

**CHILD AND ADOLESCENT NEEDS AND STRENGTHS (CANS) SAN BERNARDINO**

CHECK ONE:  Initial CANS

Update CANS

Transition/Discharge CANS

Date Assessed: 11/18/2014

Child/Youth's Name: Last37541, First37541

Assesment Status: Approved

Under 6 Y/O

Over 15 Y/O

Date of Birth: 10/19/1998

Age: 17

Medical Record No: ID37541

Assessor's Name: Last722, First722

Signature: \_\_\_\_\_

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

CHILD/YOUTH STRENGTHS							
0 = centerpiece	1 = useful						
2 = identified	3 = not yet identified						
		PV	N/A	0	1	2	3
Family				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Interpersonal				<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Optimism				<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Educational				<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vocational		<input type="radio"/>		<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Talents/Interests				<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Spiritual/Religious				<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Community Life				<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Relationship Permanence *				<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Well-Being				<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Resiliency				<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Resourcefulness				<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>

ACCULTURATION						
0 = no evidence of problem	1 = history, mild					
2 = moderate	3 = severe					
		PV	0	1	2	3
Language			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Identity			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ritual			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cultural Stress			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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

CHILD RISK BEHAVIORS						
0 = no evidence of problem	1 = Hx - Watch/Prevent					
2 = recent - ACT	3 = acute - ACT IMMED.					
		PV	0	1	2	3
Suicide Risk			<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Self-Mutilation			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other Self Harm			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Danger to Others *			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sexual Aggression *			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Runaway *			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Delinquency *			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Judgment			<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fire Setting *			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Social Behavior - Sanction Seeking			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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

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

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CHECK ONE:       Initial CANS       Update CANS       Transition/Discharge CANS

Date Assessed: 11/18/2014

Child/Youth's Name: Last37541, First37541

**CANS-SB Modules**

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

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Child/Youth's Name: Last37541, First37541

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

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Juvenile Justice (JJ) Module					PV 0 1 2 3					PV 0 1 2 3				
Seriousness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Peer Influences	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					
History	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Parent Criminal Behavior	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					
Planning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Environmental Influences	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					
Community Safety	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					
Fire Setting (FS) Module					PV 0 1 2 3					PV 0 1 2 3				
Seriousness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Community Safety	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					
History	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Response to Accusation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					
Planning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Remorse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					
Use of Accelerants	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Likelihood of Future Fire Setting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					
Intention to Harm	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					

**CANS-SB Caregivers Sections**

**CAREGIVER STRENGTHS & NEEDS**

0 = strength/no evidence of prob.      1 = useful/monitor  
 2 = requires action                      3 = req. immed. action

Caregiver Name: Last38086, First38086      Relation: Biological Mother  
 Caregiver Type: Long-term Identified Caregiver

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