CANS Documentation Cheat Sheet

Reviewed by the BastionGPT Clinical Advisory Board · September 2026 · Reproduces no CANS items or anchors

The CANS (Child and Adolescent Needs and Strengths) is a communimetric assessment copyrighted by the Praed Foundation, free to use with training and annual certification, that rates a child's and caregiver's needs and strengths on four action levels that say what to do, not how severe something is. There is no context-free total score, state and program versions differ, and every action-level need belongs in the plan. Defensible charting names the version and window, the rater's certification, the sources, a justification for each actionable item, consensus, and the plan linkage.

Version and reassessment type state variant, form, purpose
Do: name the state or program version and Praed core, the age form, and whether this is initial, periodic, transition, or discharge.
Pitfall: "CANS 2.0 completed": local numbering differs from the Praed core, so a bare number identifies nothing.

Window and information sources 30 days unless the version says otherwise
Do: date the window; list youth and caregiver interviews, collateral, observation, and records; flag records-only completion.
Pitfall: an undated window, or chart abstraction presented as a family-engaged assessment.

Rater and certification current, for this version
Do: name the rater, role, and version-specific certification with expiry; note whether the program requires it in the note.
Pitfall: portal access or last year's course mistaken for current certification in the version the program mandates.

Actionable needs, justified what to do, in your own words
Do: for each action-level need: what is happening, the effect on functioning or safety, the source, what already helps.
Pitfall: manual anchor wording pasted as justification, or a watchful-waiting rating treated as nothing to do.

Strengths and caregiver ratings separate targets
Do: name centerpiece and usable strengths with their planning use, strengths to build, and caregiver needs rated on the caregiver.
Pitfall: caregiver items rated from the child's behavior; strengths listed with no use in the plan.

Consensus, disagreement, no total pattern, not a sum
Do: record whose account supports each rating and how consensus was reached; report the actionable pattern, not a sum.
Pitfall: "CANS score 27, moderate," or two informants' views averaged into one number.

Plan linkage and reassessment the golden thread
Do: trace every action-level need to a plan response, use the strengths, set the next CANS per program cadence.
Pitfall: actionable items that never reach the plan; "improved 3 to 1" with no evidence of what changed.

Before the note is signed

- [ ] Version and state variant named, with the form
- [ ] Rating window dated and sources listed
- [ ] Certification current for the rater and version
- [ ] Every actionable need justified in original prose
- [ ] Strengths and caregiver items rated separately
- [ ] Disagreement recorded, no total score reported
- [ ] Each action-level need traced to the plan

Drafting with AI

Give it the facts: version and form, purpose, window dates, sources, rater and certification, each actionable item with the evidence and its source, strengths, caregiver findings, disagreements, and the plan goals.

"Draft CANS documentation: initial care coordination CANS, 6 to 20 form, window 08/09 to 09/08, youth and mother interviewed and school collateral; school functioning immediate action, mood and anxiety action level, uncle and guitar as strengths, caregiver supervision need; youth disputes the school rating."

Never paste patient-identifying information into consumer AI tools. BastionGPT is HIPAA-compliant with a signed BAA on every plan.

4 action levels	No total score	Versions differ	Praed copyright
what to do, not how severe	report the actionable pattern	by state, program, and course	open domain, free with certification

CANS Documentation Template

Copy or print for your practice · Adapt fields to your organization's, payer's and jurisdiction's documentation requirements. Contains no CANS items or anchor text.

Setting: | Patient (initials): | Date: | Clinician:

Version + state variant + form: | Purpose (initial / reassessment / discharge):

Rating window and sources

Window dates (30 days unless the version says otherwise) · youth interview · caregiver interview · collateral (school, prior providers) · records reviewed · records-only completion disclosed

Rater and certification

Name, role, and credentials · version-specific certification with date passed and expiry · program requirement or audit convention noted

Actionable needs with justification

Each need at an action or immediate-action level: what is happening, effect on functioning or safety, source, what already helps · watchful-waiting items with the reason

Strengths and caregiver ratings

Centerpiece and usable strengths and their planning use · strengths to build · caregiver domain rated on the caregiver, not on the child

Consensus, disagreement, and summary

How consensus was reached · whose account supports each actionable rating · disagreement recorded, not averaged · actionable pattern reported; no total score unless the program defines domain sums or an algorithm

Plan linkage

Each action-level need traced to a goal, intervention, referral, safety response, or monitoring step in the plan · usable strengths built into interventions

Reassessment and change

Next CANS per the program cadence or sooner on significant change · change described in evidence, distinguishing real change from better information quality

Clinician (name and credentials): | Signature: | Date: