Building Bridges

Outcome Measurement across the Sectors with the Child and Adolescent Functional Assessment Scale

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SickKids®

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Child and Adolescent Functional Assessment Scale

Child and Adolescent Functional Assessment Scale (CAFAS)

Age 5–19
Administration Type Youth Caregiver
Administration Time 10 minutes (approx)
Formats Online (FAS Outcomes) Paper
Languages English Spanish
Qualification Level A-level

- The CAFAS assesses functioning across 8 critical life subscales assessing the youth as well as two scales to assess caregiver functioning.
- The CAFAS yields both a total score and 10 individual subscales scores. The total score represents the total level of dysfunction and can be used to recommend intensity of treatment required.
- The individual subscale scores can be used to inform the focus of treatment and to monitor change in behavior over time.

History

- Child and Adolescent Functional Assessment Scale – Dr. Kay Hodges, 1994
- Mandated by Government as Ontario CYMH outcome measure for 120 provider organizations in 2000, according to directive of Auditor General
- 4 large data sets; >50 journal publications
- Excellent reliability and validity
- Used in Canada: 65 provincial, municipal, and private institutions in five provinces (AB, BC, MB, ON, SK)
- *In Ontario: now 107 CYMH provider organizations*
- In the US: 2,500 state, county institutions across 48 states and six sectors (e.g. mental health, education)

What Does CAFAS Measure?

- Impairment in day-to-day functioning in children and adolescents from kindergarten through the 12th grade, who have or are at risk for, emotional, behavioral, substance use, psychiatric or psychological problems.
- It permits assessing impairment, choosing corresponding goals that address these areas of impairment, and identifying which of the child's strengths will likely be helpful in achieving these goals.
- CAFAS scores have been found to: correlate with actual intensity of treatment, involvement with juvenile justice, school related problems and child and family risk factors; predict restrictiveness of care, total cost of all services received, number of bed days and number of days of service six and twelve months post-intake; and predict future contact with the law and poor school attendance.

What Does the CAFAS Look Like?

Home	School	Community
Behaviour Towards Others	Moods & Emotions	Self Harm
Substance Abuse	Thinking	Material Needs
	Social Support	

For each subscale the rater reads through the items at each level starting at the Severe level until he/she finds a description of the youth.

Once a description has been found the youth is assigned the item's corresponding score for the subscale.

After assigning the subscale score, the rater moves on to the next subscale.

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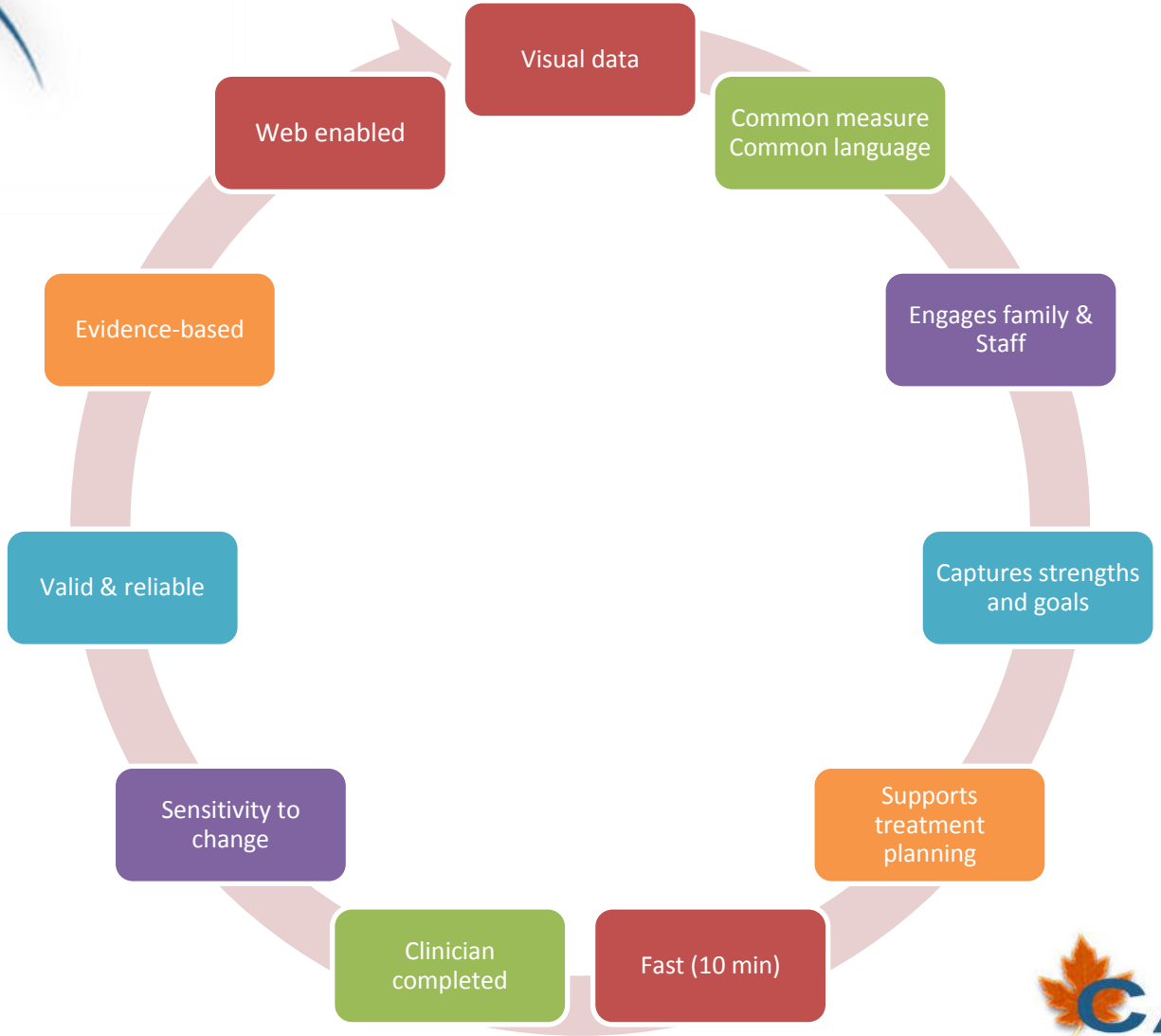
Evaluations

- Entry CAFAS (T1): Date when youth enters into program, treatment or behavioral class. Best Practice to complete CAFAS every 3 months, and one upon completion (exit T14).
- Rate behaviors one-month period immediately prior to start of active treatment/school/behavioral class. If necessary, go outside of the rating period to capture referral behaviours.

