

CHILD AND ADOLESCENT NEEDS AND STRENGTHS (CANS) SAN BERNARDINO

CHECK ONE: Initial CANS Update CANS Transition/Discharge CANS

Date Assessed: 03/24/2016 Child/Youth's Name: Last1202, First1202

Assesment Status: Approved Under 6 Y/O ¹ Over 15 Y/O ²

Date of Birth: 10/11/2001 Age: 16 Medical Record No: ID1202 Program: 36GNCI

Assessor's Name: Vazquez, Deborah Signature: _____

LIFE DOMAIN FUNCTIONING						
0 = no evidence of problems		1 = history, mild				
2 = moderate		3 = severe				
	PV	N/A	0	1	2	3
Family Functioning ³			<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Living Situation			<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Social Functioning			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Recreational			<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Developmental/Intellectual ⁴			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Job Functioning ¹⁵		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Legal			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Decision Making			<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Medical/Physical			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sexual Development ⁵			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Sleep			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
School Behavior ⁶		<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
School Achievement ⁶		<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
School Attendance ⁶		<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

STRENGTHS DOMAIN						
0 = centerpiece		1 = useful				
2 = identified		3 = not yet identified				
	PV	N/A	0	1	2	3
Family Strengths			<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Interpersonal			<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Optimism			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Educational Setting		<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vocational		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Talents/Interests			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Spiritual/Religious			<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cultural Identity			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Community Life			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Natural Supports			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Relationship Permanence ⁷			<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Well-Being			<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Resilience			<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Resourcefulness			<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>

CULTURAL FACTORS						
0 = no evidence of problem		1 = history, mild				
2 = moderate		3 = severe				
	PV	0	1	2	3	
Language		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Traditions and Rituals		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Cultural Stress		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

CAREGIVER STRENGTHS & NEEDS					
Caregiver Assessment(s) Present				YES	
BEHAVIORAL/EMOTIONAL NEEDS					
0 = no evidence of problem		1 = hx or sub-threshold			
2 = signif, meets dx		3 = severe/dangerous			
	PV	0	1	2	3
Psychosis (Thought Disorder)		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Impulsivity/Hyperactivity		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Depression		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Anxiety		<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mania		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Oppositional		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Conduct		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Adjustment To Trauma		<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Attachment Difficulties		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Anger Control		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Eating Disturbances		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Emotional and/or Physical Dysregulation		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Behavioral Regressions		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Somatization		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Substance Use ⁹		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

RISK BEHAVIORS					
0 = no evidence of problem		1 = Hx - Watch/Prevent			
2 = recent - ACT		3 = acute - ACT IMMED.			
	PV	0	1	2	3
Suicide Risk		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Non-Suicidal Self-Injurious Behavior		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Other Self Harm (Recklessness)		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Danger To Others		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sexual Aggression ¹¹		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Runaway ¹²		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Delinquent Behavior ¹³		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fire Setting ¹⁴		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Intentional Misbehavior		<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Exploitation		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Modules 1 » 0 thru 5 2 » TAY 3 » Family Diff. 4 » Dev. Needs (DD) 5 » Sexuality 6 » School 7 » Permanency 8 » Trauma 9 » Subst. Use D/O (SUD) 10 » Violence 11 » Sexually Aggr. Bx. (SAB) 12 » Runaway 13 » Juv. Just. (JJ) 14 » Fire Setting (FS) 15 » Vocational (VOC)

PV = Previous Value of question from most recent previous assessment: display value when different; display blank when not different or when previous value not present.

CHILD AND ADOLESCENT NEEDS AND STRENGTHS (CANS) SAN BERNARDINO

CHECK ONE: Initial CANS Update CANS Transition/Discharge CANS

Date Assessed: 03/24/2016

Child/Youth's Name: Last1202, First1202

Date of Birth: 10/11/2001

Medical Record No: ID1202

Program: 36GNCI

CANS-SB Modules

Early Childhood (EC) Module - 0-5		PV	UK	0	1	2	3		PV	UK	0	1	2	3
Motor				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Substance Exposure			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sensory				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Maternal Availability			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Communication				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Parent or Sibling Problems			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Aggression				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Empathy for the Child			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Regulatory Problems				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Curiosity			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Failure To Thrive				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Playfulness			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
PICA				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Adaptability			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Birth Weight				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Persistence			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Prenatal Care				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Self-Care/Daily Living Skills			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Labor and Delivery				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Transitional Age Youth (TAY) Module		PV	0	1	2	3		PV	0	1	2	3		
Independent Living Skills			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Gender Identity		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		
Residential Stability			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Sexual Orientation		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		
Transportation			<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	Medication Compliance		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		
Parenting Roles			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Educational Attainment		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		
Interpersonal/Social Connectedness			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Vocational/Career		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		
Personality Disorder			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Meaningfulness		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		
Intimate Relationships			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	Victimization		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>		
Family Difficulties (FAM) Module		PV	0	1	2	3		PV	0	1	2	3		
Relationship with Biological Mother Only			<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	Parental/Caregiver Collaboration		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		
Relationship with Biological Father Only			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	Family Communication		<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		
Relationship with Primary Caregiver			<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	Family Role Appropriateness		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		
Relationship Among Siblings			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Family Conflict		<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		
Developmental Needs (DD) Module		PV	0	1	2	3		PV	0	1	2	3		
Cognitive			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Developmental		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		
Communication			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Self-Care Daily Living Skills		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		
Sexuality Module		PV	0	1	2	3		PV	0	1	2	3		
Promiscuity			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	Knowledge of Sex		<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		
Masturbation			<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	Choice of Relationships		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		
Reactive Sexual Behavior			<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	Sexual Exploitation		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>		
School Module		PV	0	1	2	3		PV	0	1	2	3		
Attention - Concentration in School			<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	Depression in School		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>		
Sensory Integration Difficulties In School			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Peer Relations in School		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		
Affect Dysregulation in School			<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	Oppositional in School		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		
Anxiety in School			<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	Conduct in School		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		
Permanency Module		PV	0	1	2	3		PV	0	1	2	3		
Siblings			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Current Living Situation		<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		
Biological/Adoptive Mother			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Grief and Loss		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		
Biological/Adoptive Father			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	Family Identity and Belonging		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>		
Other Significant Adults			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Family Finding		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		

