

Collaborative Planning

Creating a Roadmap for Change using the CANS

Teaming and TCOM

- Shared decision making is complex and varied*
- Effective teaming requires interdependent collaboration, open communication and shared decision making.**
- Multidisciplinary teams should involve people working together around common objectives and team norms.

TCOM has the potential to build these variables into care organically.



*Nancarrow et al. Human Resources for Health 2013, 11:19

**Xyrichis et al., J Adv Nurs 2008, 61:232–241.

TCOM as a Teaming Tool

Prior to the team, collect the following:

- The family's goal/vision for treatment.
- The youth's goal/vision when appropriate.
- A list of professional/paraprofessional assessments to be included in the findings.



TCOM as a Teaming Tool

Using TCOM to organize the team meeting:

- Start with a Statement of Understanding driven by the family/youth priorities.
- Outline strengths (centerpiece/useful).
- Review the functional priorities of the professional members of the team (What outcomes would each like to achieve?)
- What treatment/interventions/services have been tried? What needs are well-managed at present?
- What functional goals do all agree upon?
- What resources does our system have? Does the individual/family have access to these resources?



Teaming & Collaborative Planning

- Needs and Strengths must be collaboratively identified, then organized.
- A formulation of care must be developed collaboratively, starting with the family's and youth's goals/vision.
- Outcomes or goals must be developed that are measurable and achievable.
- Strengths must be built upon or built throughout the process.





Map a Plan: Choose a target need and link background needs to it. Identify intervention(s) for target need. Factor in strengths that help and strengths to build. Identify anticipated outcome.

Step 4

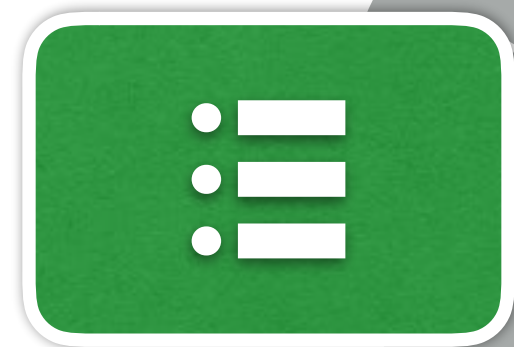


Cluster Needs: What are the background needs, treatment target needs, anticipated outcome needs?



Finish

Step 2



Identify Strengths and Needs: What are the caregiver and youth's relevant strengths and needs?



Step 3

Family and Youth Voice: What are the family's and youth's primary concerns, goals and vision?



Step 1

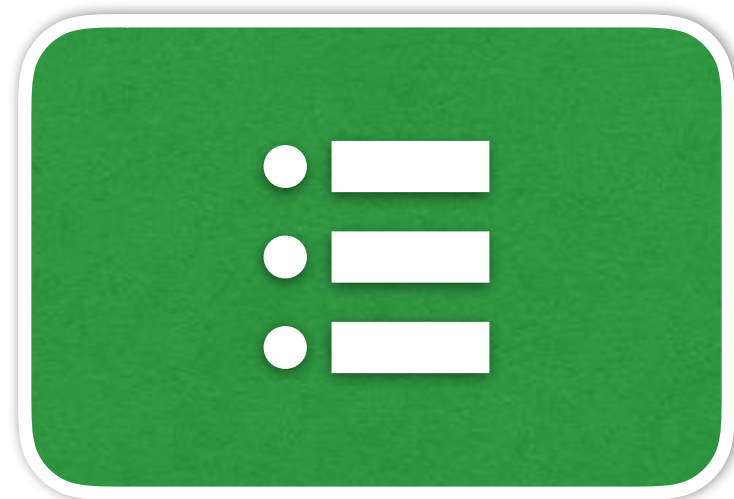
Step 1: Family and Youth Voice



- Identify the family's primary concerns, goals or vision for their child or youth.
 - Identify the child or youth's primary concerns, goals or vision for him/herself.
 - Identify the individual team member's primary concerns, goals or vision for the child or youth.
 - Come to consensus on the primary concerns, goals or vision for the child or youth
-

Step 2: The What – Identifying Relevant Strengths and Needs

A Summary of Needs and Strengths should be developed (all Needs rated '1', '2' and '3', all Strengths). Using this summary, list the items by action level:



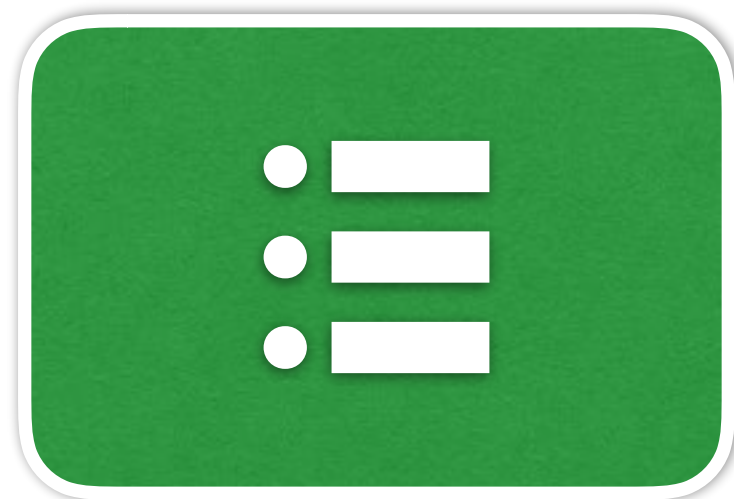
- List the caregiver's strengths (from those items that could be considered strengths or resources for the child/youth.
- List the child or youth's strengths
- List the caregiver's needs
- List the child or youth's needs

Strengths	0	1	2	3
Caregiver	- item - item	- item - item	- item - item	- item - item
Youth	- item - item	- item - item	- item - item	- item - item

Needs	1	2	3
Caregiver	- item - item	- item - item	- item - item
Youth	- item - item	- item - item	- item - item

Step 3: The Why – Prioritizing and Linking

We need to prioritize and link the items in order to help us focus and develop a theory of why. The theory of why should closely match the team's shared understanding of the problem and goals.