How to rate

- At T1 - capture the behaviour for which the referral was made--even if it falls outside of the rating period and especially if the behaviour is going to be a focus of treatment/program/class
- Most SEVERE demonstrated behaviour in the past month
- All 8 Client subscales must be score and at least one set of Caregiver subscales

Advantages of the CAFAS



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School/Work Subscale

How the child functions at school or work

Includes the following:

- Attendance at school or on the job
- Behaviour in the classroom or at work
- Credits - Academic or work performance

SEVERE
- Out of school
- Serious threat
- Failing most
- Special setting not working

MODERATE
- Frequently truant/suspended
- In or need special setting
- Known by principal
- Failing 1/2 courses

MILD
- Minor problems: attention, lower productivity
- Problems that can be handled by teacher

Home

- Carrying out expectations in the home
  - chores, rules, responsibilities, self-care
- Behaviour towards family members
- Run away behaviour is also scored
- If in residential setting and at home on weekends, rate the severest behavior—

SEVERE
- Not in home
- Serious threats
- Intimidation
- Major damage
- Runaway over night; where not known
- Must be monitored
- Interferes with caregiver doing day to day

MODERATE
- Persistent non-compliance with rules
- Runaway overnight; where known
- Moderate damage
- Profanity (not okay)

MILD
- Frustrating to caregiver
- Balking chores
- Repeatedly told to do chores

Community

How the child behaves in the community

- Items refer mostly to participation in illegal acts
  - Violation of persons or property
  - Fire setting in home included
- Do not endorse if: youth was the victim; act was accidental; youth was acting in self-defense
- Do endorse if: youth gets into legal trouble; reliable information ("good faith") from others about youth's delinquent behavior.

SEVERE

- In system or should be in system for serious offence: confronting victim, robbery, selling drugs, prostitution, deliberate damage, sexual assault, deliberate fire starting with malicious intent

MODERATE

- In system, or at risk for moderately serious offence: not confronting victim, stealing, sexually inappropriate-adults concerned, repeatedly playing with fire & damage could occur
- Probation

MILD

- Minor, single offences: vandalism, shoplifting, playing with fire

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Behaviour Toward Others

How the child relates to others

- Patterns of behaviour towards others
- Displays of anger
- Poor judgment
- Inappropriate sexual behaviour
- Cruelty to animals

SEVERE

- Behavior consistently odd
- Behavior could cause serious harm
- Abuse/sexual abuse to others
- Constant intimidation
- Deliberately & severely cruel to animals

MODERATE

- Fighting
- Promiscuity
- Inappropriate sexual behavior
- Spiteful/vindictive
- Risky behaviors could cause injury
- Bullying
- Gang activity
- Frequent anger outburst

MILD

- Poor judgement
- Easily annoyed
- Annoying to others
- Poor peer relations

Moods & Emotions

- Anxiety
- Fear
- Worry
- Depression
- Separation anxiety
- *Does not include anger/hostility*

(scored on Behaviour Towards Others)

SEVERE

- Viewed as odd/strange
- Depression or Anxiety with school incapacitation, social isolation or suicidal intent

MODERATE

- Depression or Anxiety at least ½ the time, with one disturbance (e.g., sleep, eating, energy)
- Emotional blunting from trauma
- Separation anxiety

MILD

- Self-critical
- Easily distressed when make mistakes
- Sad or anxious if criticized
- Notable emotional restriction

Self-harmful Behaviour

Score all self-destructive behaviour:

- Suicidal behaviour
- Behaviour not life-threatening but not trivial
- Behaviour trivial and unlikely to cause serious injury

SEVERE

- Intent to die/clear plan
- Self-destructive behavior which could result in death (e.g., eating disorder, running in front of car)

MODERATE

- Talking about killing self
- Cutting or other non-accidental self-harm/ or mutilation

MILD

- Non-accidental self-harm that is unlikely to cause harm (e.g., scratching skin, picking skin)

Substance Use

- Alcohol
- Street drugs
- Inhalants
- Misuse of prescription drugs
- Misuse of over-the-counter drugs
- Tobacco use is not scored
- *Do not rate religious or cultural use*
- *12 or younger use lower band of items*
- *Score all "hard" drugs at severe level*

SEVERE

- Lifestyle centers around
- Withdrawal symptoms
- Expelled or fired
- Intoxicated or high more than 2x/week
- Pregnant while using
- Blackouts
- Drinks alone

MODERATE

- Use interferes with functioning
- Use gets person into trouble (e.g., arguments, breaks rules)
- Use endangers (e.g., rape)

MILD

- Regular usage
- High or intoxicated at least once/week

Thinking

- Items refer to behaviours that may warrant a referral to a psychiatrist
  - Dysfunctional thought processes or communications
    - Pathological thought processes
    - Obsessions, fantasies, hallucinations
  - Disorders including autism, PDD, schizophrenia can be scored here

Pre-requisite Behaviours

SEVERE

- *Cannot attend a normal school classroom, does not have normal friendships, & cannot interact adequately in the community due to*

MODERATE

- *Frequent difficulty in communication/behaviour OR specialized setting needed due to any of the following*

MILD

- *Occasional difficulty in communications, in behavior, or in interactions with others*

Thinking

SEVERE

- Incoherent communication; loosening of associations
- Flight of ideas
- Echolalia
- Idiosyncratic language
- Frequent hallucinations/delusions
- Pattern of short-term memory loss
- Disorientation to time/place

MODERATE

- Disorganized communications
- Frequent obsessions/suspicion
- intermittent hallucinations
- frequent marked confusion, or evidence of short-term memory loss
- Pre-occupying fantasies or cognitions

MILD

- Eccentric/odd speech; odd beliefs
- If older than 8 years- magical thinking
- Unusual perceptual experiences

Caregiver Scales

Primary

- Lives with youth or youth will go home to (e.g., bio parents, grandparents, adoptive parents)
- Foster parent if youth is going to live with them long term--not going home

Non-Custodial

- Parent who does not live with youth but has psychological impact on youth

Surrogate

- Foster parent
- Residential facility

Caregiver Resources
Material Needs

- Basic material needs:
  - food
  - housing (safety, privacy)
  - clothing
  - medical attention
  - reasonably safe neighbourhood

SEVERE

- Needs for food, shelter, medical or neighbourhood safety are not met & severe risk to health

