

Outcomes for children:

# It's time to get this right

We're implementing Transformational Collaborative Outcomes Management (TCOM) in England, through an expert-led, collaborative, not-for-profit approach. Find out how your local authority or service can benefit, and why our sector's stronger by taking this step together.

child-centred

strengths-based

needs-led

evidence-based

decision-making

partnership  
working

improvement

a plan to  
understand  
what works,  
when, where  
and for which  
children

“The relentless pursuit of excellent practice across the system will depend on high quality data being shared and used. At a national level, data should inform policy and legislation about children’s social care; help us target support and challenge to local areas; and facilitate local learning. At a local level, data can ensure that the need for help is identified early; resources are targeted appropriately; services are commissioned effectively and efficiently; risk is managed well; and the right support is put in place for children and their families.

*Putting Children First: Delivering our vision for excellent children’s social care, Department for Education, July 2016 (Using good data to improve practice)*

Join The Centre for Outcomes of Care (OOC) in a movement to improve needs assessment and outcomes management for Children’s and Families Social Care in England – and address some of the longest standing challenges in the system.

In partnership with the founders of Transformational Collaborative Outcomes Management (TCOM) and the Praed Foundation, we are leading the introduction of the TCOM approach to local authorities and providers in England and providing implementation support – through a collaborative, non-profit approach.



## EXECUTIVE SUMMARY

Proven in a growing number of countries worldwide, with an impressive and increasing evidence base, Transformational Collaborative Outcomes Management (TCOM) is a collaborative approach to needs assessment, service planning and outcomes management in social care – one that will improve outcomes and save money.

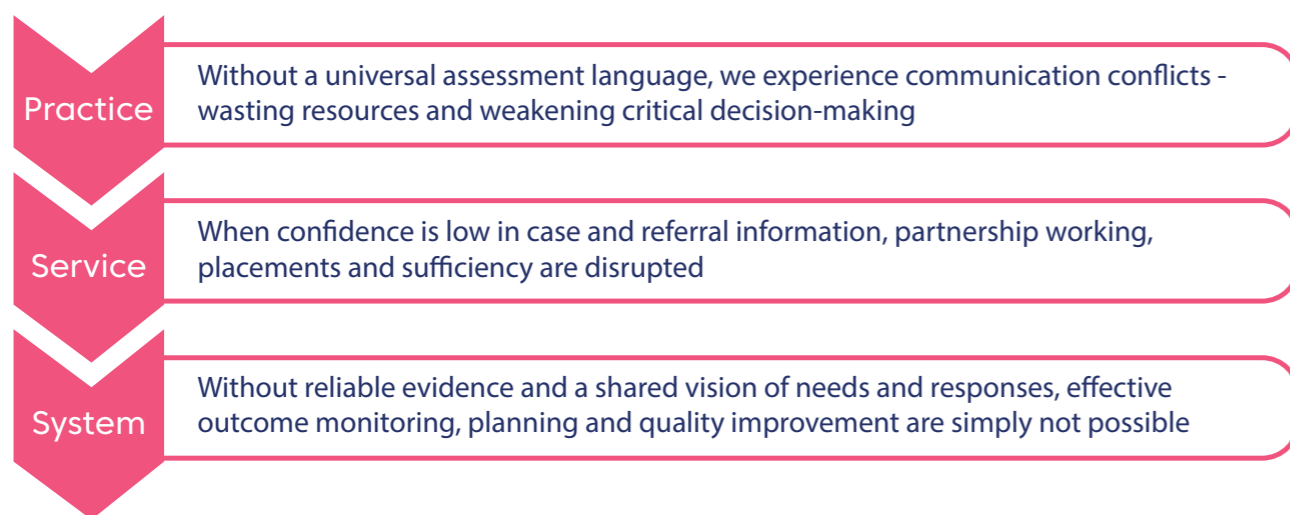
Through TCOM England - a not-for-profit, expert-led initiative - OOC are working with Local Authorities and Providers to implement this approach and provide solutions to some of the longest standing challenges in the social care system.

### Facing the challenge

Care is complex. Resources are pressurised. Decisions are hard to make, and evidence to support those decisions is lacking.

To improve children’s lives, we must unite with a shared vision of needs, service responses and outcomes. **So, where’s the evidence and what are we doing about it?**

To improve our understanding of what works, when, where and for which children, our sector needs a sustainable, long-term solution.

