

Proposed IM+CANS Tool Updates from the IM+CANS Workgroup

Workgroup members will vote on these recommendations at the June 29, 2022 meeting. These are not considered official recommendations of the Workgroup until after the vote.

IM+CANS Workgroup Section 1 Recommendations

- Add Alias/Preferred name field
- Add Pronouns field
- Remove Citizenship question
- Change “Sex” to “Sex at Birth” and add Gender Identity field
- Remove Hispanic as an option under Race
- Align demographic options with the DMH registration process to reduce provider administrative burden

IM+CANS Workgroup Section 2 Recommendations

- Clarify definition of “No” for Trauma Exposures to reflect that the information may not yet have been disclosed by the customer.
- Add clarification to the Supporting Information section that indicates other trauma exposures not listed as an item may be described.
- Add clarification to the Supporting Information section that indicates past or current trauma exposures

IM+CANS Workgroup Section 3 Recommendations

- Expand the age of Atypical/Repetitive Behaviors to be a lifespan item (currently 0-5 only)
- Expand the age of Mania to be a 6+ item (currently 21+)
- Expand the age of Intimate Relationships to be a 12+ item to align with Reference Guide (currently 16+ on the tool)
- Move the Communication item from the Life Functioning Domain to the Developmental Disabilities Module
- Remove the Preschool/Daycare Quality item from the School Module

IM+CANS Workgroup Section 4 Recommendations

- Update age ranges of CANS items to match updated Reference Guide from Praed.
- Omit Grave Disability item. This item is covered by other questions in 3a such as different symptom items and in 3b by different life functioning items.
- Potentially move hoarding item to 3b
- Remove bullying others item-covered by conduct/antisocial behavior item in 3a and danger to others item in 4a.
- Add Praed module for Suicide Risk

G. SUICIDE RISK MODULE (To complete when the Suicide Risk item is rated '1', '2' or '3'.)							
SR1. Ideation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SR4. History	<input type="checkbox"/>	<input type="checkbox"/>
SR2. Intent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SR5. Awareness of Others' Suicide	<input type="checkbox"/>	<input type="checkbox"/>
SR3. Planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

- Combine Runaway and Flight Risk and remove age restriction on question

IM+CANS Workgroup Section 5 Recommendations

- Add Addictive Behaviors item (core ANSA item) to Section 3a, Behavioral/Emotional Needs as an age 21+ item.
- Move Section 5, Substance Use History to an Addendum and make it optional.
- Work with DHS-SUPR to align the Substance Use Addendum with SUPR requirements and ASAM to reduce duplication for customers and providers. The proposed addendum should be brought back to the workgroup for review and additional feedback before adoption.

IM+CANS Workgroup Section 7 Recommendations

- Remove Section 7a, Psychiatric Problems – duplicative of other information already collected
- Change the table under Section 7b, General Mental Health History to be a text box; keep “when, where, with whom, reason” as prompts; include inpatient and outpatient history, including what type.
- Update Section 7c, Mental Status:
 - Make appearance and behavior check boxes instead of a text box
 - Add a supporting information box under the mental status check boxes

IM+CANS Workgroup Section 9 Recommendations

- Change “significant life events” to “family events”
- Change “mental illness” to “behavioral health challenges”
- Add a note to indicate this section should include relevant family history/information that is not noted/accounted for elsewhere in the IM+CANS

IM+CANS Workgroup Section 10 Recommendations

- Add Transportation and Substance Use Services
- Remove Mental Health Services - duplicative
- Change “Physical Health” to “Medical Needs”
- Transition to a text box and prompt to capture referrals/linkages as well as referral follow-up to other services/providers
- Move Section 10 closer to the treatment planning portion of the form

IM+CANS Workgroup Section 11 Recommendations

- Consider only collecting DSM-5 or ICD-10 diagnosis to reduce duplication

IM+CANS Workgroup Section 12 Recommendations

- Recommend updating the prompt for this section to make it clearer to providers the type of information that must be documented in this section.

IM+CANS Workgroup Section 13 Recommendations

- Move this section closer to the LPHA signature

IM+CANS Workgroup Section 14 Recommendations

- Recommend removing this section or making this section optional

IM+CANS Workgroup Section 16 Recommendations

- Add a text box to document progress on treatment goals at the end of the section
- Add check box to indicate when new goals have been added to the treatment plan

IM+CANS Workgroup Section 17 Recommendations

- Move the service key to a separate reference page and update the key to align with current available services and policies.
- Ensure the portal and paper version of the tool align to reduce duplication of entry in the online portal
- Create a separate table for non-Medicaid services/interventions. This should include less detail than the Medicaid services/interventions table to only include the necessary information.
- Change Objective column in the table to Goals.
- Update the Mode column in the services table - either build the mode into the service type name or provide clearer guidance on when different modes are allowed; make sure language on what mode represents is consistent across policy and tool.
- Recommend removing the Place of Service column to provide greater flexibility to clinicians based on the customer's clinical needs.