MODERATE

- Frequent negative impact or major disruption in youth needs for food, shelter, medical, or neighborhood safety

MILD

- Occasional negative impact on youth due to disruption in youth needs for food, shelter, medical, or neighborhood safety

Caregiver Resources Family/Social Support

- *Caregiver* behaviour is rated
  - Relative to child's needs
    - Parental judgment
  - Supervision problems
    - Conflict problems
    - All forms of abuse

SEVERE

- Severe lack of resources, youth needs not met
- Gross impairment of judgement (e.g., substance, mental)
- Rejecting, doesn't want youth home
- Risk of abuse
- Youth kicked out with no provisions
- Not protecting youth who was severely traumatized
- Severe domestic abuse
- Openly unlawful or approves of youth being unlawful

MODERATE

- Youth developmental needs exceed resources
- Marked impairment of judgement
- Family conflict
- Not supportive of traumatized youth
- Domestic violence
- Threat of violence

MILD

- Unable to provide warmth
- Frequent arguments
- Poor family relations & problem solving
- Inconsistent parenting
- Inadequate supervision/firmness

Caregiver: Family/Social Support

SEVERE

- Severe lack of resources, youth needs not met
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Data Management

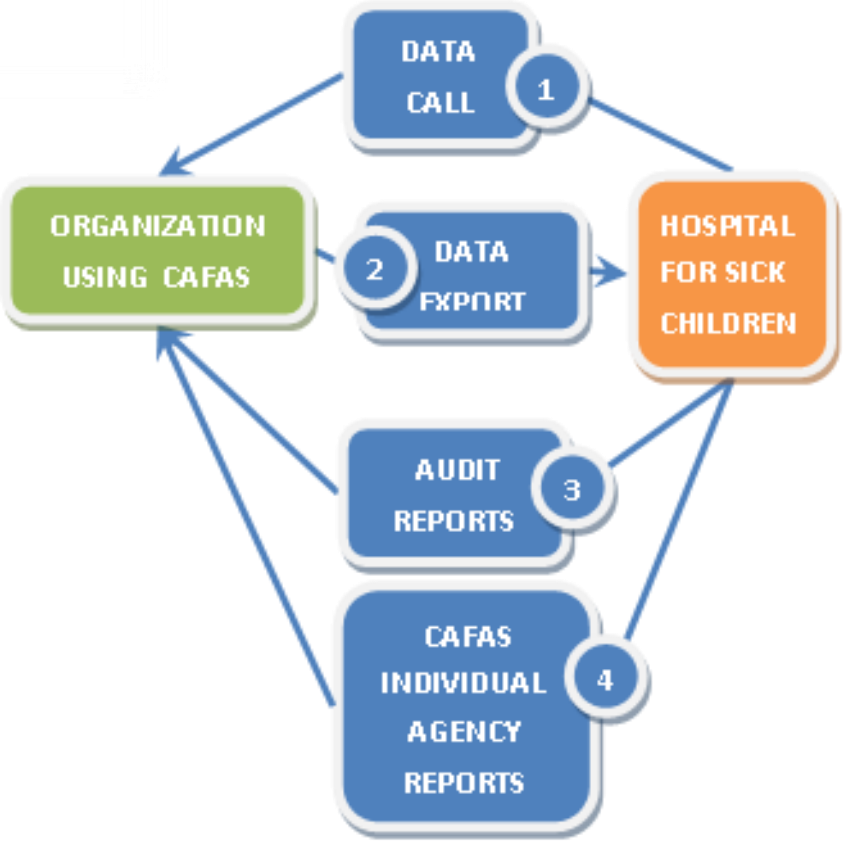

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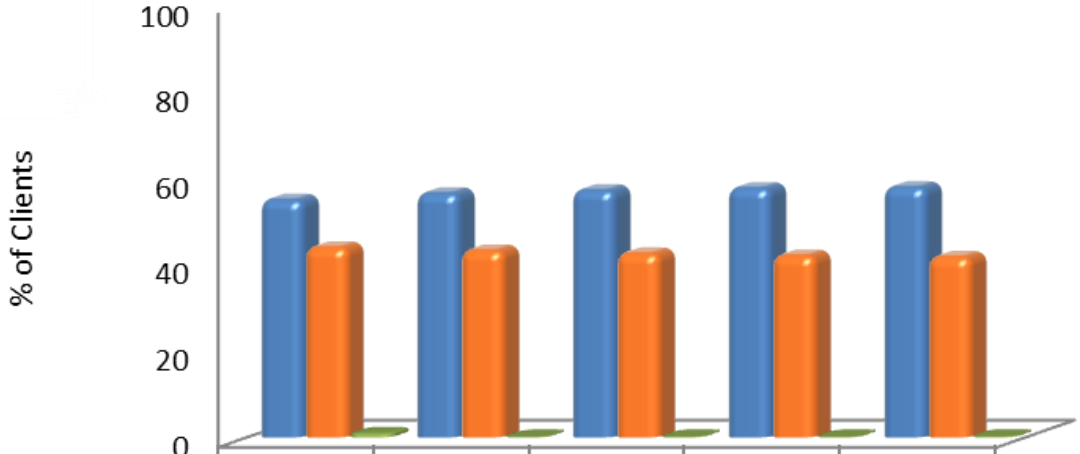
Table 2.1 Number and Regional Distribution of Mandated Agencies Submitting Data

Region	2006		2007		2008		2009		2010		
			Participant agencies	Agencies submitting data	Participant agencies	Agencies submitting data	Participant agencies	Agencies submitting data	Participant agencies	Agencies submitting data	No. of Analyzable Cases Submitted
Central East	11	10	15	13	15	14	15	13	15	14	4,734
Central West	14	14	16	15	16	16	16	15	15	15	3,141
Eastern	14	12	14	13	14	14	14	14	14	13	2,883
Hamilton-Niagara	9	9	9	8	8	8	8	8	8	8	1,979
North East	6	5	6	5	6	5	6	6	6	5	2,229
Northern	9	9	11	9	10	8	10	8	10	8	2,454
South East	6	6	6	6	6	6	6	6	6	6	2,292
South West	17	16	21	19	19	18	19	17	19	18	4,292
Toronto	20	17	21	18	21	19	21	19	22	19	3,731
Total	106	98	119	106	115	108	115	105	115	106	28,082