- Identify needs that we cannot change (or choose not to change at this time)
 - Prioritize needs that we can change
 - Identify needs that we would expect would change as a result of our work
 - Link needs with strengths that can be used or built to effect change.
-

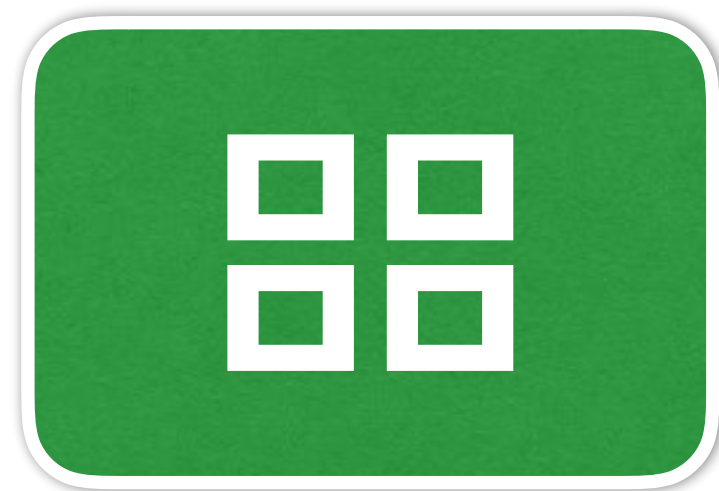
Strengths to Use ('0', '1')			Strengths to Build ('2', '3')		
Caregiver	- item - item	- item - item	- item - item	- item - item	- item - item
Youth	- item - item	- item - item	- item - item	- item - item	- item - item

Needs We Cannot Change		Needs We Can Change		Needs that are the Effect of Change	
Caregiver	- item - item	- item - item	- item - item	- item - item	- item - item
Youth	- item - item	- item - item	- item - item	- item - item	- item - item

Strength to Use		Need helped by Strength	
Caregiver	- item - item	- item - item	- item - item
Youth	- item - item	- item - item	- item - item

Step 4: The What, the Why and How – Clustering Needs

- Choose your target need.
- Link associated background needs (drivers) to the chosen target need. (Remember, you may not always have background needs that drive target needs but you want to ask.)
- What other needs will improve as a result of your intervention? Identify those anticipated outcomes.
- Choose interventions/supports to address the target need.
- Cross check your intervention with useful strengths.
- Cross check with absent strengths. How must those be factored in? How will their absence impair success on the target?



The What and the Why: Understanding Needs

Background Needs	Target Needs	Anticipated Outcomes
<ul style="list-style-type: none">• Needs that are not likely to change, but shift the pathway down which treatment is provided.• Background needs inform our focus and our theory of why.• In complex care management, background needs may require management in order to prevent other needs for occurring.	<ul style="list-style-type: none">• Effective intervention around these needs will likely result in direct change of the need.• Changes in these needs also likely to change Anticipated Outcomes• Plan goals will directly target these needs.	<ul style="list-style-type: none">• Needs expected to shift as a result of effectively targeting the treatment needs.• Anticipated Outcome needs are the “effect” of the target needs.
Needs we cannot change	Needs we can change	Needs that are the effect of change

The What and the Why: Understanding Strengths

Centerpiece Strengths	Useful Strengths	Strengths to Build
<ul style="list-style-type: none">• A well developed strength; may be used as a protective factor.• Can be linked to a target need to facilitate change.	<ul style="list-style-type: none">• Strength that is evident, but requires effort to maximize it.• Can be linked to a target need to facilitate change.	<ul style="list-style-type: none">• Strengths that require building efforts before they can be useful for the individual.• May be something important to build and by doing so, support change on a target need.
When linked to need, strength effects change	When linked to need, strength effects change	If built, strength can support change

The How: Clustering Needs and Strengths

Background Needs	Target Need	Intervention	Anticipated Outcomes
<p>What background needs are driving the target need?</p>	<p>CHOSEN TARGET NEED</p>	<p>What interventions will treat the target need?</p>	<p>What needs will be expected to improve as a result of the change in the target need?</p>
<p>What strengths can be used to facilitate change on the target need?</p>		<p>What strength, if built, could support change on the target need?</p>	
<p>Centerpiece Strengths</p>	<p>Useful Strengths</p>	<p>Strengths to Build</p>	

Ensuring Progress to What's Next

- With the youth and the family, identify benchmarks for the treatment targets and functional outcomes that alert the team to when things are working and when they aren't. Monitor these benchmarks.
- Be willing to make changes to the treatment plan before compliance regulations require you to do so.
- Develop the youth and family's toolkit: Identify what supported the change — what worked and what didn't work and why.
- Celebrate success with the youth and family.