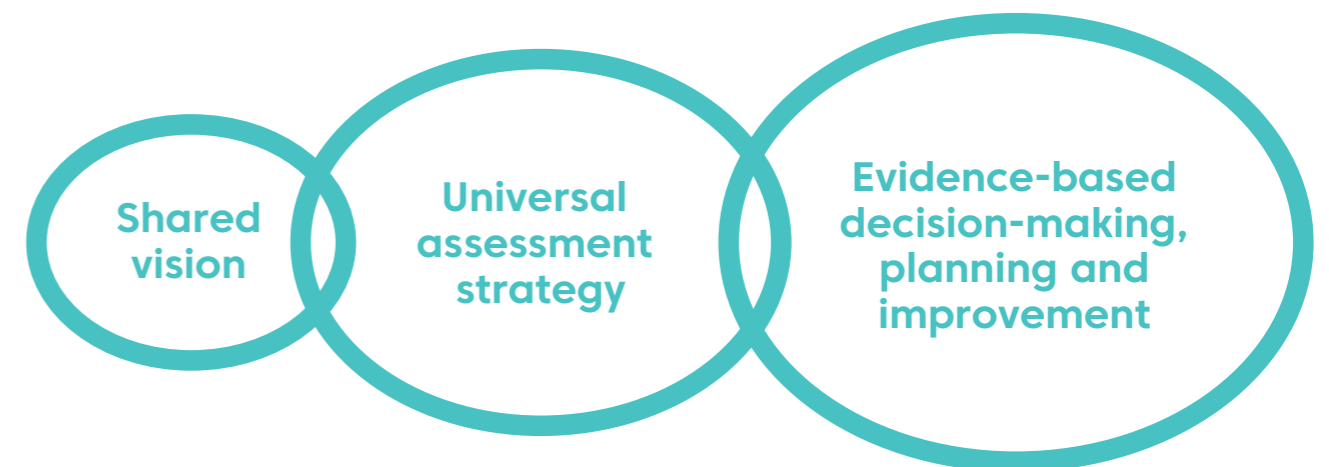


## TCOM England is a sustainable solution that will work for everyone and against no-one

TCOM England provides a **management approach, structured assessment strategy (of open domain tools for use across services) and set of solutions** – all designed to facilitate an effective and integrated approach to addressing the needs of people while monitoring and learning from data and outcomes.

The communimetric assessment tools at the heart of this approach (including the Childhood and Adolescent Needs and Strengths Assessment (CANS) directly guide case planning while building a **reliable, system-wide evidence base to inform decision making and planning** - from immediate case planning to service and system improvement.

The TCOM England data community will provide analysis of non-identifiable data as critical learning, benchmarking and evidence for local authorities, providers and the sector as a whole. A solution that works for everyone and against no-one.



### Our offer: Implementation

Through a collaborative, not-for-profit approach, we’re ensuring that implementation of TCOM England is seamless, expert-led and affordable to implement for all local authorities and independent service providers. That’s because with TCOM, our sector is stronger together.

- **One-off implementation cost tailored to organisational needs** – fully project-managed implementation, software integration, training, data analysis and expert support
- **Free assessment tools (no licenses)** – with low cost annual online accreditation (£10/user/year) – CANS, FAST, ANSA
- **Free ongoing data community insights** – providing ongoing access to non-identifiable insights and benchmarks from across the sector to aid whole-system learning and planning

“ TCOM and its communimetric ”

assessment strategy is arguably the leading theoretically-driven, ethical approach to outcomes management currently in existence for high need children and families – one that will improve outcomes and save money.

We have not only the opportunity to improve child-centred practice, service and care system strategy, but also to contribute to our sector’s wider understanding of what works, when, where and for which children.

How else will we pursue the goal we share – improved outcomes for children looked after, at a cost society can afford?

*Dr Mark Kerr, The Centre for Outcomes of Care*

## In this report:

### 1. Facing the challenge

### 2. Getting it right:

Transformational Collaborative Outcomes Management (TCOM) explained

### 3. Introducing ‘communimetrics’:

Assessment tools for the whole person, the whole system and the whole journey

### 4. How the tools work: Focus on the Child and Adolescent Needs and Strengths Assessment (CANS)

### 5. The TCOM England data community:

Working together to discover what works, when, where and for which children

### 6. Implementation

# 1

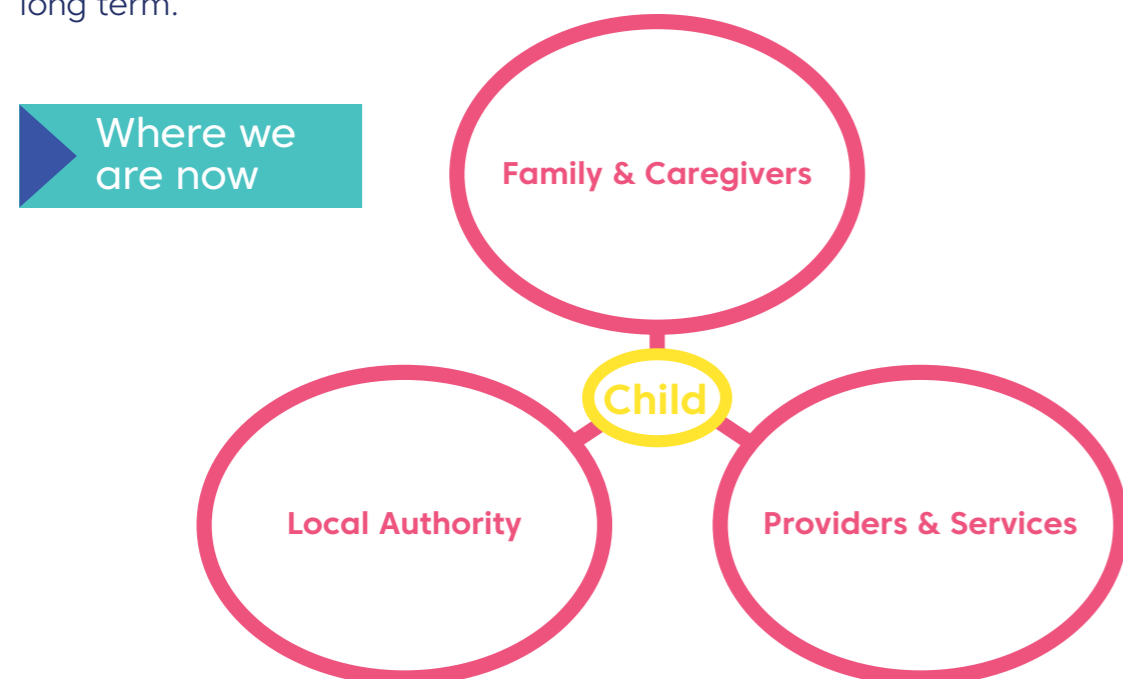
## Facing the challenge

Reliably assessing and communicating needs and strengths - to inform service responses and enable meaningful monitoring of outcomes - is a continuous challenge and one shared by all local authorities, providers and practitioners.

**Commissioners and practitioners need confidence** that complex care services are working together effectively and making confident decisions with a shared view of needs. They need a reliable way to monitor outcomes, measure the effectiveness of services, and make those critical financial decisions in the short and long term.

**Providers need confidence** in referral information, a structured way to assess needs, strengths and outcomes in partnership with case workers and local authorities. They need a reliable means to provide transparency, demonstrate effectiveness of services, and access the insights that will help them ensure their services meet the needs of children, young people and families,

**As a whole sector we need a long-term plan** to better understand what works, when, where and for which children.

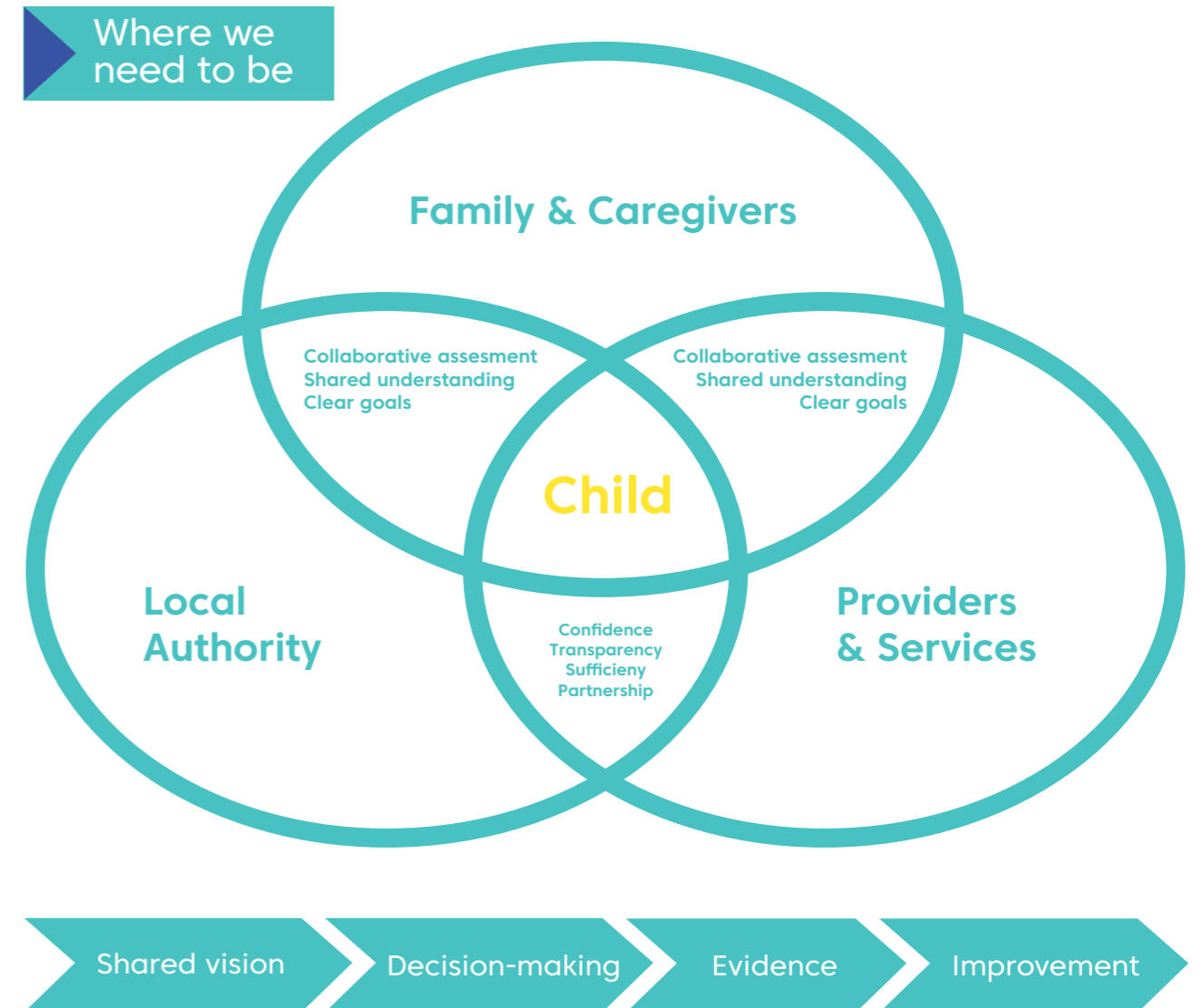


## How can we work together to fix this?

As part of our ongoing work to facilitate improvements in evidence-based practice and outcomes management, and in response to the clear needs of local authorities and providers, The Centre for Outcomes of Care, led by Dr. Mark Kerr, undertook a rigorous 2-year review of needs and outcomes assessment metrics that might be part of the solution.

**Our work has highlighted an important opportunity for local authorities and providers in England to adopt the**

**Transformational Collaborative Outcomes Management (TCOM) approach and assessment tools** – already successfully used and proven in a growing number of countries worldwide but, so far, not taken up in England. This simple, shared vision approach addresses the most complex problems in the care system. It's an important opportunity for the sector in England and the vulnerable people we serve.