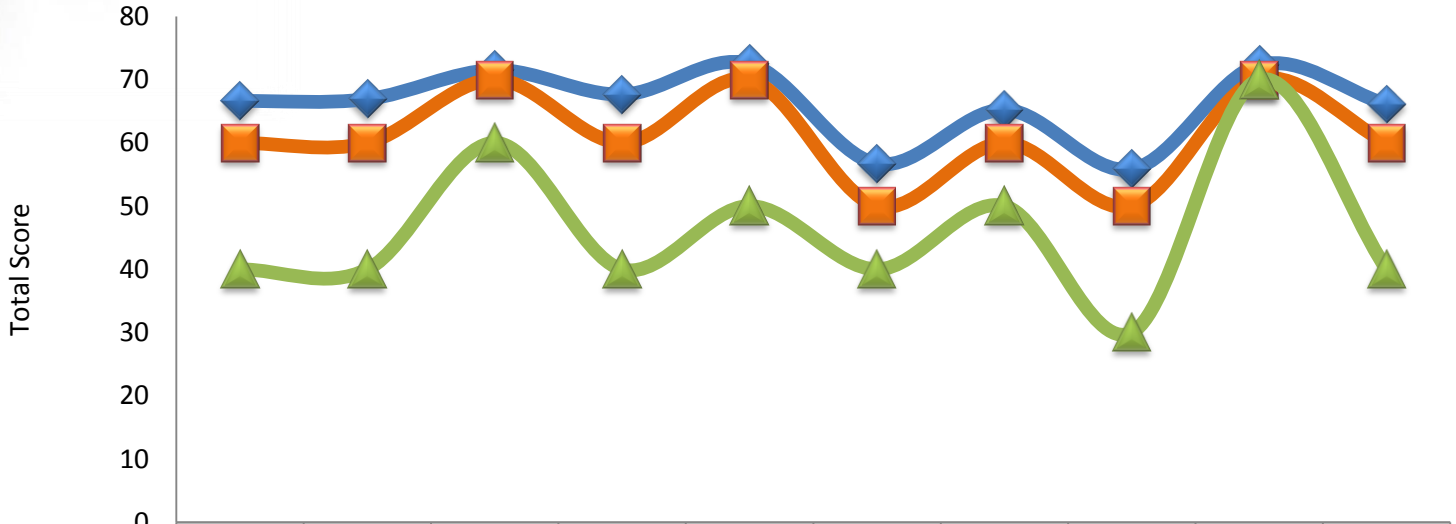
Figure 3.1 Gender Distribution of Children and Youth Receiving CMH Services and CAFAS Rating



	2006	2007	2008	2009	2010
Boys	55.0	56.5	57.2	57.7	57.9
Girls	44.0	43.3	42.6	42.1	41.8
Unreported	1.0	0.2	0.2	0.2	0.3

Figure 4.4 CAFAS Total Score at Entry to Treatment: Ontario and Regions – 2010

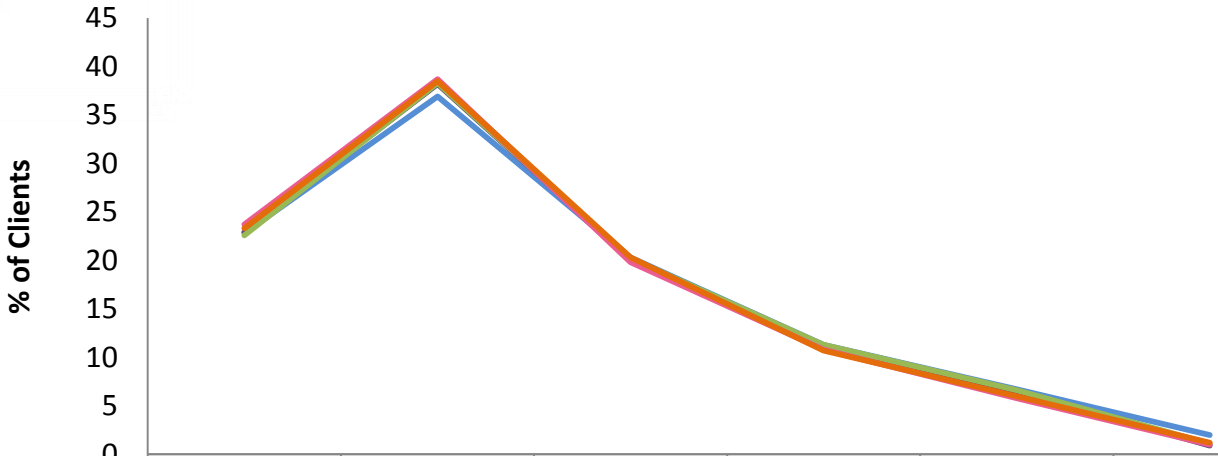
Ontario: N=28,082|CE: N=4,695|CW: N=3,120|ES: N=2,823|HN: N=1,952|NE: N=2,215|NO: N=2,425|SE: N=2,607|SW: N=4,243|TO: N=3,667



	Ontario	CE	CW	E	HN	NE	N	SE	SW	TO
Mean	66.6	66.9	71.5	67.6	72.5	56.7	65.2	55.8	72.3	66.1
Median	60	60	70	60	70	50	60	50	70	60
Mode	40	40	60	40	50	40	50	30	70	40

Figure 4.6 Severity of CAFAS Rating at Entry to Treatment for the Interval 2006-2010

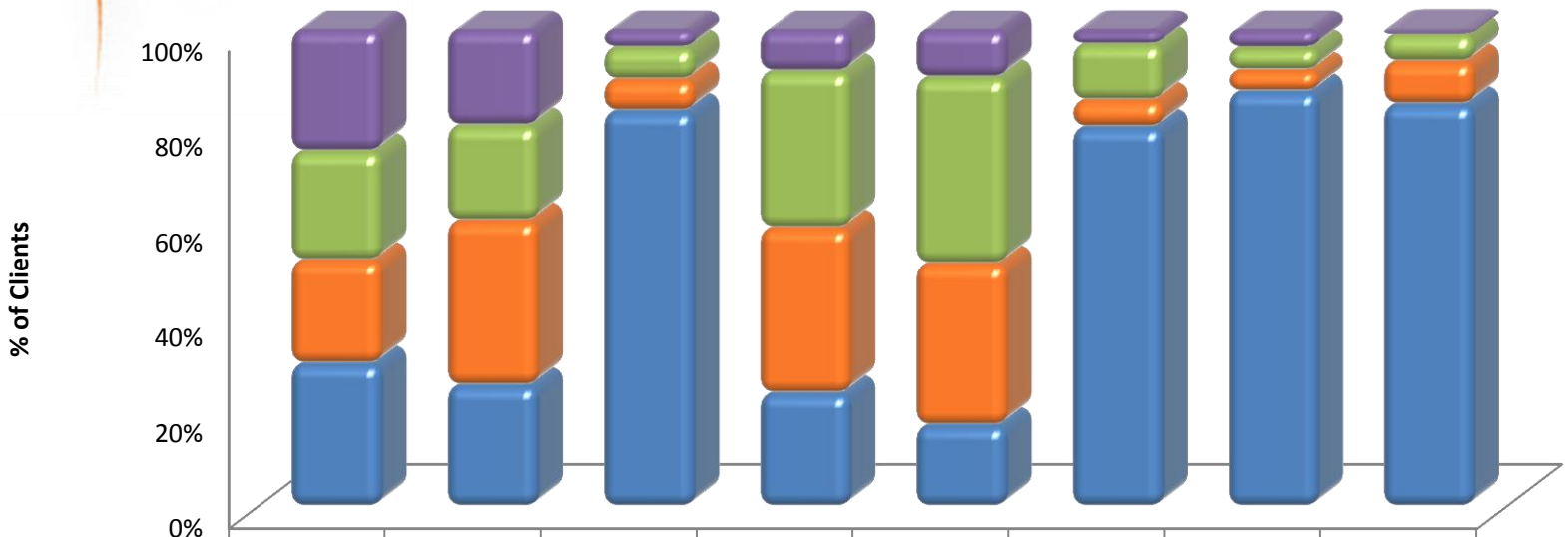
2006: N=18,255|2007: N=23,566|2008: N=26,638|2008: N=23,566|2009: N=26,862|2010: N=27,747



	0-30	40-70	80-100	110-130	>140	Missing
2006	22.8	36.9	20.3	11.3	6.7	2.0
2007	22.9	38.2	20.2	11.1	6.5	0.9
2008	22.6	38.3	20.2	11.3	6.6	1.1
2009	23.7	38.7	19.8	10.8	5.8	1
2010	23.3	38.5	20.3	10.7	6	1.2

Figure 4.14 Functioning on CAFAS Subscales at Entry to Treatment

(N varies between 27,977 and 28,015 because of missing scores on different subscales)



	School	Home	Community	Behavior Towards Others	Moods/ Emotions	Self-Harm	Substance Use	Thinking
Severe (30)	25.5	20.1	3.8	8.8	10.1	3.1	3.8	1.0
Moderate (20)	22.9	20.0	6.7	32.8	39.1	11.7	4.7	5.8
Mild (10)	21.7	34.5	6.6	34.7	33.9	5.7	4.5	8.9
No/Minimal (0)	29.9	25.4	82.9	23.7	17.0	79.5	87.0	84.3

Figure 4.16 Average CAFAS Subscale Score at Entry to Treatment (T1) by Sex

Sample size for Boys varies between 16,188 and 16,214 and for Girls between 11,693 and 11,700 because of missing scores on different subscales

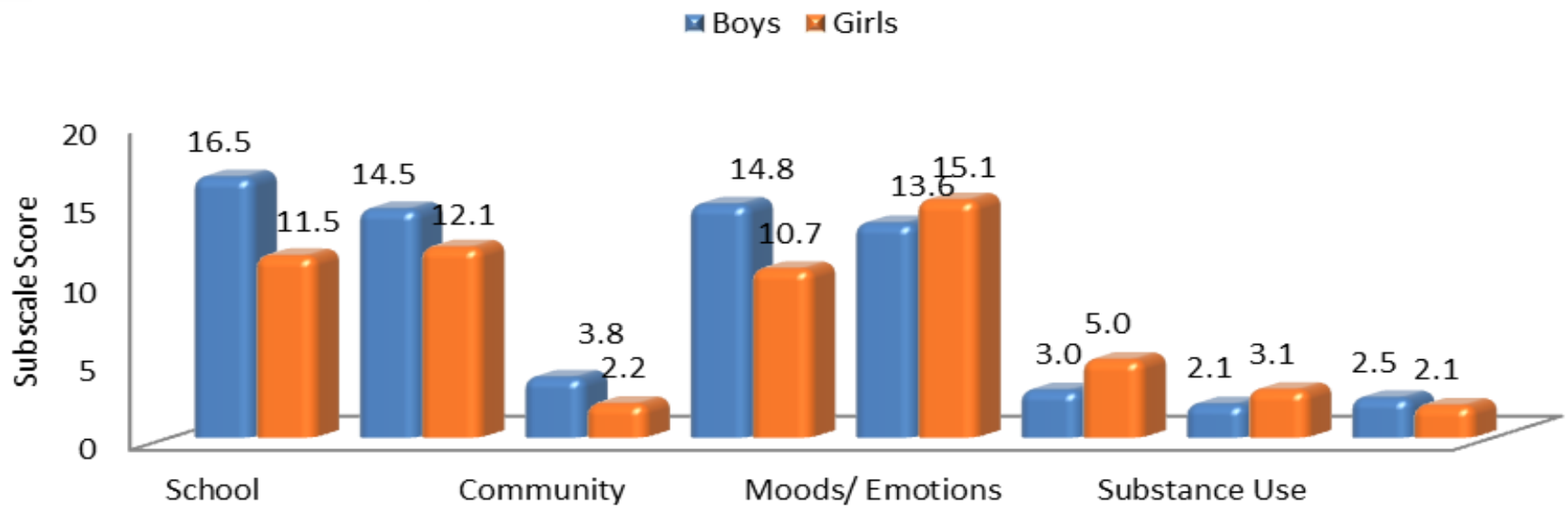
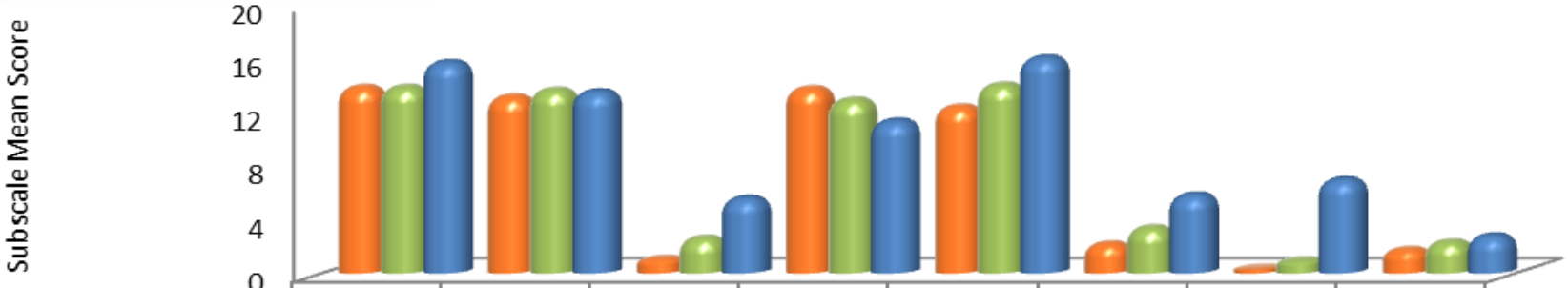


