

# WISe Screening

## April 2, 2019

### Agenda:

- Introductions
- Purpose of WISe CANS Screen
- Use of CANS
- BRS screens for WISe in BHAS
- Screens and JRA
- Questions and Answers

# Purpose of a WISE CANS screen

- To make an initial determination if WISE is appropriate level of service for the youth and family
- NOT to determine whether it is time to transition to a lower level of care (that discharge planning should happen with the CFT early in the WISE episode)
- CANS screens for BRS and CLIP also serve to determine if WISE would be appropriate, but the screen alone will not do that. The WISE screen determines if the youth is acute enough for WISE and not if the youth's needs exceed WISE.

## WISE Screens must be offered in a convenient manner

- Screens must be offered by phone or in person
- A WISE screen is different from a mental health intake at the agency and must not require any additional forms (including mental health intake) to be completed. When a WISE screen is requested, we do one.
- It is appropriate to contact and gain the permission of the youth/family before completing and entering the WISE screen into BHAS.

# WISe screen timeline

- Agency receives information that a youth/family are interested in WISe
- Schedule screen and receive confirmation from the youth/family that they actually want the screen
- Complete screen in consultation with appropriate contacts including referring source and youth/family
- Screen must be entered into BHAS in 10 days from the time the referral is made. It is not complete until entered. Consider the contact with the youth/family, or legal guardian as the date to start the 10 day clock

# Payment for WISE Screens

- The WISE service based enhancement (kick payment) reflects a 6% administrative load assumption, which considers administrative expenses associated with WISE screening and treatment plan review costs.

## When do we NOT do a screen

- Do not do a screen in the middle of a WISE episode. A full CANS can be done at any time, but screens are only done to determine WISE eligibility.
- Do a full CANS (not an initial) when transferring from one WISE agency to another. Unless it has been more than 90 days, typically an additional screen is not needed because eligibility is already established.
- If the youth is not eligible for WISE, do not do a WISE screen. (e.g. no Medicaid)

# When should a WISE screen be done?

- Any time someone asks for one to determine if WISE should be considered
- Every six months while in CLIP and 30 days prior to discharge. (No need for WISE agency to do additional screen after the discharge screen is done)
- Every six months while in BRS and not in WISE. Screen must be done at discharge from BRS.
- All of these instances are to determine if WISE can meet the needs of the youth/family

# Children's Long-Term Inpatient Program (CLIP) Child and Adolescent Needs and Strengths (CANS)

## CLIP-CANS Flow Chart

**CANS Screen every 6 months while in CLIP**

**CLIP STAY**

**CLIP Admit - CANS FULL**

**Every 6 mo.- CANS Screen**

**CLIP Discharge – CANS Screen**

Admission to CLIP

**CANS -FULL  
ASSESSMENT**

Completed by  
CLIP staff within  
first 30 days

**CANS  
SCREEN**

EVERY 6  
MONTHS  
WHILE IN  
CLIP

Discharge from CLIP

**CANS- SCREEN**

Completed  
within 30 days  
prior to discharge

CANS Screen will be administered to all Medicaid-Eligible youth prior to CLIP Admission to determine whether diversion is appropriate to meet the child's or youth's needs.

CANS Screen determines whether a Medicaid-eligible youth is eligible for WISE.

If the youth is WISE eligible, the CLIP Provider will make a WISE referral and the Community WISE Provider will enroll youth in WISE and complete a **CANS-FULL within 30 days post discharge.**

### What is the purpose of a Child and Adolescent Needs and Strengths (CANS) SCREEN and FULL Assessments?

**The CANS FULL Assessment** completed at CLIP admission is intended to be utilized as a 'communication tool' across Washington State's Children's Behavioral Health system and may be useful in determining treatment needs and informing the CLIP treatment planning process.

**The CANS Screen** is a brief list of questions that determines if a youth meets the algorithm criteria for Wraparound with Intensive Services (WISe) in their home community. NOTE: All Medicaid-eligible youth discharging from CLIP meet the functional proxy



# BRS Screens

- Before doing a screen make sure that the BHO and/or MCO is entered for the client in BHAS
- It is important that BRS screens are entered into BHAS and not just completed on paper so we can keep track of them
- In order to complete them, you will want to have some consultation with DCYF or the BRS provider to get enough information to complete the screen
- Make sure to get a copy of the completed screen to the DCYF case worker or BRS staff.

### Add Assessment for Test Prepopulate

Assessment Tool \* CANS Screen 5+ ▼

Assessment Certification \* CANS Certification ▼

Assessment Location \* Washington, Optum Pierce BHO, Pierce BHO - Catholic Community Services, Pi ▼

MCO -select item- ▼

Assessment Reason \* -select item- ▼

Assessment Date \* -select item- ▼

Initial

Note: Enter date assessment conducted.

Certified Assessor \* -select item- ▼

Assessment Mode \* -select above- ▼

Pre Populate

Start Assessment

Cancel

Note that your only drop down option is “initial”, but if this is a 6 month re-screen, you can note that in the optional box to the right

The ‘Pre Populate’ box is only available if you have done an assessment in the last 90 days

Relationship \* Sister

### Referral Source Information

Referral Source \* d2. Children's Administration/Pre-BRS Services (Initial Screen)

Additional Comments May need to move to BRS

Contacted Date \* 8/28/2018 

Service Requested by Referral Source \* BRS

Save & Continue

Cancel

Complete Date \*

8/30/2018



Note: Enter date assessment completed. (If entering an assessment previously conducted, please enter the date conducted.)

### Algorithm Result

Based on assessment information, this child is **RECOMMENDED for WISe**

### Screening Outcome

The screening outcome is where you send the youth for services after this screening process. Based on the algorithm result, **WISe is the selected screening outcome**. To override this result, select another screening outcome and explain the reason for override.

