

LACKAWANNA COUNTY CHILD AND ADOLESCENT NEEDS AND STRENGTHS (CANS)

A tool for communicating the results of the assessment process and the shared vision between trained professionals and the youth and families they serve



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INTRODUCTION

As children and families need assistance in addressing difficulties, the first step toward helping them involves assessment. A good assessment informs service planning and communicates to the larger system of care about the needs and strengths of the children and their families. Structured assessment tools can guide service delivery for children and adolescents with emotional/behavioral needs, physical or medical needs, developmental or intellectual disabilities, needs related to their environment, and involvement with child welfare or juvenile justice services. The CANS was developed for use by a variety of professionals working with families and not only mental/behavioral health professionals.

The CANS is a tool developed to assist in the management and planning of services to children and adolescents and their families with the primary objectives of permanency, safety, and improved well-being. The CANS is designed for use at two levels – for the individual child and caregiver and for the system of care. The CANS provides a structured assessment of children along a set of dimensions relevant to service planning and decision-making. The CANS further provides information regarding the child and family's service needs for use during *system* planning and/or quality assurance monitoring. Due to its modular design, the tool can be adapted for local applications without jeopardizing its psychometric properties.

The CANS is designed to be used either as a *prospective* assessment tool for decision support during the process of planning services, or a *retrospective* quality improvement tool based on the review of existing information for use in the design of high quality systems of services. This flexibility allows for a variety of innovative applications.

As a *prospective* assessment tool, the CANS structured assessment provides information regarding the service needs of the child and the family for use during the development of the service plan. The assessment tool helps to structure the staffing process in *strengths-based* terms for the service coordinator and the family.

As a *retrospective* quality improvement tool, the CANS provides an assessment of functioning of the current system in relation to the needs and strengths of the child and family. It clearly points out “service gaps” in the current services system. This information can then be used to design and develop the community-based, family focused system of services appropriate for the target population and the community.

Retrospective review of prospectively completed CANS assessment allows for a form of measurement audit to facilitate the reliability and accuracy of information (Lyons, Yeh, Leon, Uziel-Miller & Tracey, 1999).

In addition, the CANS assessment tool can be used by service coordinators and supervisors as a quality assurance/monitoring device. A review of the case record in light of the CANS assessment tool will provide information as to the appropriateness of the service plan and whether individual goals and outcomes are achieved.

The CANS measure can be a communication strategy. Testing of the reliability of the CANS in its applications for developmental disabilities and mental/behavioral health indicates that this measurement approach can be used reliably by trained professionals and family advocates.

Note on Language: Throughout this document, some terms are used interchangeably. The words “child”, “youth”, “young adult,” and “adolescent” all refer to the population of children and youth served by the Lackawanna County human services organizations. The words “parent” and “caregiver” are often also used interchangeably. The CANS can only be used with children older than five years old.

I. OVERVIEW

Six Key Principles of the CANS

1. Items were selected because they are each relevant to service/treatment planning. An item exists because it might lead you down a different pathway in terms of planning actions.
2. Each item uses a 4-level rating system. These levels are designed to translate immediately into action levels. Different action levels exist for needs and strengths.
3. **Ratings should describe the child, not the child in services. If an intervention is present that is masking a need but must stay in place, that is factored into the rating and would result in the rating of an “actionable” need (i.e. 2 or 3).**
4. A good understanding of the child and family’s culture and the child’s developmental level is needed before action levels are established.
5. The ratings are generally “agnostic as to etiology.” In other words, this is a descriptive tool. It is about the “what” not the “why.” Only two terms, Adjustment to Trauma and Intentional Misbehavior/Sanction-Seeking Behavior, have any cause-effect judgments.
6. A 30-day window is used for ratings in order to make sure assessments stay “fresh” and relevant to the child or youth’s present circumstances. However, the action levels can be used to override the 30-day rating period.

Gathering the Information

The more information that can be gathered, the more comprehensive and accurate the assessment will be. Earlier linkages to matching services may lead to prevention and lasting change. The CANS is assembled for information to be gathered primarily through dynamic interactions with child/youth, their caregivers, and individuals with significant involvement in their lives, such as teachers and relatives. Additional information can be gathered through direct observations of the child and through records with the emphasis on the 30-day rating period.

As with any assessment or interview, the method for obtaining information for the ratings should be free-flowing questions which begin as broad and open-ended and become more targeted as individual needs or strengths are identified. Like many assessments, the CANS is normally not meant to be completed in checklist style in one session. As trust is developed between the family and assessor, more information will naturally be provided. Tuning into how the family is processing the questions is useful in pinpointing which topics may be sensitive issues for that particular family and which may require a different or slower approach.

Rating System

When the CANS is administered, each of the items is rated on its own 4-point scale. Completion of a CANS is often helpful at key decision-making or transition points in a case such as during the intake phase. Unless otherwise specified, each rating is based on the last 30 days.

Although each item has a numerical ranking, the CANS assessment tool is designed to give a *profile* of the needs and strengths of the child and the family. **It is not designed for you to “add up” all of the “scores” of the items for an overall score rating**, although such scoring is an option for evaluation applications. When used in a retrospective review of cases, it is designed to give an overall “profile” of the system of services and the gaps in the service system, not an overall “score” of the current system. Used as a profile-based assessment tool, it is reliable and gives the service coordinator, the family, and the agency valuable existing information for use in the development and/or review of the individual plan of care and care service decisions.

The basic design for rating NEEDS is:

A rating of a **0** reflects *no evidence*,
A rating of a **1** reflects a *mild degree*,
A rating of a **2** reflects a *moderate degree*, and
A rating of a **3** reflects a *severe or profound degree*.

Another way to conceptualize these ratings is:

A **0** indicates *no need for action*,
A **1** indicates a *need for watchful waiting to see whether action is needed* (i.e., flag it for later review to see if any circumstances change),
A **2** indicates a *need for action*, and
A **3** indicates the *need for either immediate or intensive action*.

The basic design for rating STRENGTHS is:

A rating of **0** reflects a *significant strength*,
A rating of **1** reflects a *moderate level of strength*,
A rating of **2** reflects a *mild level of strength*, and
A rating of **3** reflects *the strength is not yet present*.

For Strengths, a rating of **0** or **1** reflects a strength that can be used to build around, while a rating of **2** or **3** reflects a strength that needs to be developed or identified.

The rating of **NA** for not applicable should be used in the rare instances where an item does not apply to that particular consumer.

The basic categories of the CANS are as follows: Life Functioning, Youth Strengths, Caregiver Strengths & Needs, Culture, Youth Behavioral/Emotional Needs, Youth Risk Behaviors/Factors, and Trauma Experience.

Coding Definitions

The following section of the CANS focuses on needs related to the different areas in a child and family’s life. Use the ratings **0-3** when rating needs for the youth. Lower numbers are “better” both as strengths and needs. A **0** is a positive indicator of no need.

II. Life Functioning

0	No Evidence	This rating indicates that there is no reason to believe that a particular need exists. It does not state that the need categorically does not exist, it merely indicates that based on current assessment information there is no reason to address this need. For example, “Does Johnny smoke weed?” He says he doesn’t, his mother says he doesn’t, no one else has expressed any concern – does this mean Johnny is not smoking weed? NO, but we have no reason to believe that he does and we would certainly not refer him to programming for substance related problems.
1	Watchful Waiting/Prevention	This level of rating indicates that you need to keep an eye on this area or think about putting in place some preventive actions to make sure things do not get worse. An example is a child who has been suicidal in the past. We know that the best predictor of future behavior is past behavior, and that such behavior may recur under stress, so we’d want to keep an eye on it from a preventive point of view.
2	Action Needed	This level of rating implies that something must be done to address the identified need. The need is sufficiently problematic that it is interfering in the child or family’s life in a notable way.
3	Immediate/Intensive Action/Needed	This level rating indicates a need that requires immediate or intensive effort to address. Dangerous or disabling levels of needs are rated with this level. A child who is not attending school at all or a youth who is acutely suicidal would be rated with a 3 on the relevant need.

1. FAMILY FUNCTIONING - This item rates how the child is functioning within his family. It's recommended that the definition of family come from the child's perspective (i.e., who the child describes as his family). If you do not know this information, then we recommend a definition of family that includes biological relatives and their significant others with whom the child is still in contact.

Conversation Starters: How would describe how the children in the family get along? Are the adults in the family supportive of each other? How would you describe how the children respond to the adults in the family? Is there usually good communication between family members? Do family members respond when someone in the family needs help in any way? How do you show that you care for each other? Are there problems between family members? Has there ever been any violence? How is your family getting along now?

Notes:	Ratings	Anchor Definitions
	0	Child is doing well in relationships with family members.
	1	Child is doing adequately in relationships with family members although some problems may exist. For example, some family members may have some problems in their relationships with child including sibling rivalry or being under-responsive to child's needs.
	2	Child is having moderate problems with parents, siblings and /or other family members. Frequent arguing, difficulties in maintaining any positive relationship may be observed.
	3	Child is having severe problems with parents, siblings and/or other family members. This would include problems of domestic violence, constant arguing, and aggression with siblings.

2. LIVING SITUATION - This item rates how the child is functioning within her living situation. If a child is living with her family, this rating is likely similar to the previous one. However, for children in out-of-home placements, this refers to the child's functioning in her current living arrangement. Detention centers, hospitals, and shelters do not count as living situations. If a child is presently in one of these facilities, rate the previous living situation.

Conversation Starters: How is the youth behaving and getting along in her current living situation?

Notes:	Ratings	Anchor Definitions
	0	No evidence of problems with functioning in current living environment.
	1	Mild problems with functioning in current living situation. Caregiver is concerned about youth's behavior at home.
	2	Moderate to severe problems with functioning in current living situation. Youth has difficulties maintaining her behavior in this setting and this is creating significant problems for others in the residence.
	3	Profound problems with functioning in current living situation. Youth is at immediate risk of being removed from living situation due to her behaviors.

3. SCHOOL - This item rates how the child is functioning within a school setting. For the school items, if the child is receiving special education services, rate the child's performance and behavior relative to their peer group. If it is planned for the child to be mainstreamed, rate the child's school functioning relative to that peer group. If administering the CANS during the summer, rate the previous school year.

Conversation Starters: How is your child doing in school? Has he had any problems? Attendance? Has the teacher or other school personnel called you to talk about your child's behavior or performance.

Notes:	Ratings	Anchor Definitions
	0	Youth is performing well in school.
	1	Youth is performing adequately in school, although some problems may exist.
	2	Youth is experiencing moderate problems with school attendance, behavior, and/or achievement.
	3	Youth is experiencing severe problems in school with school attendance behavior, and/or achievement.

4. SCHOOL BEHAVIOR		
Notes:	Ratings	Anchor Definitions
	0	Youth is behaving well in school.
	1	Youth is behaving adequately in school, although some behavior problems exist.
	2	Youth is having moderate behavioral problems in school. He is disruptive and may have received sanctions, including suspensions.
	3	Youth is having severe problems with behavior in school. He is frequently or severely disruptive. School placement may be in jeopardy due to behavior.

5. SCHOOL ACHIEVEMENT		
Notes:	Ratings	Anchor Definitions
	0	Youth is doing well in school.
	1	Youth is doing adequately in school, although some problems with achievement exist.
	2	Youth is having moderate problems with school achievement. He may be failing some subjects.
	3	Youth is having severe achievement problems. He may be failing most subjects or is more than one year behind same age peers in school achievement.

6. SCHOOL ATTENDANCE		
Notes:	Ratings	Anchor Definitions
	0	Youth attends school regularly.
	1	Youth has some problems attending school but generally goes to school. May miss up to one day per week on average OR may have had moderate to severe problems in the past six months but has been attending school regularly in the past month.
	2	Youth is having problems with school attendance. He is missing at least two days each week on average.
	3	Youth is generally truant or refusing to go to school.

7. SOCIAL FUNCTIONING - This item rates the child's social skills and relationship functioning. This includes age appropriate behavior and the ability to make and maintain relationships during the past 30 days. Social functioning is different from interpersonal skills in that functioning is a description of how the child/youth is doing currently. Strengths are longer term assets. A child with friends may be struggling to get along with them currently.

Conversation Starters: Does your child have a friend or friends? Does your child have any problems getting along with children his/her own age? Do you have concerns about your child's choice of friends?

Notes:	Ratings	Anchor Definitions
	0	Youth has positive social relationships.
	1	Youth is having some minor problems in social relationships.
	2	Youth is having some moderate problems with her social relationships.
	3	Youth is experiencing severe disruptions in her social relationships.

8. RECREATIONAL – This item rates the degree to which a child has identified and utilizes positive leisure time activities. A 0 would be used to indicate a child who makes full use of leisure time activities to pursue recreational activities that support his healthy development and enjoyment.

Conversation Starters: What does your child like to do with his free time? Does he engage in activities that give him pleasure? Does your child engage in activities that are a positive use of his extra time? Does he often claim to be bored or having nothing to do?

Notes:	Ratings	Anchor Definitions
	0	Youth has and enjoys positive recreational activities on an ongoing basis. He makes full use of leisure time activities to pursue recreational activities that support his enjoyment.
	1	Youth is doing adequately with recreational activities although some problems may exist.
	2	Youth his having moderate problems with recreational activities. Youth may experience some problems with effective use of leisure time.
	3	Youth has no access to or interest in recreational activities. Youth has significant difficulties making use of leisure time.

9. PHYSICAL/MEDICAL – This item rates the child’s current physical and medical status. This item is used to identify any physical limitations and could include chronic conditions such as limitations in vision, hearing, or motor skills or illnesses such as diabetes, asthma, cancer, etc. Most transient treatable conditions would be rated as a **1**. Most chronic conditions (e.g. diabetes, severe asthma, HIV) would be rated as a **2**. The rating of **3** is reserved for life-threatening medical conditions or severe physical limitations.

Conversation Starters: Is your child generally healthy? Does she have any medical or physical problems? Does your child have to see a doctor regularly to treat any problems (e.g. asthma, diabetes)? Are there any activities your child cannot do because of a medical condition? Does your child have any physical limitations (such as may be caused by asthma, e.g. child cannot go to gym or child needs an inhaler)? Are there any activities your child cannot do because of a physical condition? How much does this interfere with her life?

Notes:	Ratings	Anchor Definitions
	0	There is no evidence of medical or physical issues that impede functioning.
	1	Youth have some medical issues that require medical treatment and/or some physical condition that places mild limitations on activities. Conditions regarding impaired senses would be rated here. Well managed medical problems like asthma or juvenile diabetes would also be rated here.
	2	Youth has chronic illness that requires ongoing medical intervention and/or youth has a physical condition that notably impacts activities. Sensory disorders such as blindness, deafness, or significant motor difficulties would be rated here.
	3	Youth has life-threatening illness or medical condition, or severe physical limitations due to multiple physical conditions.

10. INTELLECTUAL/DEVELOPMENTAL – This item rates the presence of intellectual disabilities or developmental disabilities. All developmental disabilities occur on a continuum; a child with autism may be rated a 0, 1, 2, or 3 depending on the significance of the disability and the impairment.

Conversation Starters: Does your child’s growth and development seem healthy? Has she reached appropriate developmental milestones (e.g. walking or talking)? Has anyone ever told you that your child may have developmental problems? Has your child developed like other children her age?

Notes:	Ratings	Anchor Definitions
	0	No evidence of developmental problems or intellectual disabilities.
	1	Documented delay, learning disability, or documented borderline intellectual (i.e., IQ 70-85).
	2	Evidence of pervasive developmental disorder including autism, Tourette’s syndrome, Down Syndrome, or other significant developmental delay or child has mild intellectual disability (IQ 50-69).
	3	Youth has moderate or severe developmental delays or profound intellectual disabilities.

11. DECISION MAKING/JUDGEMENT – This item rates the youth’s ability to make decisions. This item should reflect the degree to which a youth can concentrate on issues, think through decisions, anticipate consequences and follow-through on decisions. For example, engaging in risky behavior like high speed car racing, unsupported B.A.S.E jumping, drifting, or other sorts of “daredevil” behavior would be rated as **3**. This would include engaging in risky behavior. For example, hanging out with a group of other youth who are shoplifting would be rated as **1**.

Conversation Starters: Does your child make good choices? Is your child able to anticipate the consequences of his behavior? Does your child think through his decisions like others his age?

Notes:	Ratings	Anchor Definitions
	0	No evidence of problems with judgment or poor decision making that result in harm to the youth’s well being.
	1	History of problems with judgment in which the youth makes decisions that are, in some way, harmful to his development and/or well being. Youth may have some challenges with thinking through problems or concentrating.
	2	Problems with judgment in which the youth makes decisions that are in some way harmful to his development and/or well being. Youth may be struggling with thinking through problems, anticipating consequences or concentrating. Indicates poor decision making that can lead to functional impairment.
	3	Problems with judgment that place the youth at risk of significant physical harm to himself and/or others. Youth is currently unable to make good decisions.

12. LEGAL – This item rates the youth’s level of development with the juvenile justice system. Family involvement with the courts is not rated here – only the identified child’s involvement is relevant to this rating.

Conversation Starters: Has your child ever admitted to you that he has broken the law? Has he ever been arrested? Has he ever been placed in juvenile detention?

Notes:	Ratings	Anchor Definitions
	0	Youth has no known legal difficulties.
	1	Youth has a history of legal problems but is not currently involved with the legal system.
	2	Youth has some legal problems and is currently involved in the legal system.
	3	Youth has serious current or pending legal difficulties that place him at risk for a court-ordered out of home placement.

<p>13. SLEEP - This items rates any problems with sleep, regardless of the cause, including difficulties falling asleep or staying asleep as well as sleeping too much. Bedwetting and nightmares should be considered a sleep issue.</p>		
<p>Conversation Starters: How many hours does your child sleep each night on average? Is this the proper amount for him? How well does your child sleep? Does he have trouble falling asleep or staying asleep? Any nightmares or bedwetting?</p>		
Notes:	Ratings	Anchor Definitions
	0	Youth gets a full night's sleep each night.
	1	Youth has some problems sleeping. Generally, youth gets a full night's sleep but at least once a week problems arise. This may include occasionally waking, bedwetting or nightmares.
	2	Youth is having problems with sleep. Sleep is often disrupted and youth seldom obtains a full night of sleep.
	3	Youth is generally sleep deprived. Sleeping is difficult for the youth and he is not able to get his full night's sleep.

<p>14. SEXUAL DEVELOPMENT/SEXUALITY – This item rates issues with sexuality identity, development and behavior, including developmentally inappropriate sexual behaviors and problematic sexual behaviors. Sexual orientation and gender identity issues could be rated here if they are leading to difficulties for the youth.</p>		
<p>Conversation Starters: Is the child a victim of sexual abuse or acting in a sexually aggressive manner towards others? Does the child experience any inappropriate sexual exposure/behaviors? Are there any signs of sexual disturbance.</p>		
Notes:	Ratings	Anchor Definitions
	0	No evidence of any issues with sexuality.
	1	Mild to moderate issues with sexuality. May include concerns about sexual identity or anxiety about the reactions of others.
	2	Significant preoccupation with sexual identity and/or development that interferes with daily functioning. This could include fear of retaliation (verbally or physically).
	3	Profound issues with sexuality. This level would include youth who are homeless, abandoned, or severely victimized as a result of sexual identity.

15. NATURAL SUPPORTS – This item rates the presence of other people, besides family members and paid providers, in the life of the youth who have demonstrated their ability and willingness to support the youth while they are growing up. To be a natural support one has to be an unpaid individual who has demonstrated the willingness to become involved in the child’s life in a positive and helpful manner. Extended family members who provide support are rated in the Youth Strengths domain under the Social Resources item so this section is strictly non family.

Conversation Starters: Outside of your family, are there people in your child’s life who help them out? How do these individuals help? How often does your child see them? Does your child have friends or mentors in the community who are there to support the child in times of need? Do any non-family members make a significant impact on the child’s life?

Notes:	Ratings	Anchor Definitions
	0	Youth has significant natural supports who contribute to helping support the youth’s healthy development.
	1	Youth has identified natural supports who provide some assistance in supporting the youth’s healthy development.
	2	Youth has some identified natural supports; however, they are not actively contributing to the youth’s healthy development.
	3	Youth has no known natural supports (outside of family and paid caregivers).

III. Youth Strengths

The following section focuses on the child’s strengths, resources, and assets. These are the positive things in the child’s life that can be used to help build a brighter future.

Use the ratings **0-3** when rating strengths for the youth. Lower numbers are “better” both as strengths and needs. As a **0** is a positive indicator of no need, it is also a positive indicator of a significant strength.

Remember: Strengths are not the opposite of needs. Increasing strengths while addressing behavioral/emotional needs leads to better functioning and outcomes than focusing solely on addressing the needs. Identifying the areas where strengths can be built is an important element of service planning.

Families face and overcome difficult times in their lives by using their strategies, not their needs or pathologies.

1. FAMILY – This item rates the presence of a family identity, as well as love and communication among family members. Even families who are struggling often have a firm foundation that consists of a positive sense of family and strong underlying love and commitment to one another. These are the constructs this strength is intended to identify. It is recommended that the definition of family come from the youth’s perspective (i.e., who the youth describes as her family).

Conversation Starters: How do you care about one another in your family? Is there usually good communication? Is this an area that you could use some help to develop?

Notes:	Ratings	Anchor Definitions
	0	Significant family strengths are evident. This level indicates a family with much love and mutual respect for each other. Family members are central in each other’s lives. There is at least one family member who has a strong loving relationship with the child and is able to provide significant emotional and concrete support.
	1	A moderate level of family strengths is present. There is at least one family member with a strong loving relationship who is able to provide limited emotional or concrete support.
	2	A slight level of family strengths is indicated. Family members are known, but currently none are able to provide emotional or concrete support.
	3	There is no evidence of family strengths for this child or there are no known family members.

2. INTERPERSONAL SKILLS – This item rates the child’s social and relationship skills. This item is rated independently of social functioning because a child can have skills but be struggling in his relationships at a particular point in time. Thus this strength indicates long standing relationship making and maintaining skills.

Conversation Starters: Do you feel that your child is pleasant and likeable? Do adults or other children like him/her? Do you feel that your child can act correctly in some social settings?

Notes:	Ratings	Anchor Definitions
	0	Youth has significant interpersonal strengths. He is seen as well liked by others and has significant ability to form and maintain positive relationships. He has multiple close friends and is friendly with others.
	1	Youth has a moderate level of interpersonal strength. He has formed positive interpersonal relationship with peers and other non-caregivers. He may currently have no friends, but has a history of making and maintaining friendships with others.
	2	Youth has a minimal level of interpersonal strengths. He has some social skills that facilitate positive friendships with others, but may not have any current healthy relationships.
	3	Youth has no known interpersonal strengths. He currently does not have any friends nor has he had any friends in the past.

3. EDUCATIONAL – This item rates the strengths of the school setting, and may or may not reflect any specific educational skills possessed by the youth. Certainly a young person who loves and excels at school would be rated as having this strength. However, this item predominantly refers more to the nature of the school’s relationship to the child and family and the level of support the child is receiving from the school. A rating of a **2** is appropriate if the youth is attending school but the school is not providing appropriate support.

Conversation Starters: Is your child’s school an active partner in figuring out how to best meet your child’s needs? Does your child like school? Has there been at least one year in which he did well in school? When has your child been at his best in school?

Notes:	Ratings	Anchor Definitions
	0	School works closely with youth and family to identify and successfully address youth’s educational needs (effective advocate) OR youth excels in school.
	1	School works with youth and family to identify and address youth’s educational needs OR youth likes school.
	2	School is currently unable to adequately address youth’s academic and/or behavioral needs.
	3	School is unable and/or unwilling to work to identify and address youth’s needs.

4. VOCATIONAL – This item rates the youth’s level of vocational skill. Vocational strengths are rated independent of functioning (a youth can have considerable strengths but not be doing well at the moment). Developing vocational skills and having a job is a significant indicator of positive outcomes in adult life. Working to build such skills would become an important part of a service plan for a teen.

Conversation Starters: Does your child know what she wants to be “when they grow up?” Has she ever worked? Does she have plans to go to college or vocational school? Does she have a career plan?

Notes:	Ratings	Anchor Definitions
	0	Youth has vocational skills and relevant work experience.
	1	Youth has some vocational skills or work experience.
	2	Youth has some prevocational skills or vocational interests.
	3	No vocational skills identified.

5. TALENTS/INTEREST – This item rates the youth’s involvement in hobbies, skills, artistic interests and talents that are positive ways that youth can spend time and also give them pleasure and a positive sense of themselves. A youth who likes to collect car stereos without paying for them may need some assistance in developing other interests such as learning to fix his friends car stereos. This rating should be based broadly on any talent or creative or artistic skills a youth may have including art, theater, music, athletics, and so forth.

Conversation Starters: What are your child’s talents or interests or hobbies? What are the things that your child enjoys or does particularly well?

Notes:	Ratings	Anchor Definitions
	0	This level indicates a youth who receives a significant amount of personal benefit such as pleasure and/or self esteem from activities surrounding a talent.
	1	Youth has a talent or interest with the potential to provide him with pleasure and self-esteem. For example, a youth who is involved or interested in athletics or plays a musical instrument would be rated here.
	2	Youth has identified interests but needs assistance converting those interests into a talent or hobby.
	3	Youth has no identified talents or interests.

6. SPIRITUAL/RELIGIOUS – This item rates the child (and family’s) experience of receiving comfort and support from religious or spiritual involvement. This is the most controversial item in the category of youth strengths in terms of peoples comfort levels. This item rates the presence of beliefs that could be useful to the youth; however, an absence of spiritual/religious beliefs does not represent a need for a youth. A **0** on this item indicates that the child (and the family’s) spiritual/religious beliefs and practices are a comfort and significant source of support. For example, a child who is very involved in her church youth group which gives her a sense of belonging and in which she has many friends.

Conversation Starters: Are you involved with a religious community? Is your child involved? Do you have spiritual beliefs that provide comfort? Does your child have spiritual beliefs that provide comfort?

Notes:	Ratings	Anchor Definitions
	0	This level indicates a youth with strong religious and spiritual strengths. The youth may be very involved in a religious community or may have strongly held spiritual/religious beliefs that can sustain or comfort her in difficult times. Her beliefs and practices are a comfort and significant source of support.
	1	This level indicates a youth with some religious and spiritual strength. The youth may be involved in a religious community.
	2	This level indicates youth with little spiritual or religious institutions. She may be expressing some interest in religious or spiritual belief and practices.
	3	This level indicates a youth with no known spiritual or religious beliefs or strengths, involvement, or interest in involvement.

7. COMMUNITY CONNECTION – This item rates the youth’s connection to his community. Youth with a sense of belonging and a stake in their community do better than youth who don’t. A rating of a **2** is appropriate if the youth is living in a community but not connected to any people or institutions in that community. Youth who have moved a lot or who have been in multiple foster care settings may have lost this sense of connection to community life and so might be rated a **3**. If the youth is out of the community (e.g. in a residential facility) that would also be rated a **3**. This item refers to involvement in community institutions (e.g. sports teams, community centers, spiritual/religious institutions, friendship and extended family networks in the community).

Conversation Starters: Is your child and family active in a community? Is he a member of a community organization or group? Do you feel that your family is a part of a community? Are there things that you do in your community?

Notes:	Ratings	Anchor Definitions
	0	Youth is closely connected and involved in his community. He is a member of community organizations and has other positive ties to the community.
	1	Youth is somewhat involved with his community. This level indicates a youth with significant community ties although they may be relatively short-term (i.e. past year).
	2	This level indicates a youth with limited ties and/or supports from the community.
	3	This level indicates a youth with no known ties or supports from the community to which he is a member. Youth who have moved a lot might be rated here.

<p>8. RELATIONSHIP PERMANENCE – This item rates the stability of significant relationships in the youth’s life. Significant relationships likely include family members but may also include other individuals. This item identifies whether parents or other adults have been a consistent part of the child’s life <i>regardless of the quality</i> of that relationship.</p>		
<p>Conversation Starters: Does your child have relationships with adults that have lasted a lifetime? Is she in contact with both parents? Are there relatives in your child’s life with whom she has long lasting relationships?</p>		
Notes:	Ratings	Anchor Definitions
	0	Youth has very stable relationships. Family members, friends, and community have been stable for most of her life and are likely to remain so in the foreseeable future. Youth is involved with both parents.
	1	Youth has had stable relationships but there is some concern about instability in the near future (one year) due to transitions, illness, or age. A stable relationship with only one parent may be rated here.
	2	Youth has had at least one stable relationship over her lifetime but has experienced other instability through factors such as divorce, moving, removal from home, or death.
	3	Youth does not have any stability in relationships. Independent living or adoption must be considered.