Figure 4.17 Average CAFAS Subscale Score by Age Groups at Entry to Treatment

Sample size varies because of missing scores on different subscales: Early Childhood (6-9yrs) sample: varies between 7,148 and 7,150 Middle Childhood (10-14yrs) sample: varies between 12,521 and 12,546 Adolescence (15-17yrs) sample: varies between 8,312 and 8,325



	School	Home	Community	Behavior towards others	Moods/ Emotions	Self-Harm	Substance use	Thinking
Early Childhood	13.9	13.2	1.1	13.8	12.4	2.2	0.4	1.8
Middle Childhood	13.9	13.7	2.7	12.9	14.0	3.4	1.0	2.4
Adolescence	15.7	13.5	5.6	11.3	16.0	5.8	7.0	2.8

Figure 5.4 Change in Average CAFAS Total Score from Treatment Entry to Last CAFAS (N=10,848)

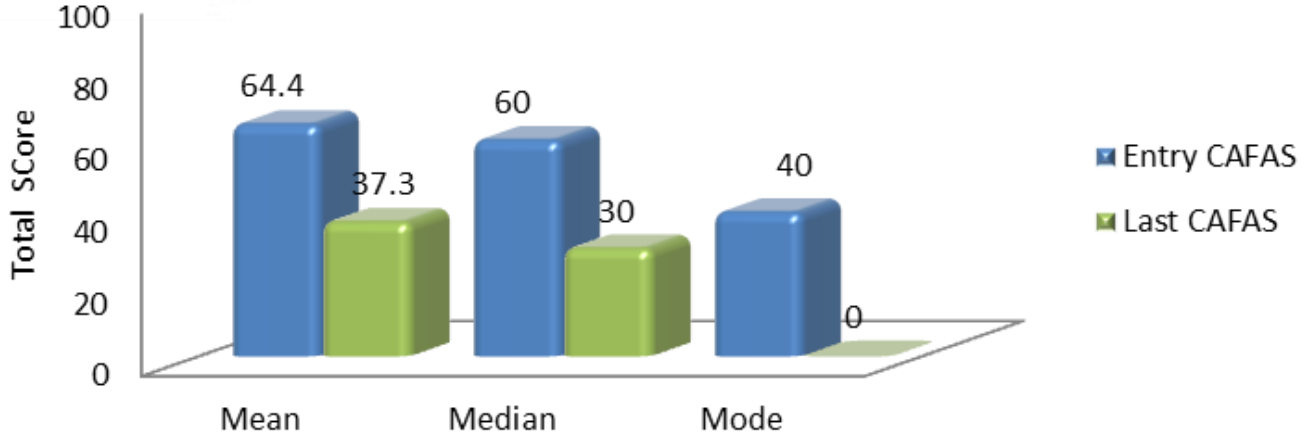


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Figure 5.6 Severity of CAFAS Rating at Entry to and Last CAFAS (N=10,848)

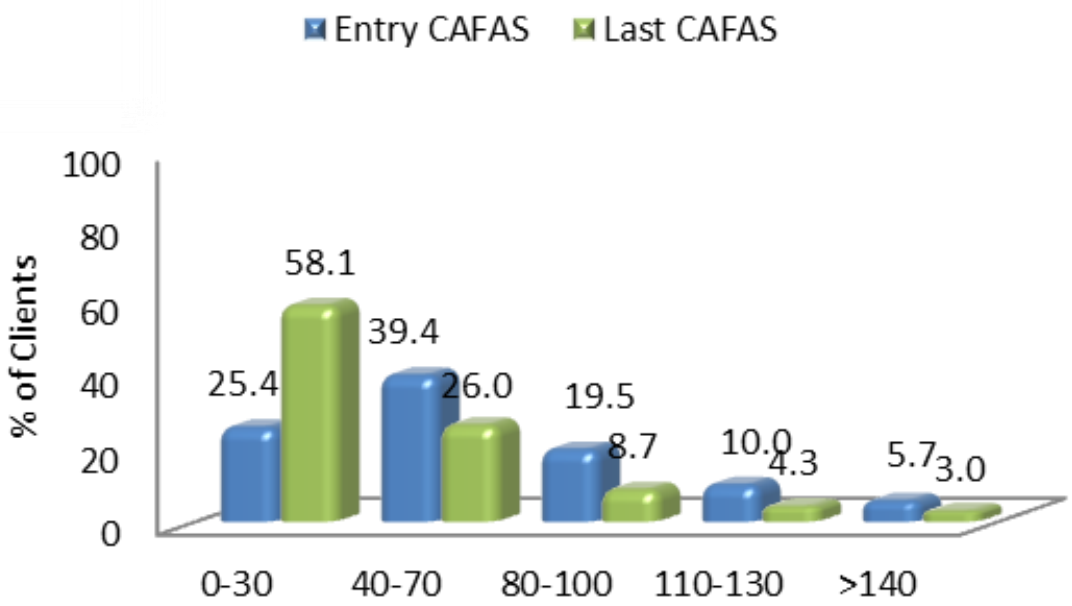

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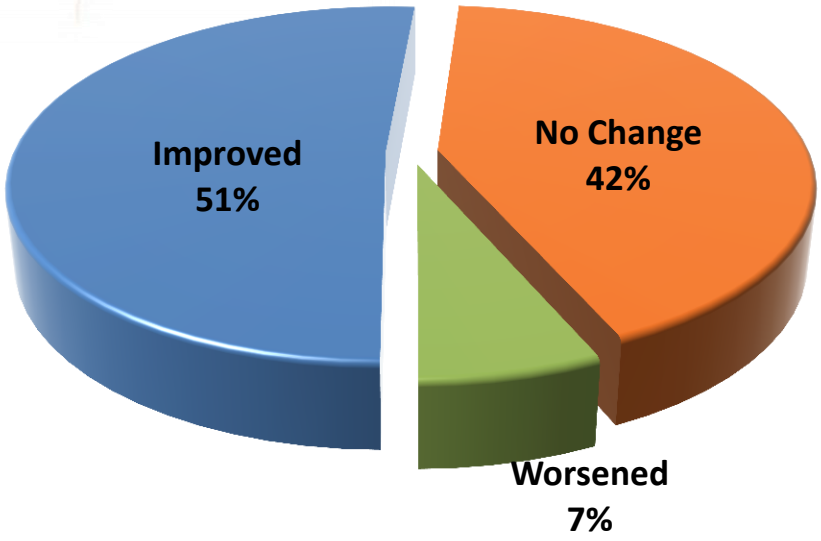
Figure 5.7 Change in Overall Dysfunction Group from Entry to Last CAFAS (N=10,848)