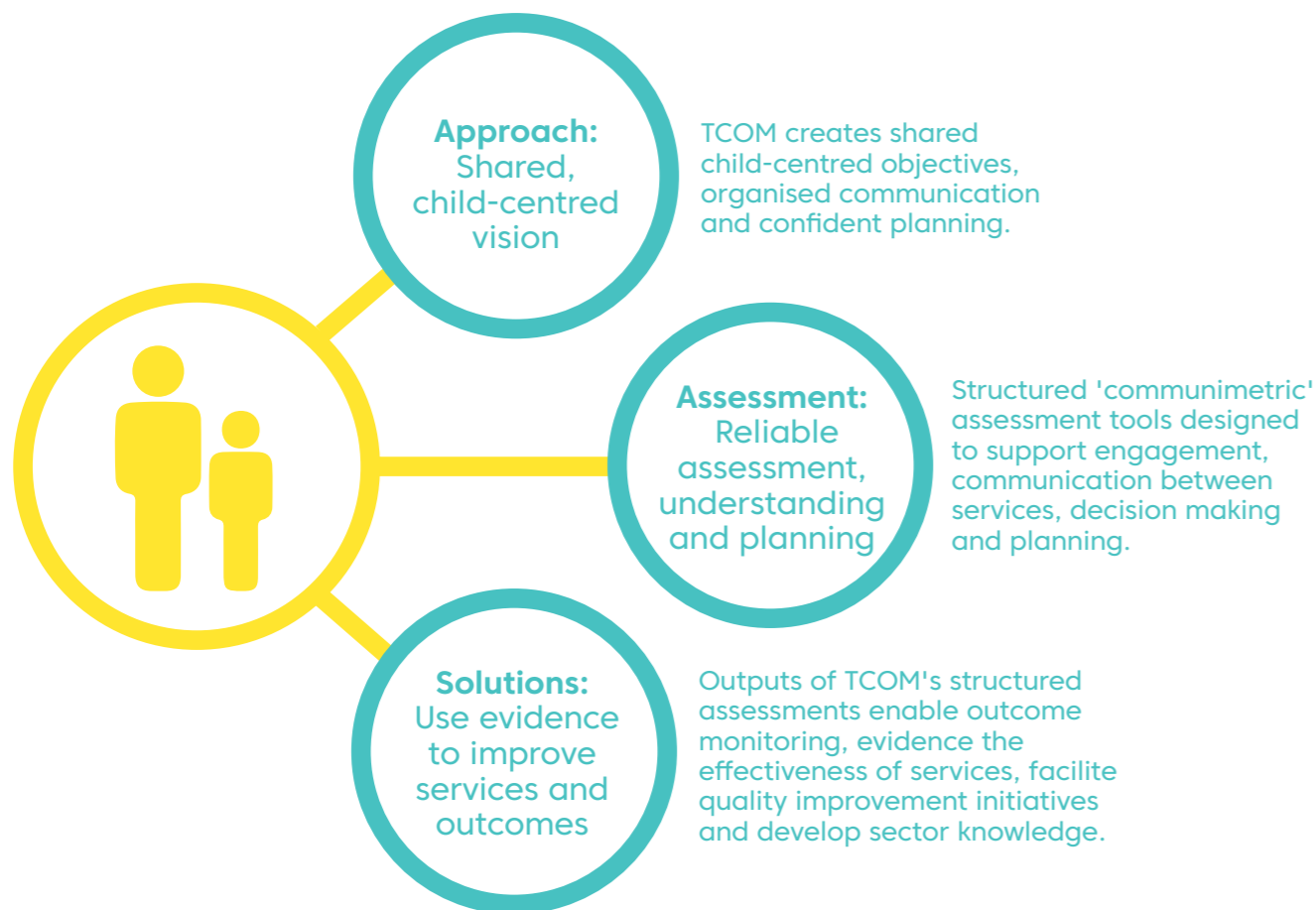
# 2

## Getting it right: Transformational Collaborative Outcomes Management (TCOM) explained

England has long needed a valid and reliable assessment method, to communicate the needs and strengths of children in or on the edge of care, and as importantly, their caregivers.

**Going further, Transformational Collaborative Outcomes Management (TCOM) provides the management approach, structured assessment**

**strategy and whole-system solutions our sector needs** to facilitate a more effective and integrated approach to meeting the needs of people, while monitoring and learning from their outcomes. It's a chance to make real progress in practice, quality improvement and commissioning strategy.



### Improved communication and decision-making support is at the heart of the TCOM approach

Validated and proven in numerous care systems worldwide, the 'communimetric' assessment strategy at the heart of TCOM provides a reliable, shared understanding of individual needs, strengths and goals – one that is compatible between services and with the requirements of outcome monitoring and management, service assessment and commissioning strategy.

The TCOM approach was originally developed by Dr John Lyons in the United States, currently Professor of Public Health at the University of Kentucky.

This approach and the associated assessment tools are used across every US state and through implementations in every continent except Antarctica.

Dr John Lyons continues to guide policymakers and practitioners using TCOM to more effectively tailor support services to the needs of children and young people. The TCOM approach and tools were placed within the Praed Foundation to ensure that they are freely accessible for all to use for the public benefit and cannot be commercialised.

“ Human services, including health care, are often complex because of the number of different people involved in the process of care. In complex systems, participants always have different perspectives and often have competing responsibilities and objectives. Transformational Collaborative Outcomes Management is a framework for managing such a complex system. Within this framework there is a philosophy, an assessment strategy, and a set of tactics all designed to facilitate an effective and integrated approach to addressing the needs of people.

– Dr John Lyons, founder of TCOM and The Praed Foundation

# 3

## Introducing ‘communimetrics’: Assessment tools for the whole person, the whole system and the whole journey

Often, the complex sources of information and observations that inform case planning are confused and even conflicting.

Communimetrics restructure the process of assessment, planning and monitoring in a way that makes sense to all and supports every process in the complex system.



Childhood & Adolescent Needs and Strengths Assessment



Family Advocacy & Support Tool



Adult Needs & Strengths Assessment

### What communimetrics are

At the heart of the Transformational Collaborative Outcomes Management (TCOM) approach, Communimetrics are ‘universal’ assessment tools that can be

used across an entire agency or system of care to support planning, outcome monitoring and partnership working.