Referral To \*

Enter BRS



Please explain reason for override \*

Needs supervision and no placement available outside BRS

If the algorithm says the youth is eligible for WISe and you are referring to BRS, you will need to put a rationale for why this was chosen. Usually will be because the child lacks a placement. Consult with Social Worker or BRS provider to get that info.

Client Name \*

Test Prepopulate

Birth Date \*

06/05/2010

P1 ID \*

123212311

Gender \*

Male

Completed By \*

Paul Davis

There should be a solid rationale on why a youth could not be enrolled in WISE.

Some 'not so good' examples:

- Clinician and clinical supervisor implemented clinical brilliance
- WISE is also being considered.
- BRS is the planned route at this time, per social worker. Youth cannot be enrolled in BRS and WISE.
- BRS
- CLIP discharge
- pre-BRS screen

## Some good examples

- Youth is currently in BRS group home placement. Children's Administration would need to facilitate alternative living situation for youth to receive WISE.
- No caregiver at this time. Youth is in a CRC in another county.
- No Medicaid benefit--not eligible
- is a state dependent and needs behavioral rehabilitation services to stabilize placement. There is no stable/identified placement as of this time.
- referred to BRS as there is no placement stability - her behaviors cause placement disruption.

## Ratings and WISe screens

- We still expect to use consensus on screens like we do for full CANS. However, the process may involve less people to consult with.
- Use the CANS guide to help you in completing items. It can take several screens to become familiar enough to do a screen without referring to the guide.

# Some Considerations for Screens

- Remember to take restrictive environments into consideration. If the youth has been incarcerated or in residential setting for a long period of time, you need to consider risks prior to that restrictive setting.
- Ignoring needs is not being ‘strength based’. Make sure to adequately document the youth/family needs so that we can make a good decision on placement
- CANS is decision support, but the judgement of the youth/family and screener are final determiners.



# More considerations

- Comments are required for every domain that is a 2 or 3. These should be brief, but detailed enough for someone reading the screen to understand what is happening.
- Comments in domains with a 0 or 1 are helpful to understand the full story as well.

## Diagnosis on the Screen

- **Diagnosis is not required on a WISE screen.** If you don't enter a diagnosis, then you don't enter the subsequent fields including the comment box, diagnostic certainty, or prognosis.
- If you have a diagnosis at the time of the screen, enter that along with information about who gave the diagnosis and when in the comment box. The diagnostic certainty and prognosis is required if a diagnosis is entered
- **Diagnosis IS required on full CANS**

# Sharing the WISe screen

- WISe CANS screens are considered to be category 4 HIPPA data, so it should be treated accordingly.
- Only share with those needed to do care coordination or with a release.
- Send data by fax or secure (encrypted) email or secure file transfer
- This data belongs to the client, so it is appropriate to share with the youth and family. Make sure comments are appropriate to share with them.

# How to access and share a screen

- Click on the assessments tab once you select the client. Then hit the report button at the right.

View Test Case To search type and hit enter. Search

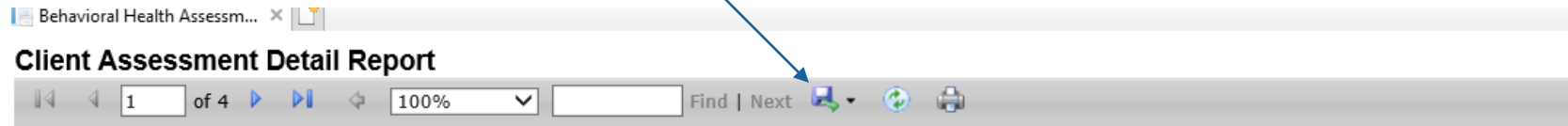
These are the fields of the record that can be edited.

First Name: Test  Client ID:   
 Last Name: Case  Gender: Male   
 Middle Name:   
 Birth Date: 06/05/2005

ASSESSMENT #	TOOL	REASON	A/DISCHARGE	STATUS	LOCATION	MCO	START DATE	COMPLETED DATE	WISE	REPORT	DELETE
52415	CANS Screen 5+	Initial		CLOSED	Thurston		01/04/2019 08:22:17 AM	01/04/2019 08:24:07 AM	Meets	<a href="#">Report</a>	
52384	CANS Screen 5+	Initial		CLOSED Pending	Thurston		01/08/2019 02:19:20 PM	01/08/2019 02:54:23 PM	Meets	<a href="#">Report</a>	
52216	CANS Screen 5+	Initial		CLOSED	Pierce County		01/04/2019 10:01:46 AM	01/04/2019 10:18:52 AM	Does not meet	<a href="#">Report</a>	

# Printing a screen

Hit the disc icon, not the printer icon. Then after it produces a pdf, you can print a copy or send by secure email.



Test Case

Report Date: 3/21/2019 4:07:20 PM

## Intensive Mental Health Services CANS 5+ Screen

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### Information Detail

<b>Client:</b>	Test Case	<b>Clinician:</b>	Paul Davis
<b>P1 ID:</b>	123212311	<b>Agency:</b>	Community Youth Services-WISe
<b>Birthdate:</b>	06/05/2005	<b>County:</b>	Thurston
<b>Gender:</b>	Male	<b>Phone:</b>	360-725-1632
<b>Caregiver:</b>	Care Test	<b>Email:</b>	davispa@dshs.wa.gov
<b>Relationship:</b>	Sister		
<b>Client ID:</b>			

# Screens and Juvenile Rehabilitation

# Questions and Answers

- Paul Davis, [paul.davis@hca.wa.gov](mailto:paul.davis@hca.wa.gov) 360-725-1632
- [wisesupport@hca.wa.gov](mailto:wisesupport@hca.wa.gov)