A difference score of 20 points or greater carries clinical significance over and above statistical significance, as reflected by an effect size of 0.70

An effect size of 0.7 represents a moderate to large effect in magnitude and indicates that the mean of the treated group is at the 76th percentile of the untreated group as defined by Cohen (1988).

Figure 5.10 Change in Average CAFAS Total Score from Treatment Entry to Last CAFAS By Sex

Boys: N=6,256|Girls: N=4,557

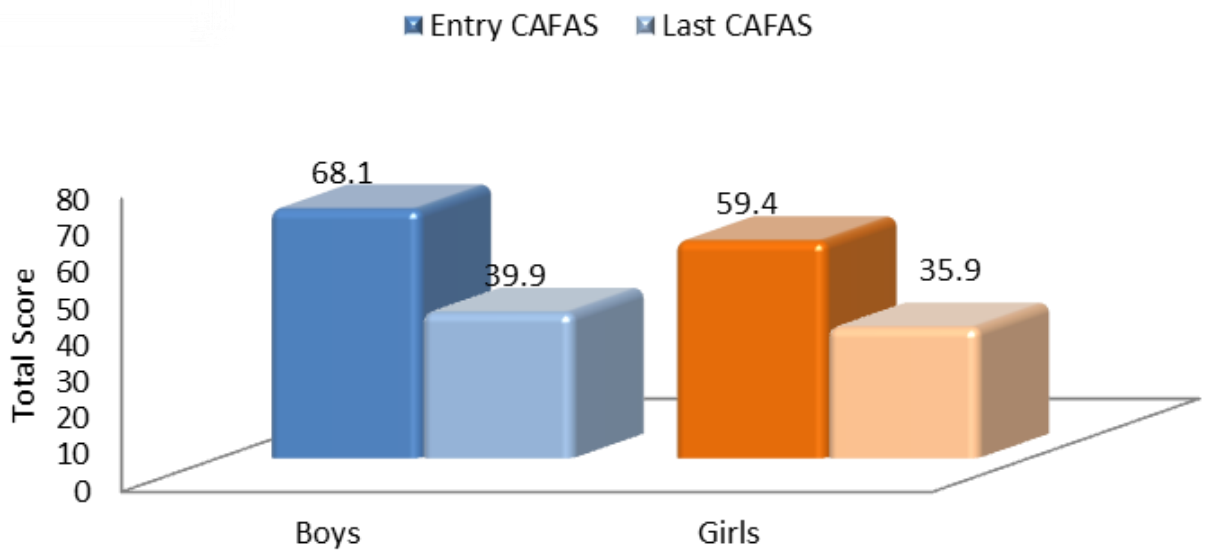


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Figure 5.11 Change in Average CAFAS Total Score from Treatment Entry to Last CAFAS By Age Group

Early Childhood (6-9yrs): N=2,637| Middle Childhood (10-14yrs): N=4,763|
Adolescence (15-17yrs): N=3,448

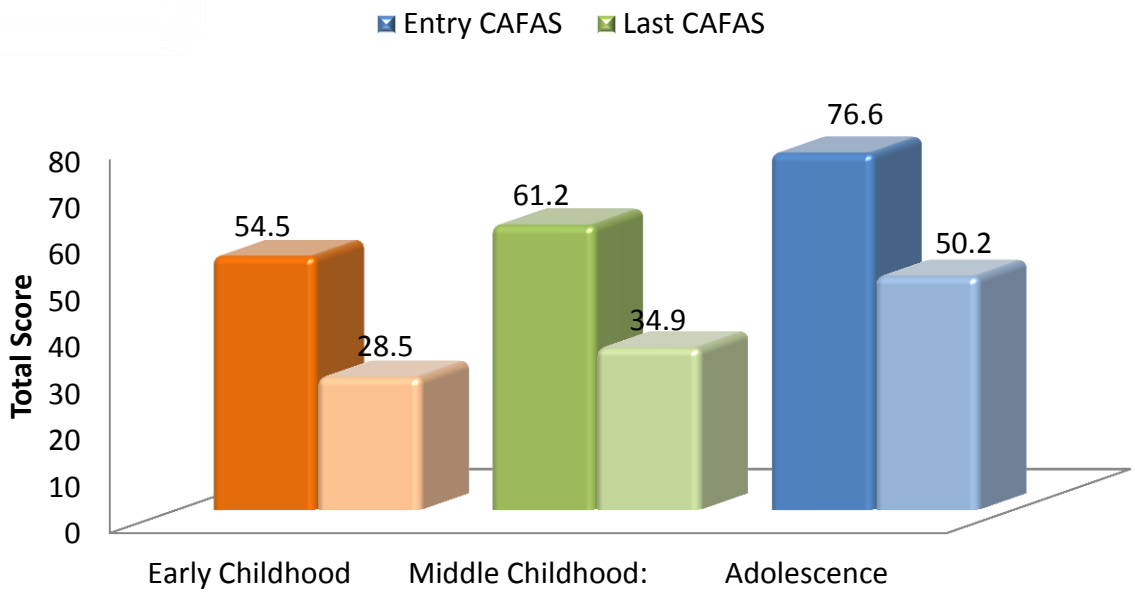


Figure 5.12 Change in Average Score on CAFAS Subscales from Treatment Entry to Last CAFAS

N varies between 11,010 and 11,039 because of missing scores on various subscales