Communimetrics measure and communicate needs and strengths in the contexts that matter for real-world care planning: symptoms, risk, functioning, care giver measures and strengths.

Communimetrics use a universal assessment language to improve engagement and communication. They are collaboratively completed and enable a shared view between services.

Communimetric assessment items, ratings and action levels are designed around service planning requirements. Reliable and clearly defined 4-point ratings of both needs and strengths provide, as outputs, the actions that must be taken in case planning.

Communimetrics enable a person-centred view. They record real need and real change, not need and change in an abstract environment where reality is masked by services.

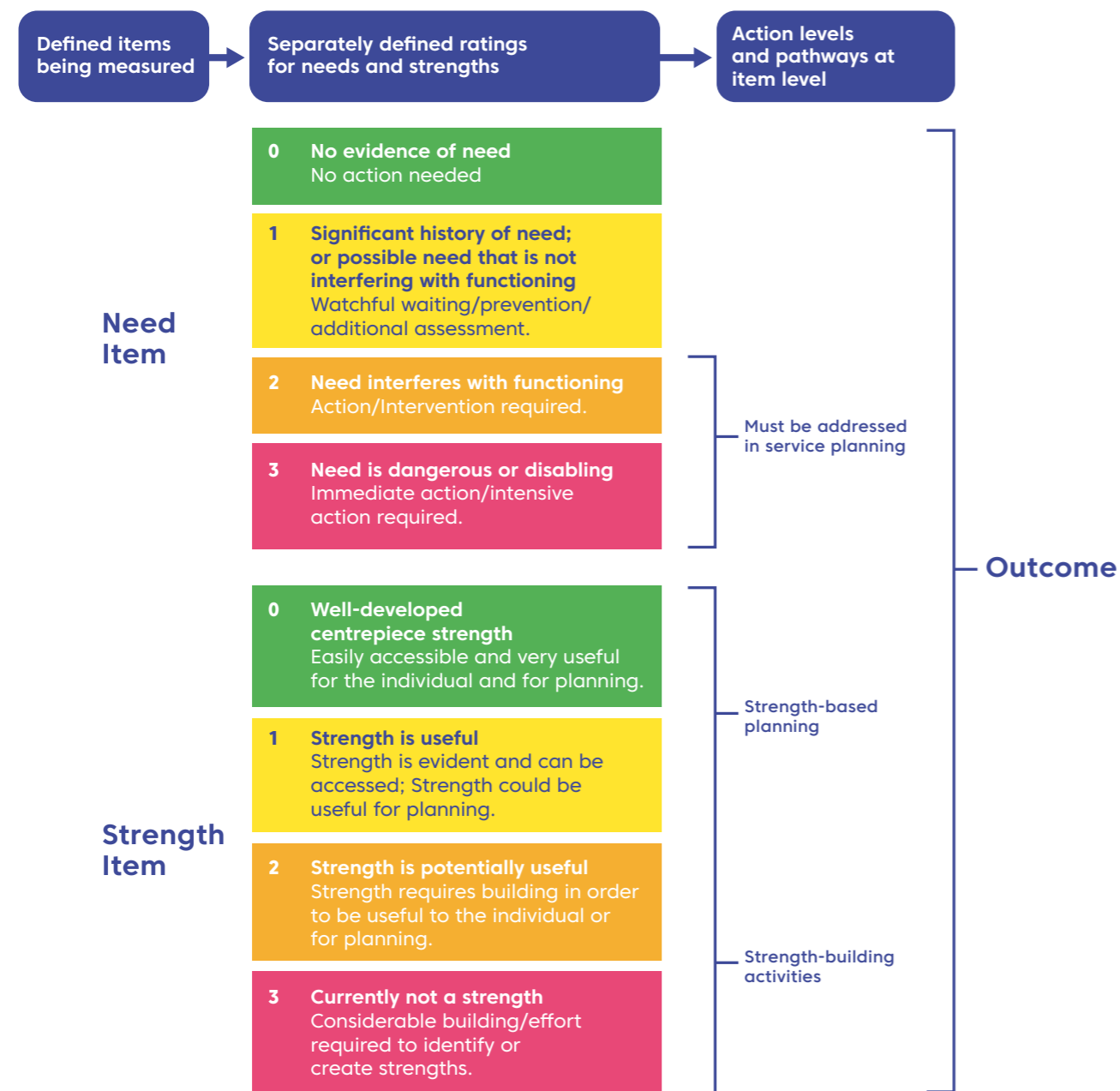
Communimetrics provide consistent, valid, robust data as an evidence-base for service and sufficiency planning, quality improvement and outcome monitoring.

### What communimetrics are not

Communimetrics are not new or experimental. They are arguably the leading, theoretically based, care-focused assessment tools in existence globally and are tried, tested and proven in all US states and across many countries to support case planning, outcome monitoring and service/system solutions.

Communimetrics are not performance measures. They facilitate transparency and partnership working via a shared vision of service users, actions and outcomes – and demonstrate service effectiveness based on needs and outcomes.

## Communimetric assessment



## Communimetric decision-making

### Action Levels for “Need” Items

**0 – No Evidence of Need** – This rating indicates that there is no reason to believe that a particular need exists. Based on current assessment information there is no reason to assume this is a 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 (e.g. a child/youth who has been suicidal in the past). We know that the best predictor of future behaviour is past behaviour, and that such behaviour may recur under stress, so we would 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/youth’s 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/youth who is not attending school at all or an acutely suicidal child/youth would be rated with a “3” on the relevant need.

