

Incorporating the CANS into supervision

A clinical supervisor may ask the following in order to incorporate the CANS into supervision:

- ❖ Were there any items on the CANS you struggled to score for this child/family?
- ❖ Did the child have any elevated scores in the trauma domains?
- ❖ Were there elevated scores across other domains that you believe are somehow related to his/her history of trauma exposure?
- ❖ Do you need additional support “connecting the dots” across areas of need on the CANS using a complex trauma lens and/or with understanding how these needs may fit together?
- ❖ Did your CANS scores drive your treatment plan? How or why not?
- ❖ Do any of the treatment goals fit into core areas of needs/core components of complex trauma?
 - If yes, what interventions might you incorporate into your work with this child to address these needs?
- ❖ What have you done or plan to do to address safety and self-regulation in treatment/services with this child (two very common needs for children with complex trauma)?
- ❖ Are there key people in this child’s life who can assist in addressing any of the child’s needs or building his/her strengths (community/family supports, other professionals)?
- ❖ Have the CANS scores been shared with the child and/or caregiver? Why not or how did this go?
- ❖ Have you provided psychoeducation to the child’s caregivers, parents, school, or other child welfare staff to assist them in understanding (and managing) the child’s behavior in the context of complex trauma?
- ❖ How often do you plan to repeat the CANS during the course of treatment? What is your plan for giving feedback about client change over time, discussing both areas of growth and continued need?
- ❖ Have you identified areas for building family resilience in the caregiver section of the CANS?
- ❖ What are you doing to take care of yourself? Are you making self-care a priority as you do this work?