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CHECK ONE: Initial CANS Update CANS Transition/Discharge CANS

Date Assessed: 03/24/2016

Child/Youth's Name: Last1202, First1202

Date of Birth: 10/11/2001

Medical Record No: ID1202

Program: 36GNCI

Trauma Module		PV	0	1	2	3			PV	0	1	2	3
(Characteristics of the Trauma Experience)													
Sexual Abuse *	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>			Natural Disaster	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Physical Abuse	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		Witness to Family Violence	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Emotional Abuse	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		Witness to Community/School Violence	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Neglect	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		Victim/Witness To Criminal Activity	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Medical Trauma	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		Marital/Partner Violence	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Sexual Abuse Expansion - Complete if Sexually Abused													
Emotional Closeness to Perpetrator	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>			Force	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Frequency of Abuse	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		Reaction to Disclosure	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Duration	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Traumatic Stress Symptoms - Complete for All Traumas													
Emotional and/or Physical Dysregulation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>			Numbing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Intrusions/Re-Experiencing	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		Dissociation	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Hyperarousal	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		Avoidance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Traumatic Grief and Separation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		Caregiver Post-Traumatic Reactions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	
Substance Use Disorder (SUD) Module		PV	0	1	2	3			PV	0	1	2	3
Severity of Use	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		Parental Influences	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Duration of Use	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		Environmental Influences	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Stage of Recovery	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		Recovery Community Support	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Peer Influences	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Violence Module		PV	0	1	2	3			PV	0	1	2	3
(Historical Risk Factors)													
History of Physical Abuse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		Witness To Domestic Violence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
History of Violence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		Witness To Environmental Violence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
(Emotional/Behavioral Risks)													
Bullying	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		Paranoid Thinking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Frustration Management	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		Secondary Gains From Anger	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Hostility	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		Violent Thinking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Resiliency Factors													
Awareness of Violence Potential	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		Commitment to Self-Control	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Response to Consequences	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		Treatment Involvement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Sexually Aggressive Bx (SAB) Module		PV	0	1	2	3			PV	0	1	2	3
Relationship	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		Response to Accusation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Physical Force / Threat	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		Temporal Consistency	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Planning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		Hx of Sexually Aggressive Bx (toward others)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Age Differential	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		Severity of Sexual Abuse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Type of Sex Act	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		Prior Treatment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Runaway Module		PV	0	1	2	3			PV	0	1	2	3
Frequency of Running	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		Likelihood of Return on Own	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Consistency of Destination	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		Involvement with Others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Safety of Destination	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		Realistic Expectations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Involvement in Illegal Activities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		Planning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

CHILD AND ADOLESCENT NEEDS AND STRENGTHS (CANS) SAN BERNARDINO

CHECK ONE: Initial CANS Update CANS Transition/Discharge CANS

Date Assessed: 03/24/2016

Child/Youth's Name: Last1202, First1202

Date of Birth: 10/11/2001

Medical Record No: ID1202

Program: 36GNCI

Juvenile Justice (JJ) Module					PV	0	1	2	3						PV	0	1	2	3
History	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						Parental Criminal Behavior	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					
Seriousness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						Environmental Influences	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					
Planning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						Arrests	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					
Community Safety	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						Legal Compliance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					
Peer Influences	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>							<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					
Fire Setting (FS) Module					PV	0	1	2	3						PV	0	1	2	3
History	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						Community Safety	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					
Seriousness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						Response to Accusation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					
Planning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						Remorse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					
Use of Accelerants	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						Likelihood of Future Fire Setting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					
Intention to Harm	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>							<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					
Vocational (VOC) Module					PV	0	1	2	3						PV	0	1	2	3
Job History	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						Job Relations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					
Job Attendance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						Job Skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					
Job Performance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>							<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					

CANS-SB Caregivers Sections

CAREGIVER STRENGTHS & NEEDS

0 = strength/no evidence of prob.

1 = useful/monitor

2 = requires action

3 = req. immed. action

Caregiver Name: Last1369, First1369

Relation: Mother

Caregiver Type: Long-term Identified Caregiver

	PV	0	1	2	3
Supervision		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Involvement with Care		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Knowledge		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Organization		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Social Resources		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Residential Stability		<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Medical/Physical		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mental Health		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Substance Use		<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Developmental		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Safety		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>