### Action Levels of “Strength” Items

**0 - Centerpiece Strength.** This rating indicates a domain where strengths exist that can be used as a centerpiece for a strength-based plan. In other words, the strength-based plan can be organized around a specific strength in this area.

**1 - Useful Strength.** This rating indicates a domain where strengths exist and can be included in a strength-based plan but not as a centerpiece of the plan.

**2 - Identified Strength.** This rating indicates a domain where strengths have been identified but that they require significant strength building efforts before they can be effectively utilized in a strength-based plan.

**3 - No Strength Identified.** This rating indicates a domain in which efforts are needed in order to identify potential strengths for strength building efforts.



# 4

## How the tools work: Focus on the Child and Adolescent Needs and Strengths Assessment (CANS)

The Child and Adolescent Needs and Strengths Assessment (CANS) is the primary communimetric tool at the heart of the TCOM approach. There are two companion metrics, the Family Advocacy Support Tool (FAST), suitable for lower level needs, and the Adults Needs and Strengths Assessment (ANSA) for adult services – both of which follow the same theoretical and structural principals as the CANS. This summary focuses on the CANS as an introduction to the principles of the communimetric tools.

### What does the CANS do?

The CANS is a comprehensive, trauma-informed, behavioural health assessment of child and family needs and strengths, designed to support decision making, collaboration and planning.

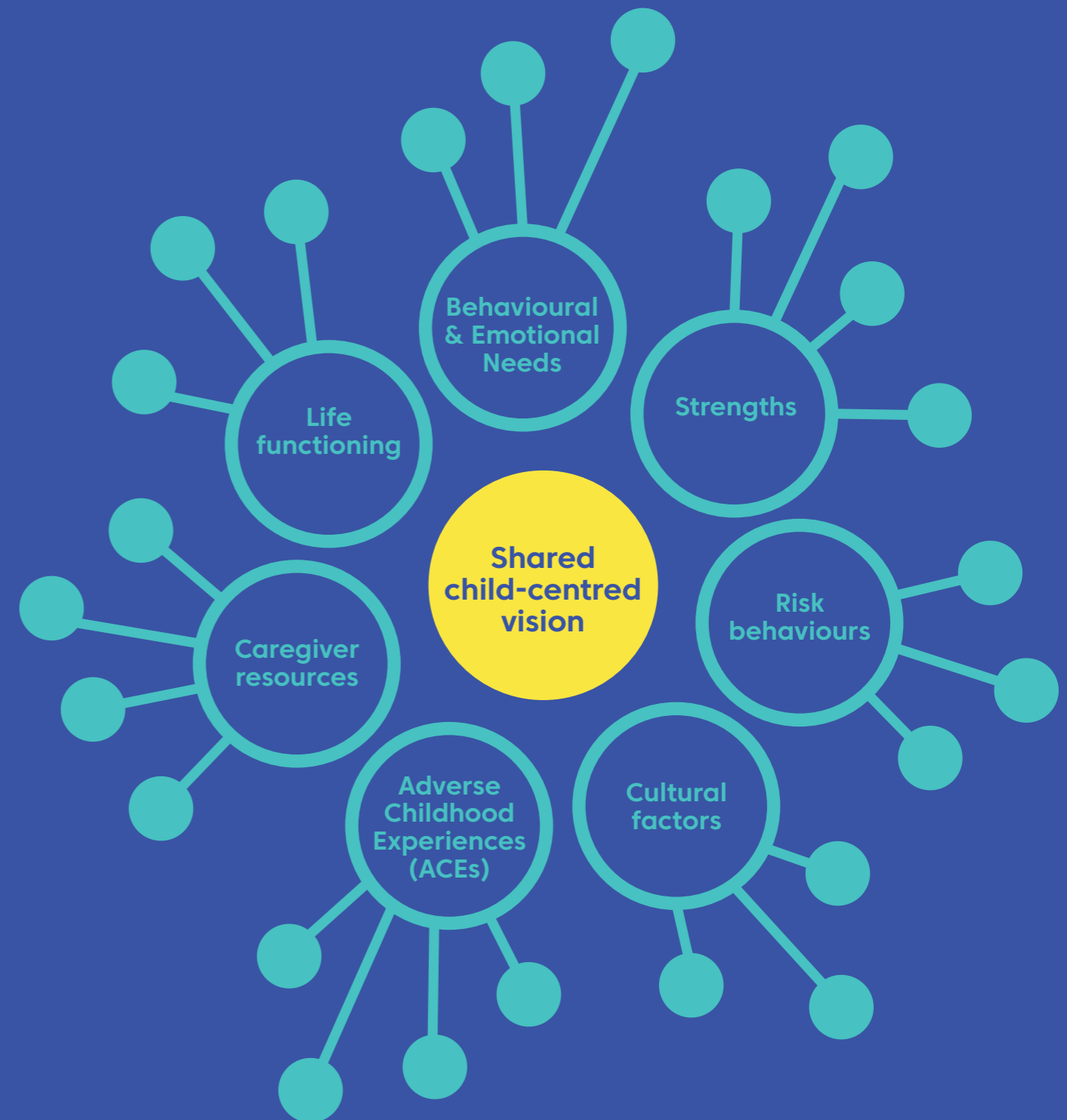
The CANS uses a consistent and validated 4-level rating system (a rating of 0-3), to assess needs and strengths items in a structured way within 7 comprehensive domains, and across a variety of specialist versions and modules.

### How do assessments support decision making?

**Reliable measures:** CANS assessments use a consistent and universally defined 0-3 rating to measure needs and strengths – shown to improve reliability

**Designed for decision-making:** Each rating translates directly into an action level for service planning and prioritising next steps

**Universal language helps services plan together:** CANS assessment items are consistent with information required across services, including diagnostic criteria, providing a universal language and shared vision for the child and family to support key processes such as referrals and placement matching



## How does rating work?

Ratings are separately defined for needs and strengths items, always translating directly into actions and pathways for service planning.

