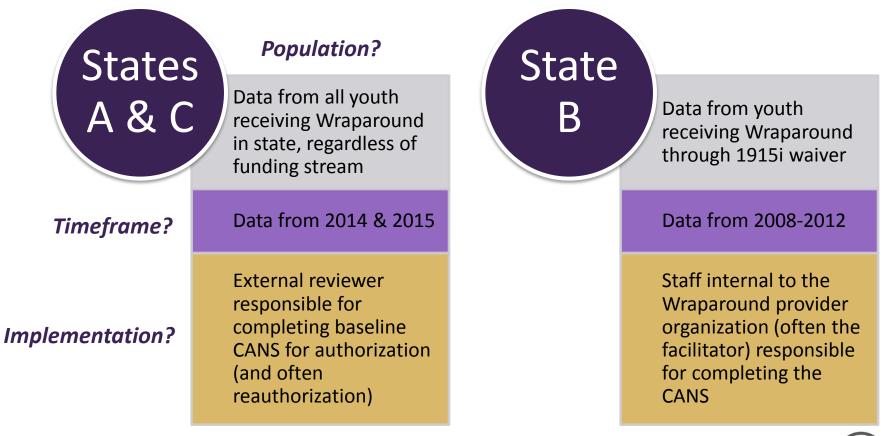


Top strengths are also significantly different across implementation contexts



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What is driving state-level differences?





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Initial implications for systems

- Analyze demographic trends locally to explore and remedy underlying dynamics
 - Is the system racially biased? Are the algorithms? Are there less-intensive alternatives?
- Monitor and foster data integrity
 - Have consistent, possibly external, CANS administrators
 - Consider how CANS implementation and use may impact data
 - Encourage meaningful use of data for practice
 - Feed information back at all levels
 - Incorporate into supervision



Still a lot of un-answered questions and analyses needed

- Can national benchmarks be established?
 Especially given state-level differences
- What accounts for the most variance in scores?
- What amount of change can be expected at 12 months?
- What predicts change over time?
 - Are there particular needs and strengths that are more easily resolved?
- Can youth be categorized into different profiles based on their needs and/or strengths?
 - Do those need/strength clusters predict change?



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