<p>9. HOPEFULNESS/OPTIMISM – This item rates the child’s sense of future orientation. Research indicates that children and youth with a solid sense of themselves and their future have better outcomes than those who do not.</p>		
<p>Conversation Starters: Does your child have a generally positive outlook on things; have things to look forward to? Does she have plans for the future? Is she forward looking and see herself as likely to be successful?</p>		
Notes:	Ratings	Anchor Definitions
	0	Youth has a strong and stable optimistic outlook on her life.
	1	Youth is generally optimistic.
	2	Youth has difficulty maintaining a positive view of herself and her life. She may vary from overly optimistic to overly pessimistic.
	3	Youth has difficulties seeing any positives about herself or her life.

IV. Caregiver Strengths & Needs

The items in this domain represent potential areas of need for caregivers while simultaneously highlighting the areas in which the caregivers can be a resource for the child.

In general, it is recommended that the caregiver or caregivers with whom the child is currently living is rated. If the child has been placed, then focus on the caregiver(s) to whom the child will be returned. Each child's situation will be different and will need to be carefully assessed and there might be times that it would be appropriate to rate several sets of caregivers.

If the child is currently in a congregate care setting, such as a hospital, shelter, group home or residential treatment facility it would be more appropriate to rate the community caregivers where the child will be placed upon discharge from congregate care. If there is NO community caregiver identified, this section offers a rating of **NA** for situations or matters that are not applicable and therefore would not require a rating. Similarly, if a young person is living independently of any caregiver, then all of these items would be rated as not applicable, **NA**.

For situations in which a child has multiple caregivers, it is recommended to rate based on the needs of the set of caregivers as they affect the child. For example, the supervisory capacity of a father who is not involved in monitoring or disciplining of the child may not be relevant to the ratings. Alternatively, if the father is responsible for the child(ren) because he works the first shift and the mother works the second shift, then his skills should be factored into the ratings of the child's supervision.

- 0** No evidence of problems OR this may be a strength*
- 1** Let's watch, mild
- 2** Help needed, moderate
- 3** Immediate help needed, severe

*The following five items can be identified as a strength/resource or a need:

Supervision
Involvement with Care
Knowledge
Organization
Social Resources

These five items are an exception to the statement that the absence of a strength does not mean that there is a need present. For these five items, when there is an absence of a strength, you will be addressing the correlating need.

1. SUPERVISION – This item rates the caregiver’s ability to provide monitoring and discipline to their child. Discipline is defined in the broadest sense as all of the things that parents/caregivers can do to promote positive behavior with their child. A mother who reports frequent arguments with her teenage son, who is not following house rules, is staying out all night, and who may be using drugs or alcohol may be rated a **2**. Supervision also includes the caregiver’s ability to access appropriate childcare.

Conversation Starters: How do you feel about your ability to keep an eye on and discipline your child/children? Do you think you might need some help with these issues?

Notes:	Ratings	Anchor Definitions
	0	No evidence of a need in this area OR the caregiver has good monitoring and disciplining skills.
	1	Caregiver provides generally adequate supervision. May need occasional help or technical assistance.
	2	Caregiver reports difficulties monitoring and/or disciplining child. Caregiver needs assistance to improve supervision skills. Caregiver who has limited access to childcare services would be rated here.
	3	Caregiver is unable to monitor or discipline child. Caregiver requires immediate and continuing assistance. Child is at risk of harm due to absence of supervision. Caregiver who has no access to childcare services would be rated here.

2. INVOLVEMENT WITH CARE – This item rates the extent to which the caregiver(s) is able to give input and take part in their child’s treatment planning. A **0** on this item is reserved for caregivers who are able to advocate for their child. This requires both knowledge of their child as well as their rights, options, and opportunities. A **1** is used to indicate caregivers who are willing participants with service provisions but may not yet be able to serve as advocates for their child.

Conversation Starters: How do you feel about being involved in services for your child? Do you feel comfortable being an advocate? Would you like any help to become more involved?

Notes:	Ratings	Anchor Definitions
	0	No evidence of a need in this area OR the caregiver is actively involved in the planning and/or implementation of services and is able to be an effective advocate on behalf of the youth.
	1	Caregiver is consistently involved in the planning and/or implementation of services for the youth but is not an active advocate on behalf of the youth.
	2	Caregiver is minimally involved in the care of their youth. Caregiver may visit their youth when in out of home placement, but does not become involved in service planning and implementation.
	3	Caregiver is uninvolved with the care of the youth. Caregiver may want youth out of the home or fails to visit youth when in placement.

3. KNOWLEDGE – This item rates the level of knowledge the caregiver(s) has regarding their child’s needs and strengths. This item is perhaps the one most sensitive to issues of cultural competence. We recommend thinking of this item in terms of whether making additional information available to the caregiver(s) would help them in being more effective in working with their child.

Conversation Starters: Do you feel comfortable with what you know about your child’s strengths and needs? Have professionals told you things about your child but you didn’t understand what they were trying to say? Are there areas about which you would like to know more?

Notes:	Ratings	Anchor Definitions
	0	No evidence of a need in this area OR the caregiver is knowledgeable about the child’s needs and strengths.
	1	Caregiver is generally knowledgeable about the child but may require additional information to improve their capacity to parent.
	2	Caregiver has a clear need for information to improve how knowledgeable they are about the child. Current lack of information is interfering with their ability to parent.
	3	Caregiver has no knowledge of problems that place the child at risk of significant negative outcomes.

4. ORGANIZATION - This item rates the caregiver’s ability to organize and manage their household in the face of parenting a child(ren) with significant needs. Parents who need help organizing themselves and/or their family would be rated a **2** or **3**.

Conversation Starters: Do you think you need or want help with managing your home? Do you have difficulty getting to appointments or managing a schedule?

Notes:	Ratings	Anchor Definitions
	0	No evidence of a need in this area OR the caregiver is well organized and efficient.
	1	Caregiver has minimal difficulties with organizing and maintaining household to support needed services. For example, they may be forgetful about appointments or occasionally fail to return provider’s calls.
	2	Caregiver has moderate difficulty organizing and maintaining household to support needed services.
	3	Caregiver is unable to organize household to support needed services.

5. SOCIAL RESOURCES - This item rates the presence of people in the caregiver's life who have demonstrated their ability and willingness to support the caregiver in times of need. Families often rely on social supports to help out in times of need. This item is used to rate the availability of these supports.

Conversation Starters: Do you have enough of what you need to take care of your family's needs? Do you have family members or friends who can help you when you need it?

Notes:	Ratings	Anchor Definitions
	0	No evidence of a need in this area OR the caregiver has a significant family and friend social network that actively helps in times of need (e.g. child rearing).
	1	Caregiver has some family or friend social network that actively helps in times of need (e.g. child rearing).
	2	Caregiver has limited family or friend social network that may be able to help in times of need (e.g. child rearing).
	3	Caregiver has no family or friend social network that may be able to help in times of need (e.g. child rearing).

6. RESIDENTIAL STABILITY - This item rates the housing stability of the caregiver and should not reflect whether the child might be placed outside of the home. A **3** indicates problems of recent homelessness. A **2** indicates concerns about instability in the immediate future. A family having difficulty paying utilities, rent or a mortgage might be rated as a **1**.

Conversation Starters: Is your current housing situation stable? Do you have any concerns that you might have to move in the near future?

Notes:	Ratings	Anchor Definitions
	0	Caregiver has stable housing for the foreseeable future.
	1	Caregiver has relatively stable housing but either has moved in the past three months or there are indications of housing problems that might force them to move in the next three months.
	2	Caregiver has moved multiple times in the past year. Housing is unstable.
	3	Caregiver has experienced periods of homelessness in the past six months.

7. INTELLECUTAL/DEVELOPMENTAL - This item rates the presence of intellectual disabilities and developmental disabilities among caregivers. A parent with limited cognitive capacity that challenges their ability to provide parenting would be rated here. Like the Intellectual/Developmental item for children and youth, rating on this item should be restricted to the identification of developmental disabilities (i.e. intellectual disabilities and other disabilities) and does not refer to a broad spectrum of developmental issues (e.g. aging is not rated here).

Conversation Starters: Has anyone ever told you that you may have developmental problems that make parenting/caring for your child more difficult?

Notes:	Ratings	Anchor Definitions
	0	Caregiver has no developmental needs.
	1	Caregiver has some developmental delays or intellectual disabilities but they do not currently interfere with parenting.
	2	Caregiver has developmental delays or mild intellectual disabilities that interfere with their capacity to parent.
	3	Caregiver has severe and pervasive developmental delays or profound intellectual disabilities that make it impossible for them to parent at this time.

8. SAFETY - This item rates the presence of individuals in the home who present a danger to the child. This item does not describe situations in which the caregiver is unable to prevent a child from hurting himself despite well-intentioned efforts. A 2 or 3 on this item requires child protective services involvement. This is a flag for child protective services, an indicator of abuse or neglect. This item does not refer to the safety of the physical environment in which the child lives (e.g. broken or loose staircase).

Conversation Starters: Is your household safe? Any history of abuse or neglect?

Notes:	Ratings	Anchor Definitions
	0	This rating indicates no risk to the safety of the youth.
	1	This rating indicates that there is risk of neglect or exposure to individuals who could harm the youth.
	2	This rating indicates that the youth is in some danger of abuse or exposure to individuals who could harm the youth.
	3	This rating indicates that there is significant risk to the well-being of the youth. Risk of harm is imminent and immediate.

9. FAMILY STRESS - This item rates the impact the child’s challenges place on the family system. A child with very high needs or one that engages in specific behavior that is very disruptive to a family can create a substantial amount of family stress.