This process immediately informs the detail of case planning while also providing the opportunity to gain service-level, and system-level perspectives of needs, outcomes and trends across groups and populations, through the summing and analysis of data.

| 6. SOCIAL FUNCTIONING  |  |
|--|--|
| This item rates social skills and relationships. It includes age appropriate behavior and the ability to make and sustain relationships. Social functioning is different from Interpersonal (Strengths Domain) in that functioning is a description of how the child/youth is doing currently. Strengths are longer-term assets. |  |
| <p>Questions to Consider</p> <ul style="list-style-type: none"> <li>• Is the child/youth pleasant and likeable?</li> <li>• Do same age peers like the child/youth?</li> <li>• Do you feel that the child/youth can act appropriately in social settings?</li> </ul>  | <p>Ratings and Descriptions</p> <p>0 <i>No current need; no need for action or intervention.</i><br/>No evidence of problems and/or child/youth has developmentally appropriate social functioning.</p> <p>1 <i>Identified need requires monitoring, watchful waiting, or preventive activities.</i><br/>There is a history or suspicion of problems in social relationships. Child/youth is having some difficulty interacting with others and building and/or maintaining relationships.</p> <p>2 <i>Action or intervention is required to ensure that the identified need is addressed; need is interfering with child/youth's functioning.</i><br/>Child/youth is having some problems with social relationships that interfere with functioning in other life domains.</p> <p>3 <i>Problems are dangerous or disabling; requires immediate and/or intensive action.</i><br/>Child/youth is experiencing significant disruptions in social relationships. Child/youth may have no friends or have constant conflict in relations with others, or have maladaptive relationships with others. The quality of the child/youth's social relationships presents imminent danger to the their safety, health, and/or development.</p> |

Example of a CANS assessment item, with statement of definition, ratings and descriptions.

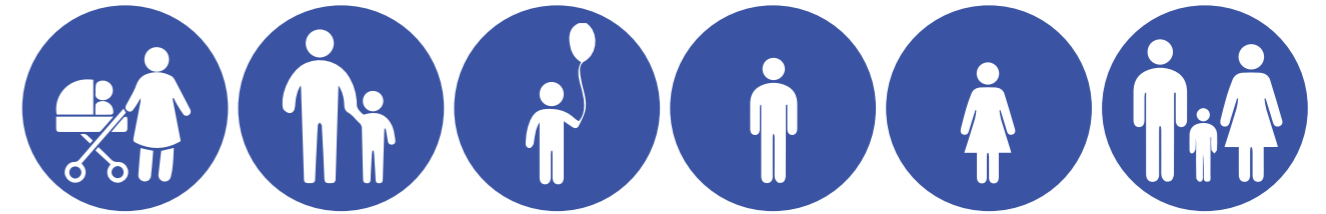
## Who is the CANS communimetric for?

The CANS can be used in all services. There are versions suitable for children, young people and adults. There are separate modules for children aged 0 – 4 yrs, as well as for care leavers, meaning that the CANS is suited to a whole life course approach.

CANS assessment items can be bespoke, beyond the Core 50 items. Items can be developed to meet the needs of individual services and

authorities. There are also specialised 'trigger modules' for high risk needs and behaviours including Childhood Sexual Exploitation, Absconding, Fire setting, Gang Involvement, Sexualised Behaviour and Substance Misuse.

Critically, the CANS also assesses caregivers, helping identify needs and strengths to inform placement or reunification decisions.



## The CANS is easy to use, supported by expert-led online training and £10/year certification

The CANS is easy to learn and is well-liked by parents, commissioned providers and other partners in the services system because it is easy to understand, makes sense across services and does not necessarily require scoring in order to be meaningful to an individual child and family.

With training, any educated adult or professional can learn to complete the tool reliably (although some applications will require a higher degree.)

To support assessment and ensure reliability, statements of definition are developed to accompany each item – and are used in training to support inter-rater reliability.

## Monitoring domain outcomes with the CANS

CANS domain scores have been shown to be valid outcome measures in residential care, intensive community treatment / care, foster care and treat-

ment foster care, community mental health, and youth offending programs. Outcomes can be monitored using the CANS in different ways.

Items that are initially rated a '2' or '3' (ratings requiring action) are monitored over time to determine the percent of children and young people who move to a rating of '0' or '1' (where required action is reduced or no longer needed).

Dimension scores can be generated by summing items within each of the domains (Problems, Risk Behaviours, Functioning, etc.). These scores can be compared over the course of intervention, placement or period in care.

As data is collected and analysed, CANS-based algorithms or decision models can be used to guide service responses based on reliably evidenced outcomes.



Shared vision

Decision-making

Evidence

Improvement

## Evidence supporting the CANS

The CANS has been extensively peer-reviewed, a requirement for metric development often overlooked.

Use of the CANS is also supported by a growing wealth of evidence regarding

decision-making in practice. **Relevant journal articles and case studies have been collated into an evidence pack, available on request.**

“ In the US, the applications of CANS-based decision models have documented dramatic impacts on service systems. In Illinois, use of a simple decision model for residential treatment resulted in savings of approximately \$80 million per year in residential treatment in the late 1990's. In Philadelphia, their use of a decision model for Treatment Foster Care reduced lengths of stay dramatically and saved the city \$11 million in the first year of use.

*The Praed Foundation*

# 5

## The TCOM England data community: Working together to discover what works, when, where and for which children

The TCOM approach and process of using communimetric assessments can bring immediate, everyday benefits to practitioners and service providers and of course those in our care, helping us better understand, communicate and respond to individual and family needs.

However, as important are the longer-term benefits of pooling our non-identifiable data via the TCOM England 'data community' - where the insights we gain every day will feed into our wider understanding of what works, when and where for which children.

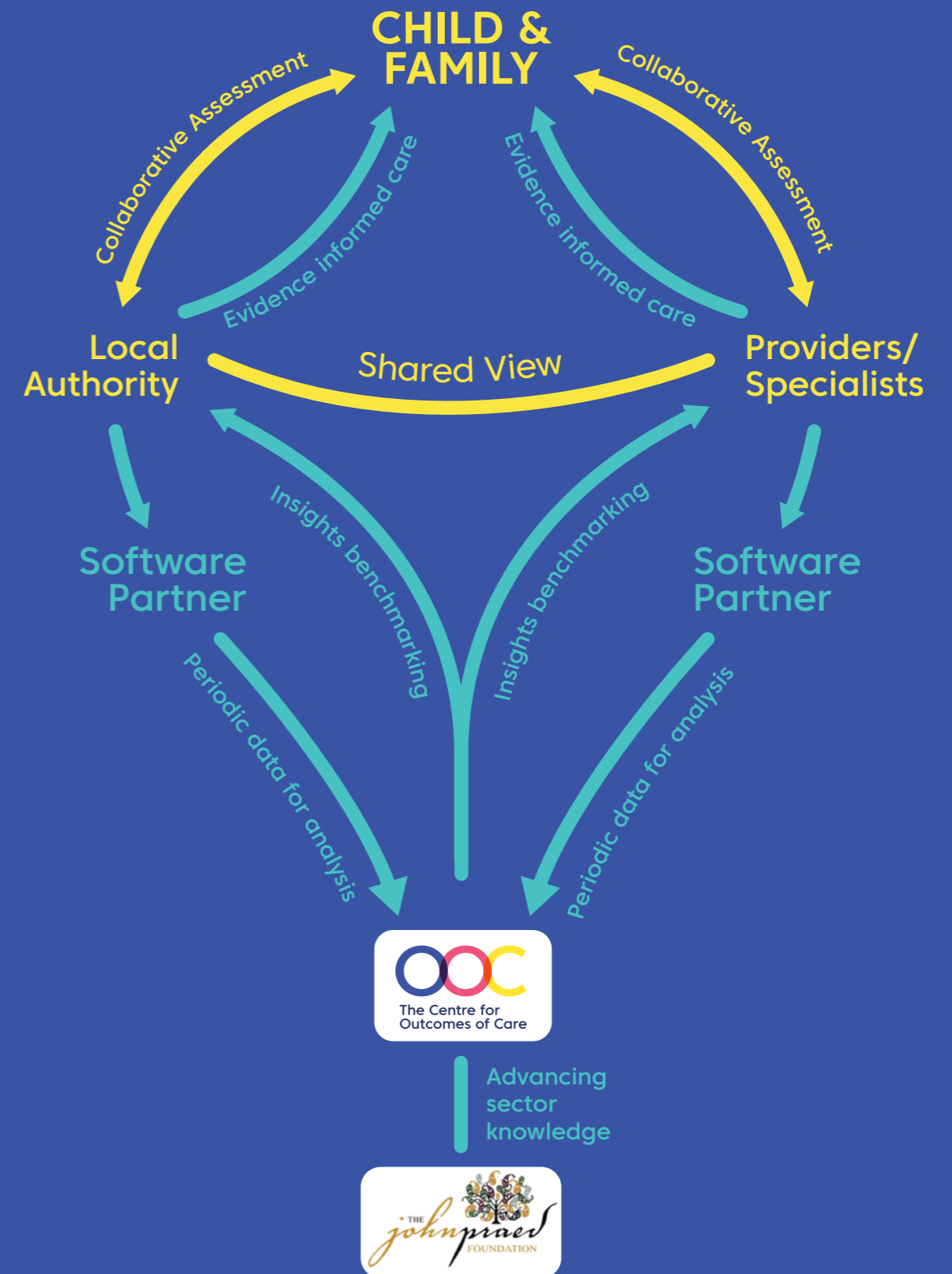
Thanks to partnerships with software providers, software will allow management of TCOM communimetrics, monitoring of outcomes at individual and system level, support for clinical decisions and evaluation of the effectiveness of services.

At the same time, non-identifiable data will be able to be fed back to local authorities and providers for benchmarking, and to benefit sector and academic research.

“ A key principle of a TCOM England data community is that all data analysed and shared to will be non-identifiable – both in terms of individual cases, and in terms of specific local authorities and providers. ”

As such, it is a neutral data community that works for everyone and against no-one – creating that important shared vision and supporting effective partnership working in the delivery of services and improvement of outcomes.

– Dr Mark Kerr, The Centre for Outcomes of Care



Shared vision

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# 6

## Implementation

Through a collaborative, non-profit approach, we're ensuring that implementation of TCOM England is seamless, expert-led and affordable to implement for all local authorities and independent service providers. That's because with TCOM, our sector is stronger together.

- **One-off implementation cost tailored to organisational needs** – fully project managed implementation, software integration, training, data analysis and expert support
- **Free assessment tools (no licenses)** with low cost annual online accreditation (£10/user/year) – CANS, FAST, ANSA

- **Free ongoing data community insights** – providing ongoing access to non-identifiable insights and benchmarks from across the sector to aid whole-system learning and planning
- **Part of a movement to improve knowledge and understanding** of needs and outcomes across the sector – a movement that works for everyone and against no-one.

### Contact us to discuss your opportunity to be part of TCOM England.

Dr Mark Kerr, The Centre for Outcomes of Care  
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