Conversation Starters: Do you find it stressful at times to manage the challenges you experience when it comes to dealing with your child’s needs? Do you find it hard to manage at times? Does your stress ever interfere with your ability to care for your child? If so, does it ever reach a level that you feel like you can’t manage it?

Notes:	Ratings	Anchor Definitions
	0	Caregiver is able to manage the stress of child/children’s needs.
	1	Caregiver has some problems managing the stress of child/children’s needs.
	2	Caregiver has notable problems managing the stress of child/children’s needs. This stress interferes with their capacity to give care.
	3	Caregiver is unable to manage the stress associated with their child(ren)’s needs. This stress prevents caregiver from parenting.

V. Culture/Acculturation

<p>1. LANGUAGE – This item looks at whether the child and family need to communicate with you or others in English. This item includes both written and spoken language, as well as American Sign Language.</p>		
<p>Conversation Starters: Do you or anyone in your identified family speak a language other than English? Which language(s) are you or they most comfortable with? Do you or they have any trouble understanding English?</p>		
Notes:	Ratings	Anchor Definitions
	0	Youth and family speak English well and/or there is no need for translator or interpreter services.
	1	Youth and family speak some English, but potential communication problems exist because of limited vocabulary or understanding of the nuances of the language OR there is evidence of vocabulary or literacy limitations but adaptive services are available or sufficient.
	2	Youth and/or significant family members do not speak English. Translator, interpreter, or native language speaker is needed for successful intervention but a qualified individual can be identified within the family's natural supports OR documents must be adapted into alternative formats (i.e. Braille, audio-tapes) and are immediately available to the family.
	3	Youth and/or significant family members do not speak English. Translator, interpreter, or native language speaker is needed for successful intervention, but no such individual is available from among family's natural support system OR documents must be adapted into alternative formats (i.e. Braille, audio-tapes) and are not immediately available to the family.

<p>2. IDENTITY – This item refers to the youth’s struggle with her membership in a specific cultural group. This cultural group may be defined by a number of factors including race, religion, ethnicity, sexual orientation or identity, geography, lifestyle or other groups associated with adolescent subculture.</p>		
<p>Conversation Starters: How would your child describe his culture? Does he need help identifying what his culture is? Does he feel he has an opportunity to express his background in his life? Does he need help understanding or accepting aspects of his cultural identity? Do other people in his life have issues with his cultural identity?</p>		
Notes:	Ratings	Anchor Definitions
	0	Youth has a clear and consistent cultural identity and is connected to adequate age-appropriate and culturally relevant support systems.
	1	Youth is experiencing some confusion or concerns regarding cultural identity but natural supports are identified and are willing/able to assist the youth with this process.
	2	Youth has significant struggles with her own cultural identity. Youth may have cultural identity but lacks positive connections with others who share the same cultural identity.
	3	Youth feels no connection to any culture or is experiencing significant problems due to conflict regarding her cultural identity, which interferes with functioning in some aspect(s) of her life.

<p>3. CULTURAL STRESS – This item refers to experiences and feelings of discomfort and/or distress arising from friction (real or perceived) between a youth’s own cultural identity and the predominant culture in which she lives. Racism is a form of cultural stress, as are all forms of discrimination. For example, if you’re being discriminated against because you’re gay or lesbian, because you have a physical anomaly, or because you have a developmental challenge or a mental health need, those would all be cultural stress.</p>		
<p>Conversation Starters: Does your child experience any stress in your life related to his culture, identity or rituals? Does he ever feel discriminated against? Does he experience any stress in his life related to his culture, identity or rituals? Tell me a little more about that.</p>		
Notes:	Ratings	Anchor Definitions
	0	No evidence of stress between the youth’s cultural identity and current living situation.
	1	Some mild or occasional stress resulting from friction between the youth’s identity and her current living situation.
	2	Youth is experiencing cultural stress that is causing problems of functioning in at least one life domain. Youth needs to learn how to manage cultural stress.
	3	Youth is experiencing a high level of cultural stress that is making functioning in any life domain difficult under the present circumstances. Youth needs immediate plan to reduce cultural stress.

VI. Youth Behavioral/Emotional Needs

This domain relates to information regarding a child’s behavioral and emotional issues. Diagnosis is not important in rating these items, as you are only rating symptoms and behaviors. When rating these items, it is important to take the child’s development into account.

The CANS is meant to be used by assessors across systems and consequently one does not have to be a mental health professional to score these items. Remember, the service coordinator is describing the “what,” not the “why.” Scores on these items should not be interpreted as a mental health diagnosis.

1. PSYCHOSIS – This item rates symptoms of psychiatric disorders with a known neurological base. Diagnostic and Statistical Manual (DSM) – IV – TR disorders included on this dimension are schizophrenia and psychotic disorders (unipolar, bipolar, NOS). The common symptoms of these disorders include hallucinations, delusions, unusual thought processes, strange speech, and bizarre/idiosyncratic behavior.

Conversation Starters: Has your child ever talked about hearing, seeing or feeling something that you did not believe was actually there? Has your child ever done strange or bizarre things of which you could make no sense. Does your child have strange beliefs about things? Has anyone ever told you that your child has a thought disorder or a psychotic condition?

Notes:	Ratings	Anchor Definitions
	0	No evidence.
	1	History or suspicion of hallucinations, delusions, or bizarre behavior that might be associated with some form of psychotic disorder.
	2	This rating indicates a youth with evidence of moderate disturbance in thought processes or content. The youth may be somewhat delusional or have brief or intermittent hallucinations. The youth’s speech may be quite tangential or illogical at times.
	3	This rating indicates a youth with severe psychotic disorder. The youth frequently experiences symptoms of psychosis and frequently has no reality assessment. There is evidence of ongoing delusions or hallucinations or both. Command hallucinations would be rated here.

2. IMPULSIVITY/HYPERACTIVITY- This item rates the child or adolescent’s level of impulsiveness or hyperactivity. The types of disorders included within this item are attention deficit/hyperactivity disorder (ADHD) and disorders of impulse control.

Conversation Starters: Is your child able to sit still for any length of time? Does s/he have trouble paying attention for more than a few minutes? Is your child able to control him/herself? Have other people told you that your child is hyper?

Notes:	Ratings	Anchor Definitions
	0	No evidence.
	1	Some problems with impulsive, distractible or hyperactive behavior that places the youth at risk of future functioning difficulties.
	2	Clear evidence of problems with impulsive, distractible, or hyperactive behavior that interferes with the youth’s ability to function in at least one life domain.
	3	Clear evidence of a dangerous level of impulse behavior that places the youth at risk of physical harm.

3. DEPRESSION - This item rates any symptoms of depression which may include sadness or irritable mood most of the day nearly every day, changes in eating and sleeping, loss of motivation, and withdrawal from activities that were once of interest.

Conversation Starters: Do you think your child is depressed or irritable? Has s/he withdrawn from normal activities? Does your child seem lonely or not interested in others? Has your child been slower to engage? Does your child seem sad or unable to enjoy activities as before?

Notes:	Ratings	Anchor Definitions
	0	No evidence.
	1	History or suspicion of depression or mild to moderate depression associated with a recent negative life event with minimal impact on life functioning. Brief duration of depression, irritability, or impairment of peer, family, or academic function.
	2	Clear evidence of depression associated with either depressed mood or significant irritability. Depression has interfered significantly with youth’s ability to function in at least one life domain.
	3	Clear evidence of disabling level of depression. This would include a child who stays at home or in bed all day due to depression or one whose emotional symptoms prevent any participation in school, friendship, groups or family life.

4. ANXIETY – This item rates the child’s level of fearfulness, worrying, or other characteristics of anxiety. Anxiety disorders are characterized by either a constant sense of worry or dread or “out of the blue” panic attacks in which the child or adolescent becomes terrified of losing control, dying, or going “crazy.” A **1** is used to indicate a child or adolescent who has some problems with anxiety or worrying or may have had a single panic attack in the past six months. A **2** would indicate a child who has had repeated panic attacks or who fits the criteria for a generalized anxiety disorder. A **3** would indicate such a level of anxiety as to put the child at some physical risk.

Conversation Starters: Does your child have any problems with anxiety or fearfulness? Is s/he avoiding normal activities out of fear? Does your child act frightened or afraid? Does your child worry a lot?

Notes:	Ratings	Anchor Definitions
	0	No evidence.
	1	History or suspicion of anxiety problems or mild to moderate anxiety associated with a recent negative life event. This level is used to rate either a mild phobia or anxiety problems or a sub-threshold level of symptoms for the other listed disorders.
	2	Clear evidence of anxiety associated with either anxious mood or significant fearfulness. Anxiety has interfered significantly in youth’s ability to function in at least one life domain.
	3	Clear evidence of debilitating level of anxiety that makes it virtually impossible for the youth to function in any life domain.

5. OPPOSITIONAL – This item rates the child or adolescent’s relationship to authority figures. Generally oppositional behavior is in response to conditions set by a parent, teacher, or other figure with responsibility for and control over the child or youth. A **0** is used to indicate a child or adolescent who is generally compliant, recognizing that all children and youth fight authority some. A **1** is used to indicate a problem that has started recently (in the past six weeks) and has not yet begun to cause significant functional impairment or a problem that has begun to be resolved through successful intervention. A **2** would be used to indicate a child or adolescent whose behavior is consistent with oppositional defiant disorder (ODD). A **3** should be used only for children and adolescents whose oppositional behavior puts them in some physical peril.

Conversation Starters: Does your child do what you ask him/her to do? Has a teacher or other adult told you that your child does not follow rules or directions? Does your child argue with you when you try to get them to do something?

Notes:	Ratings	Anchor Definitions
	0	No evidence.
	1	This rating indicates a history or mild problems with compliance with some rules or adult instructions. Child may occasionally talk back to teacher, parent/caregiver, there may be letters or calls from school.
	2	This rating indicates that the youth has moderate problems with compliance with rules or adult instructions.
	3	This rating indicates that the child/adolescent has severe problems with compliance with rules or adult instructions. Youth rated at this level would be virtually always noncompliant and repeatedly ignore authority.

6. CONDUCT BEHAVIORS – This item rates the degree to which a child or adolescent engages in behavior that is consistent with the presence of a conduct disorder. These symptoms include antisocial behaviors like shoplifting, lying, vandalism, cruelty to animals and assault. Although the actual prevalence is not known, it is believed that conduct disorder occurs in 1% to 3% of children and adolescents. This is the disorder that is the childhood equivalent to antisocial personality disorder in adults. For an adult to have antisocial personality disorder it requires that they had a conduct disorder as a youth. Most youth with conduct disorder do not grow up to be adults with antisocial personalities.

Conversation Starters: Is your child honest? How does your child handle telling the truth/lie? Has anyone told you that your child has been part of any criminal behavior? Has your child ever shown violent or threatening behavior towards others? Has your child ever intentionally hurt animals or set fires?

Notes:	Ratings	Anchor Definitions
	0	No evidence.
	1	This rating indicates a history or mild level of conduct problems. The youth may have some difficulties in school and home behavior. This might include occasional truancy, repeated severe lying, or petty theft from family.
	2	This rating indicates a youth with a moderate level of conduct disorder. This could include episodes of planned aggressive or other antisocial behavior.
	3	This rating indicates a child with a severe conduct disorder. This could include frequent episodes of unprovoked, planned aggressive or other antisocial behavior that places the youth or community at significant risk of physical harm due to her behavior.

7. ADJUSTMENT TO TRAUMA – This item rates the level of difficulty the child or adolescent is having adjusting to a traumatic experience. If a child has not experienced any trauma or if his traumatic experiences no longer impact his functioning, then he would be rated a 0. A 1 would indicate a child who is making progress learning to adapt to a trauma or a child who recently experienced a trauma where the impact on his well being is not yet known. A 2 would indicate significant problems with adjustment or the presence of an acute stress reaction. A 3 indicates posttraumatic stress disorder (PTSD).

Conversation Starters: Has your child experienced any crises/traumatic life events? If yes, has this affected your child? Does s/he have nightmares or troubling thoughts about the event? Is s/he anxious most of the time? Does s/he appear to be worried or scared?

Notes:	Ratings	Anchor Definitions
	0	No evidence.
	1	History of suspicion of problems associated with traumatic life event(s).
	2	Clear evidence of adjustment problems associated with traumatic life event(s). Adjustment is interfering with youth's functioning in at least one life domain.
	3	Clear evidence of symptoms of post-traumatic stress disorder, which may include flashbacks, nightmares, significant anxiety, and intrusive thoughts of trauma experience.

8. ANGER CONTROL – This item rates the child or adolescent’s ability to manage her anger and frustration tolerance. The **0** level indicates a child or adolescent without problems in this area. Everybody gets angry sometime, so this item is intended to identify youth who are more likely than average to become angry and that this control problem leads to problems with functioning. A **1** level is occasional angry outbursts or a situation where the youth has begun to successfully exercise control over her temper. A **2** level describes a youth who has functioning problems as a result of anger control problems. A youth who meets criteria for intermittent explosive disorder would be rated here. A **3** level describes a youth whose anger control has put them in physical peril within the rating period.

Conversation Starters: How does your child control his/her temper? Does s/he become physical when angry? Does s/he have a hard time if someone criticizes or rejects him/her?

Notes:	Ratings	Anchor Definitions
	0	No evidence.
	1	Some problems with controlling anger. Youth may sometimes become verbally aggressive when frustrated. Peers and family may be aware of and may attempt to avoid stimulating angry outbursts.
	2	Moderate anger control problems. Youth’s temper has gotten her in significant trouble with peers, family, and/or school. Anger may be associated with physical violence. Others are likely quite aware of anger potential.
	3	Severe anger control problems. Youth’s temper is likely associated with frequent fighting that is often physical. Others likely fear her.

9. SUBSTANCE ABUSE – This item rates the youth’s current use of alcohol and illegal drugs, the misuse of prescription medications and the inhalation of any substance for recreational purposes. The main distinction in this rating is that if a child or adolescent uses any alcohol or drugs, then he would be rated as at least a **1**. If this use causes any functioning problems, then he would be rated as at least a **2**. If the child or adolescent were dependent on a substance or substances, then he would be rated as a **3**.

Conversation Starters: Do you know whether your child has used alcohol or any kind of drugs? Do you suspect that your child may have an alcohol or drug use problem? Has anyone reported that they think your child might be using alcohol or drugs?

Notes:	Ratings	Anchor Definitions
	0	No evidence.
	1	History of suspicion of substance abuse.
	2	Clear evidence of substance abuse that interferes with functioning in any life domain.
	3	Youth requires detoxification OR is addicted to alcohol and/or drugs. Include here a youth who is intoxicated at the time of the assessment (i.e. currently under the influence).

10. ATTACHMENT – This item rates the child’s significant parental or caregiver relationships.

Notes:	Ratings	Anchor Definitions
	0	No evidence of attachment problems. Caregiver-child relationship is characterized by mutual satisfaction of needs and child’s development of a sense of security and trust.
	1	Mild problems with attachment. There is some evidence of insecurity in the child caregiver relationship. Child may have mild problems with separation (e.g. anxious/clingy behaviors in the absence of obvious cues of danger) or may avoid contact with caregiver in an age-inappropriate way. Child may have minor difficulties with appropriate physical/emotional boundaries with others.
	2	Moderate problems with attachment. Attachment relationship is marked by sufficient difficulty as to require intervention. Child may have ongoing difficulties with separation, may consistently avoid contact with caregivers, and may have ongoing difficulties with physical or emotional boundaries.
	3	Severe problems with attachment. Child is unable to form attachment relationships with others (e.g. chronic dismissive/avoidant/detached behavior in caregiving relationships) OR child presents with diffuse emotional/physical boundaries leading to indiscriminate attachment with others. Child is considered at ongoing risk due to the nature of her attachment behaviors. Child may have experienced significant early separation from or loss of caregiver, or have experienced chronic inadequate care from early caregivers, or child may have individual vulnerabilities (e.g. mental health, developmental disabilities) that interfere with the formation of positive attachment relationships.

VII. Youth Risk Behaviors/Factors

This information asks about whether or not the child currently behaves in ways that could prove to be dangerous to him/herself or others.

1. SUICIDE RISK – This item rates the presence of suicidal behavior. Only overt and covert thoughts and efforts at attempting to kill one’s self are rated on this item. Other self-destructive behavior is rated elsewhere.

Since a history of suicide ideation and gestures is a predictor of future suicide, any child or adolescent with a history is rated at least a 1.

Conversation Starters: Has your child ever talked about a wish or plan to die or to kill him/herself? Has s/he ever tried to commit suicide?

Notes:	Ratings	Anchor Definitions
	0	No evidence.
	1	History but no recent ideation or gesture.
	2	Recent ideation or gesture but is not currently planning to kill herself. A youth who was thinking about suicide but was able to contract for safety would be rated here.
	3	Current ideation and intent OR command hallucinations that involve self-harm.

2. SELF-INJURIOUS BEHAVIORS/SELF-MUTILATION – This item rates the presence of repetitive physically harmful behavior that generally serves a self-soothing function for the youth and results in physical injury. Carving and cutting on the arms or legs would be common examples of self-injurious behavior. Generally, body piercing and tattoos are not considered a form of self-injurious behavior. Repeatedly piercing or scratching one’s skin, burning, face-slapping, hair pulling, and head banging would be rated here.

Conversation Starters: Has your child ever talked about a wish or plan to hurt him/herself? Does your child ever purposely hurt him/herself (e.g. cutting, burning, face slapping, head banging, hair pulling, etc.)?

Notes:	Ratings	Anchor Definitions
	0	There is no evidence of any forms of intentional self-injury (e.g. cutting, burning, face slapping, head banging).
	1	The youth has a history of intentional self-injury but none evident.
	2	The youth is engaged in intentional self-injury that does not require medical attention.
	3	The youth is engaged in intentional self-injury that requires medical attention.

3. OTHER SELF HARM – This item rates behavior not covered by either Suicide Risk or Self-Injurious Behaviors that places a child or adolescent at risk of physical injury. Any behavior that the child engages in that has significant potential to place the child in danger of physical harm would be rated here. This item provides an opportunity to identify other potentially self-destructive behaviors. To rate a 3, the child or adolescent must have placed himself or herself in significant physical jeopardy during the rating period.

Conversation Starters: Has your child ever talked about or acted in a way that might be dangerous to him/her (i.e. reckless behavior such as riding on top of cars, climbing communication towers, promiscuity)?

Notes:	Ratings	Anchor Definitions
	0	No evidence of behaviors other than suicide or self-injurious behaviors that place the youth at risk of physical harm.
	1	History of behavior other than suicide or self-injurious behaviors that places youth at risk of physical harm. This includes reckless and risk-taking behavior that may endanger the youth.
	2	Engages in behavior other than suicide or self-injurious behaviors that places youth in danger of physical harm. This includes reckless behavior or intentional risk-taking behavior.
	3	Engages in behavior other than suicide or self-injurious behavior that places youth at immediate risk of death. This includes reckless behavior or intentional risk-taking behavior.

4. DANGER TO OTHERS – This item rates the child or adolescent’s violent or aggressive behavior. This rating includes actual and threatened violence. Imagined violence, when extreme, may be rated here. A rating of **2** or **3** would indicate a need for a safety plan. Like suicide risk, a **1** is reserved for history of violence or dangerous aggressiveness. The behavior rated in this item must have the potential to cause significant bodily harm. The behavior should also be intentional. Reckless behavior that may cause physical harm to others is not rated on this item.

For example, a boy who threatens his mother with a knife would be a **3** at the time of the incident. If he remains committed to killing or injuring his mother even several days after the threat, he would remain a **3**. If on the other hand, he calms down and feels bad about his earlier threat, he would be reduced to a **2** and then a **1** with the passage of time so long as no other violent behavior or plans are observed.

Conversation Starters: Has your child ever injured another person on purpose? Does s/he get into physical fights? Has your child ever threatened to kill or seriously injure another person?

Notes:	Ratings	Anchor Definitions
	0	No evidence.
	1	History of aggressive behavior and verbal aggression towards others but no aggression during the past 30 days. This rating also includes a history of vandalism and destruction of property.
	2	Occasional or moderate level of aggression towards others during the past 30 days or more recent verbal aggression.
	3	Frequent or dangerous (significant harm) level of aggression to others. Child or youth is an immediate risk to others.

5. RUNAWAY – This item rates the risk of or actual runaway behavior.

Conversation Starters: Has your child ever run away from home, school or any other place? If so, where did they go? How long did they stay away? How did you find them? Do they ever threaten to run away?

Notes:	Ratings	Anchor Definitions
	0	No evidence.
	1	This rating is used for a child with no recent history of running away but who has expressed ideation about escaping present living situation or treatment. Child may have threatened running away on one or more occasions or have a history (lifetime) of running away but not in the past year.
	2	Recent runaway behavior or ideation but not in the past 7 days.
	3	Acute threat to runaway as manifest by either recent attempts OR significant ideation about running away OR youth is currently a runaway.

6. FIRE SETTING – This item rates whether the child intentionally starts fires using matches or other incendiary devices. A **1** might be used if fire-setting behavior is suspected but not confirmed. Accidental fire setting would also be rated here.

Conversation Starters: Has your child ever played with matches or set a fire? If so, please describe what happened. Did the fire setting behavior destroy property or endanger the lives of others?

Notes:	Ratings	Anchor Definitions
	0	No evidence.
	1	History of fire setting but not in the past six months.
	2	Recent fire setting behavior (in the past six months) but not of the type that has endangered the lives of others OR repeated fire setting behavior over a period of at least two years even if not in the past six months.
	3	Acute threat of fire setting. Set fire that endangered the lives of others (e.g. attempting to burn down a house).

7. SANCTION-SEEKING BEHAVIOR – This item rates intentional obnoxious social behaviors that force adults to sanction the child. The key to rating this behavior is to understand if the child is intentionally trying to force discipline or consequences. These behaviors occur in such a way that the child is intentionally seeking sanctions and negative attention, acting out, or the behavior could also be seen as a cry for help. For example, a child who forces her teacher to send him/her out of class because he is having trouble learning would fit this category.

Conversation Starters: Does your child ever intentionally do or say things to upset others? Has anyone ever told you that your child has sworn at them or displayed other behavior that was insulting, rude or obnoxious? Does your child seem to purposely get in trouble by making you or other adults angry with him/her?

Notes:	Ratings	Anchor Definitions
	0	No evidence of problematic social behavior. Youth does not engage in behavior that forces adults to sanction him/her.
	1	Mild level of problematic social behavior. This might include occasional inappropriate social behavior that forces adults to sanction the youth. Infrequent inappropriate comments to strangers or unusual behavior in social settings might be included in this level.
	2	Moderate level of problematic social behavior. Youth is intentionally engaging in problematic social behavior that is causing problems in her life. Youth is intentionally getting in trouble in school, at home, or in the community.
	3	Severe level of problematic social behavior. This level would be indicated by frequent serious social behavior that forces adults to seriously and/or repeatedly sanction the youth. Social behaviors are sufficiently severe that they place the youth at risk of significant sanctions (e.g. expulsion, removal from the community).

8. SEXUAL AGGRESSION – This item rates sexually aggressive (or abusive) behavior. This includes all sexual offending that could result in charges being made against the youth. Sexual aggression includes the use of threat of physical force or taking advantage of a power differential to engage in non-consenting sexual activity. Only perpetrators of sexual aggression are rated here. The severity of the behavior as well as how recent it occurred provides the information to rate this item.

Conversation Starters: Has your child ever been accused of being sexually aggressive with another child? What happened after that? Are there concerns that your child has engaged in grooming other children?

Notes:	Ratings	Anchor Definitions
	0	No evidence of any history of sexually aggressive behavior. No sexual activity with younger children, non-consenting others, or children not able to understand consent.
	1	History of sexually aggressive behavior (but not in the past year) OR sexually inappropriate behavior in the past year that troubles others such as harassing talk or excessive masturbation.
	2	Child has engaged in sexually aggressive behavior in the past year but not in the past 30 days.
	3	Child has engaged in sexually aggressive behavior in the past 30 days and/or has recently been sexually aggressive with acute risk of reoffending due to attitude, behavior, or circumstances. This rating would indicate behavior that is at the level of molestation, penetration, or rape.

9. EXPLOITED/VICTIMIZATION – This item rates a youth’s history and pattern of being the victim of abuse, and includes a level of current risk for re-victimization. This can include parentification of children, being bullied, harassed, teased, prostituted, scapegoated or taken advantage of by others. Dating violence is also included in this item.

Conversation Starters: Has your child ever been victimized in any way (e.g. mugged, teased, bullied, abused, victim of a crime, etc.)? Are there concerns that s/he has been or is currently being taken advantage of by peers or other adults? Is the child currently at risk of being victimized by another person?

Notes:	Ratings	Anchor Definitions
	0	No evidence of a history of exploitation OR no evidence of recent exploitation and no significant history of victimization within the past year. The youth may have been robbed or burglarized on one or more occasions in the past, but no pattern of victimization exists. Youth is not presently at risk for re-victimization.
	1	Suspicion or history of exploitation. The youth has not been exploited to any significant degree during the past year. Youth is not presently at risk for re-victimization.
	2	This level indicates a youth who has been recently exploited (within the past year) but is not at acute risk of re-exploitation. This might include experiences of physical or sexual abuse, significant psychological abuse by family or friends, extortion, or violent crime.
	3	This level indicates a youth who has been recently exploited and has an acute risk of re-exploitation. Examples include working as a prostitute, living in an abusive relationship, or constantly being forced to take on a parent’s responsibilities.

VIII. Trauma Experiences

The Trauma Experiences Domain rates the child's experience with different types of trauma over a lifetime.

1. SEXUAL ABUSE – This item rates the youth's experiences of sexual abuse over his lifetime.		
Conversation Starters: Has your child ever been sexually abused? By whom? How often? When was the last incident?		
Notes:	Ratings	Anchor Definitions
	0	No evidence.
	1	There is a suspicion that the child has experienced sexual abuse with some degree of evidence or the child has experienced less often or intense sexual abuse including but not limited to direct exposure to sexually explicit materials.
	2	Child has experienced one or a couple of incidents of sexual abuse that were not chronic or severe. This might include a child who has experienced molestation without penetration on a single occasion.
	3	Child has experienced severe or chronic sexual abuse with multiple episodes or lasting over an extended period of time. This abuse may have involved penetration, multiple perpetrators, and/or associated physical injury.

2. PHYSICAL ABUSE – This item rates the youth's experiences of physical abuse over her lifetime.		
Conversation Starters: Has your child ever been physically abused? By whom? When was the last incident?		
Notes:	Ratings	Anchor Definitions
	0	No evidence.
	1	Youth has experienced one episode of physical abuse or there is a suspicion that youth has experienced physical abuse but no confirming evidence.
	2	Youth has experienced a moderate level of physical abuse and/or repeated forms of physical punishment (e.g. hitting, punching).
	3	Youth has experienced severe and repeated physical abuse that causes sufficient physical harm to necessitate hospital treatment.

3. EMOTIONAL ABUSE – This item rates the degree of severity of emotional abuse, including verbal and nonverbal forms experienced by the youth over a lifetime. Emotional abuse refers to any kind of abuse that is emotional rather than physical in nature. It can include anything from verbal abuse and constant criticism to more subtle tactics, such as repeated disapproval or even the refusal to ever be pleased with the child’s efforts.

Conversation Starters: Has your child ever been emotionally abused? By whom? How often? When was the most recent incident?

Notes:	Ratings	Anchor Definitions
	0	No evidence.
	1	Child has experienced mild emotional abuse. For instance, child may experience some insults or is occasionally referred to in a derogatory manner by caregivers.
	2	Child has experienced moderate degree of emotional abuse. For instance, child may be consistently denied emotional attention from caregivers, insulted or humiliated on an ongoing basis, or intentionally isolated from others.
	3	Child has experienced significant or severe emotional abuse over an extended period of time (at least one year). For instance, child is completely ignored by caregivers, or threatened/terrorized by others.

4. MEDICAL TRAUMA – This item rates the severity of medical trauma experienced by the youth over a lifetime. Not all medical procedures are experienced as traumatic. Medical trauma results when a medical experience is perceived by the child as mentally or emotionally overwhelming. Potential medical traumas include but are not limited to the following examples: the onset of a life threatening illness; sudden painful medical events; chronic medical conditions resulting from an injury or illness or another type of traumatic event.

Conversation Starters: Has your child ever been medically traumatized? Describe the incident and when it occurred.

Notes:	Ratings	Anchor Definitions
	0	No evidence.
	1	Child has had a medical experience that was mildly overwhelming for the child. Examples include events that were acute in nature and did not result in ongoing medical needs and associated distress such as minor surgery, stitches, or a bone setting.
	2	Child has had a medical experience that was perceived as moderately emotionally or mentally overwhelming. Such events might include acute injuries and moderately invasive medical procedures such as major surgery that required only short term hospitalization.
	3	Child has had a medical experience that was perceived as extremely emotionally or mentally overwhelming. The event itself may have been life threatening and may have resulted in chronic health problems that alter the child's physical functioning.

5. NATURAL/MAN-MADE DISASTERS – This item rates the youth’s experiences with natural or man-made disasters over her lifetime.		
Conversation Starters: Has your child ever traumatized by a natural disaster (e.g. fire, flood, hurricane, earthquake, etc.) Describe the incident and when it occurred.		
Notes:	Ratings	
	Anchor Definitions	
	0	No evidence.
	1	Child has witnessed occasional fighting or other forms of violence in the community. Child has not been directly impacted by the community violence (i.e. violence not directed at self, family, or friends) and exposure has been limited.
	2	Child has witnessed multiple instances of community violence and/or the significant injury of others in her community; has had friends/family members injured as a result of violence in the community; or is the direct victim of violence that was not life threatening.
3	Child has witnessed or experienced severe and repeated instances of community violence; the death of another person in her community as a result of violence; is the direct victim of violence in the community that was life threatening; or has experienced chronic/ongoing impact as a result of community violence (e.g. family member injured and no longer able to work).	

6. WITNESS TO FAMILY VIOLENCE – This item rates the youth’s experiences as a witness to family violence. Please rate within the lifetime.		
Conversation Starters: Has your child ever been a victim of family violence? Has your child ever been a witness to family violence? What family members were involved in the violence? How recently did this occur?		
Notes:	Ratings	
	Anchor Definitions	
	0	No evidence.
	1	Youth has witnessed one episode of family violence.
	2	Youth has witnessed repeated and severe episodes of family violence but no significant injuries (i.e. requiring emergency medical attention) have been witnessed.
3	Youth has witnessed repeated and severe episodes of family violence. Significant injuries occurred and been witnessed by the child as a direct result of the violence.	

7. WITNESS/VICTIM – COMMUNITY VIOLENCE – This item rates the child’s experiences as a witness of community violence. Please rate within the lifetime.		
Conversation Starters: Has your child ever been a victim of community violence? Has your child ever witnessed violence in the community (e.g. gang fights, violence at school, etc.)? How recently did this occur?		
Notes:	Ratings	Anchor Definitions
	0	No evidence.
	1	Child has witnessed occasional fighting or other forms of violence in the community. Child has not been directly impacted by the community violence (i.e. violence not directed at self, family, or friends) and exposure has been limited.
	2	Child has witnessed multiple instances of community violence and/or the significant injury of others in her community; has had friends/family members injured as a result of violence in the community; or is the direct victim of violence that was not life threatening.
	3	Child has witnessed or experienced severe and repeated instances of community violence; the death of another person in her community as a result of violence; is the direct victim of violence in the community that was life threatening; or has experienced chronic/ongoing impact as a result of community violence (e.g. family member injured and no longer able to work).

8. WITNESS/VICTIM – CRIMINAL ACTS – This item rates the youth’s experiences as a witness to or victim of significant criminal acts. Please rate within the lifetime.		
Conversation Starters: Has your child ever been a victim of a criminal act? Has your child ever witnessed a criminal act? Has this caused your child trauma? How recently did this occur?		
Notes:	Ratings	Anchor Definitions
	0	No evidence.
	1	Youth has been a witness of significant criminal activity.
	2	Youth has been a direct victim of criminal activity or witnessed the victimization of a family member or friend.
	3	Youth has been a victim of criminal activity that was life-threatening or caused significant physical harm OR youth witnessed the death of a loved one.

9. NEGLECT – This item rates the degree of severity of neglect experienced by the child over his lifetime.

Conversation Starters: Has your child ever been neglected? By whom? How often? When was the last incident?

Notes:	Ratings	Anchor Definitions
	0	No evidence.
	1	Child has experienced minor or occasional neglect. Child may have been left at home with no adult supervision or there may be occasional failure to provide adequate supervision of the child.
	2	Child has experienced a moderate level of neglect. This may include occasional unintended failure to provide adequate food, shelter, or clothing, which resulted in corrective action.
	3	Child has experienced a severe level of neglect, including multiple and/or prolonged absences by adults without minimal supervision and failure to provide basic necessities of life on a regular basis.

10. DISRUPTIONS IN CAREGIVING/ATTACHMENT LOSSES – This item rates the extent to which the child has been exposed to disruptions in caregiving involving separation from primary attachment figure(s) and/or attachment losses. Children who have had placement changes including stays in foster care, residential treatment facilities or juvenile settings can be rated here. Short term hospital stays or brief juvenile detention stays, during which the child’s caregiver remains the same, would not be rated on this item.

Notes:	Ratings	Anchor Definitions
	0	No evidence.
	1	Child may have experienced one disruption in caregiving but was placed with a familiar alternative caregiver, such as a relative (i.e. child shifted from care of biological mother to paternal grandmother). Child may or may not have had ongoing contact with primary attachment figure(s) during this disruption. Shift in caregiving may be temporary or permanent.
	2	Child has experienced 2 or more disruptions in caregiving with known alternative caregivers, or the child has had at least one disruption involving placement with an unknown caregiver. Children who have been placed in foster or out-of-home care such as residential treatment facilities would be rated here.
	3	Child has experienced multiple/repeated placement changes (i.e. 3 or more placements with a known caregiver or 2 or more with an unknown caregiver) resulting in caregiving disruptions in a way that has disrupted various domains of a child’s life (i.e. loss of community, school placement, peer group). Examples would include a child in several short-term unknown placements (i.e. moved from emergency foster care to additional foster care placement and/or multiple transitions in and out of the family-of-origin (i.e. several cycles of removal and reunification).

11. SYSTEM-INDUCED TRAUMA – This item rates how the child has experienced traumatic removal from the home, traumatic foster placement, sibling separation, or multiple placements in a short amount of time.

Notes:	Ratings	Anchor Definitions
	0	There is no evidence that the child has experienced system-induced trauma.
	1	Child has had at least one experience that was difficult for the child. This may include events that resulted in an intense but short lived emotional response, such as insensitive or humiliating interviews.
	2	Child has had system experience(s) that were moderately difficult that have resulted in impaired functioning in at least one life area.
	3	Child has had system experience(s) that were exceptionally difficult and overwhelming that has resulted in impaired functioning across several life areas for a significant period of time.

IX. Transition Age Module

1. INDEPENDENT LIVING SKILLS – This item rates the youth’s ability to take responsibility for and also manage herself in an age-appropriate way.		
Notes:	Ratings	Anchor Definitions
	0	This level indicates a person who is fully capable of independent living. There is no evidence of any problems that could impede maintaining her own home.
	1	This level indicates a person with mild impairment of independent living skills. Some problems exist with maintaining reasonable cleanliness, ability to cook, clean, and manage self. Problems with money management may occur at this level. These problems are generally addressable with training or supervision.
	2	This level indicates a person with moderate impairment of independent living skills. Notable problems with completing tasks necessary for independent living are apparent. Difficulty with cooking, cleaning and self-management when unsupervised would be common at this level. Problems are generally addressable with in-home services.
	3	This level indicates a person with profound impairment of independent living skills. This youth would be expected to be unable to live independently given their current status. Problems require a structured living environment.

2. JOB FUNCTIONING		
Notes:	Ratings	Anchor Definitions
	0	Youth is doing fine in a job.
	1	Youth is employed and generally does well but has occasional problems with attendance, relationships, and/or productivity.
	2	Youth is having problems at work with attendance, relationships, and/or productivity that are impacting her functioning at work.
	3	Youth is having severe problems at work. Youth may have been recently fired or currently under the threat of dismissal.
	N/A	Youth is not currently working due to age or developmental level.

3. PEER/SOCIAL EXPERIENCES – This item rates problems associated with the youth’s ability to relate to same age peers. This may involve either problems with making or maintaining friends and social contacts or with having social contact with peers who engage in and support destructive personal behavior.		
Notes:	Ratings	Anchor Definitions
	0	No evidence of any problems with peers. Youth has friends and has developmentally appropriate peer interactions.
	1	Mild to moderate levels of problems making friends or getting along with peers. Youth may get into arguments or have difficulty maintaining multiple friendships. This may include involvement with peers who support destructive personal behavior.
	2	Significant level of problems making friends or getting along with peers. Youth may engage in developmentally inappropriate peer behavior. He may affiliate with a peer group that has problems.
	3	Severe problems making friends or getting along with peers. Youth may constantly fight with peers or have no significant social contacts. Alternatively this rating would be used to describe a youth whose only peer interactions are with a highly problematic peer group.

4. CAREGIVING ROLES – This item rates the youth in any caregiver role. For example, a youth with a son or daughter or a youth responsible for a younger sibling, parent, or grandparent would be rated here. Include pregnancy as a parenting role.		
Notes:	Ratings	Anchor Definitions
	0	Youth is not a parent or in any other caregiving role.
	1	The youth has responsibilities as a caregiver to an individual or older adult but is currently able to manage these responsibilities.
	2	The youth has responsibilities as a caregiver to an individual or older adult and either the youth is struggling with these responsibilities or they are currently interfering with the youth’s functioning in other life domains.
	3	The youth has responsibilities as a caregiver to an individual or older adult and the youth is currently unable to meet these responsibilities OR these responsibilities are making it impossible for the youth to function in other life domains.