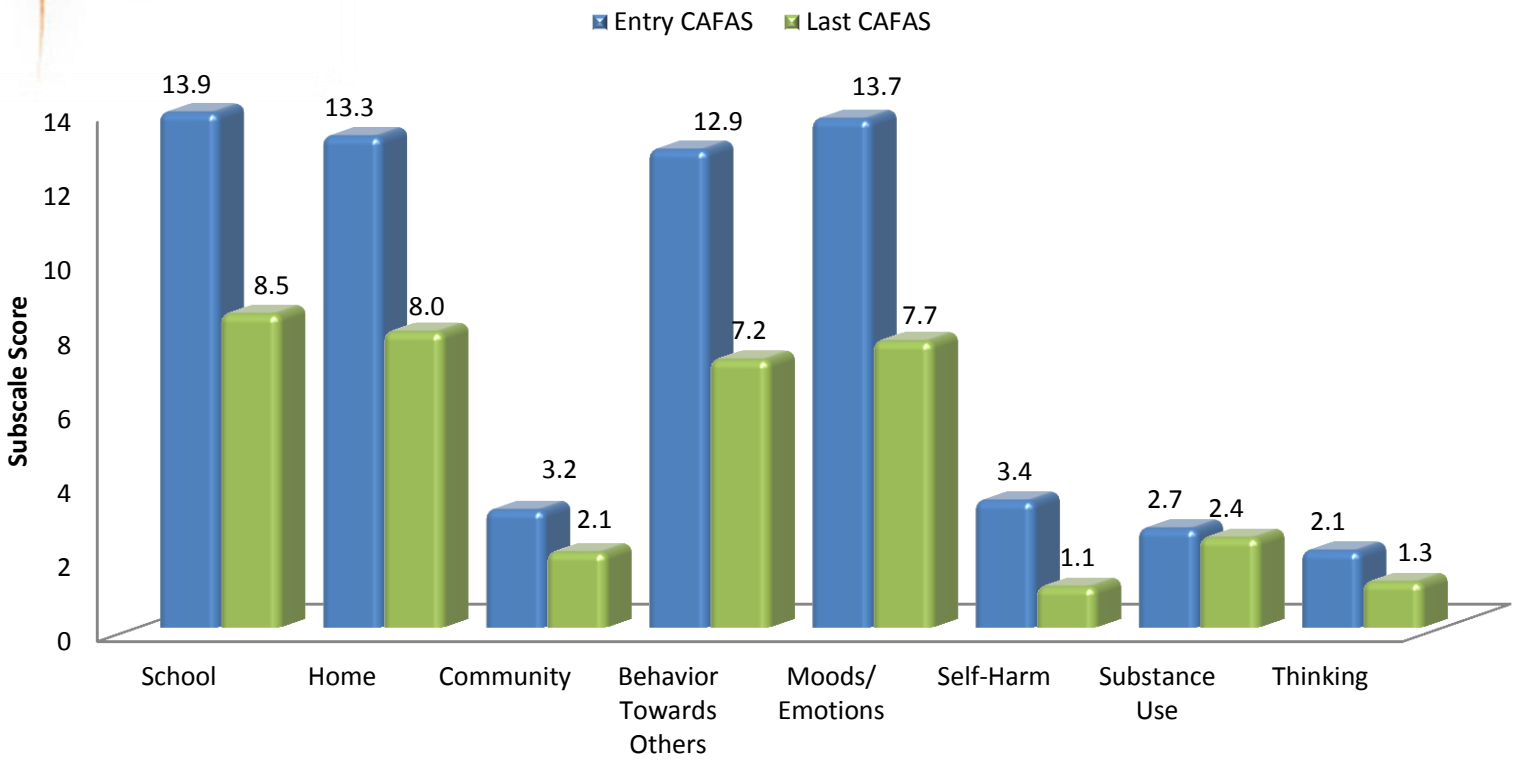
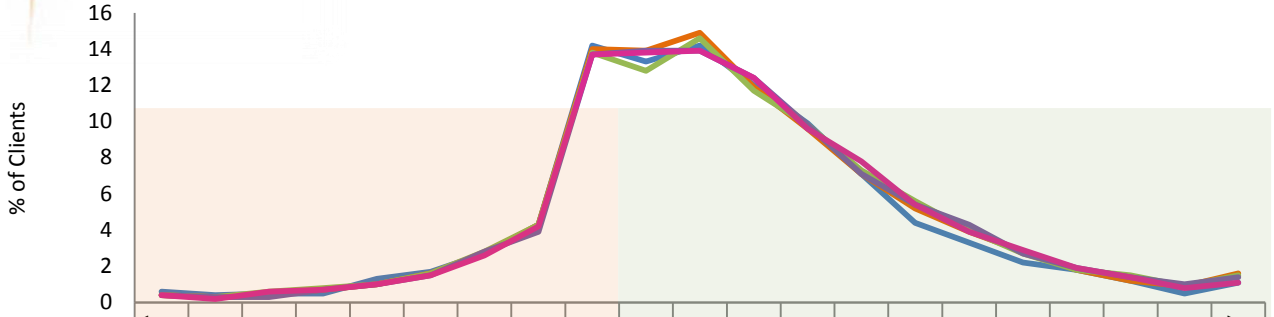


Figure 5.13 Absolute Change in Level of Functioning

(2006: N=6,721 |2007: N=9,663|2008: N=10,955|2009: N=10,935|2010: N=10,848)



	<= -80	-70	-60	-50	-40	-30	-20	-10	0	10	20	30	40	50	60	70	80	90	100	110	>= 120
2006	0.6	0.4	0.5	0.5	1.3	1.7	2.7	4.3	14.2	13.3	14.2	12	9.9	7.1	4.4	3.3	2.2	1.8	1.2	0.5	1.1
2007	0.4	0.3	0.4	0.7	1	1.6	2.7	4.3	14	13.9	14.9	11.9	9.6	7.1	5.2	3.9	2.8	1.8	1.2	0.9	1.6
2008	0.4	0.3	0.6	0.8	1	1.6	2.8	4.3	13.8	12.8	14.6	11.7	9.8	7.3	5.6	4	2.7	1.8	1.5	0.9	1.5
2009	0.4	0.3	0.3	0.7	1.0	1.5	2.8	3.9	13.7	13.9	13.9	12.4	9.8	7.1	5.4	4.3	2.7	1.9	1.4	1.0	1.4
2010	0.4	0.2	0.6	0.7	1	1.5	2.6	4.2	13.7	13.8	13.9	12.4	9.6	7.8	5.4	3.9	2.9	1.9	1.4	0.8	1.1

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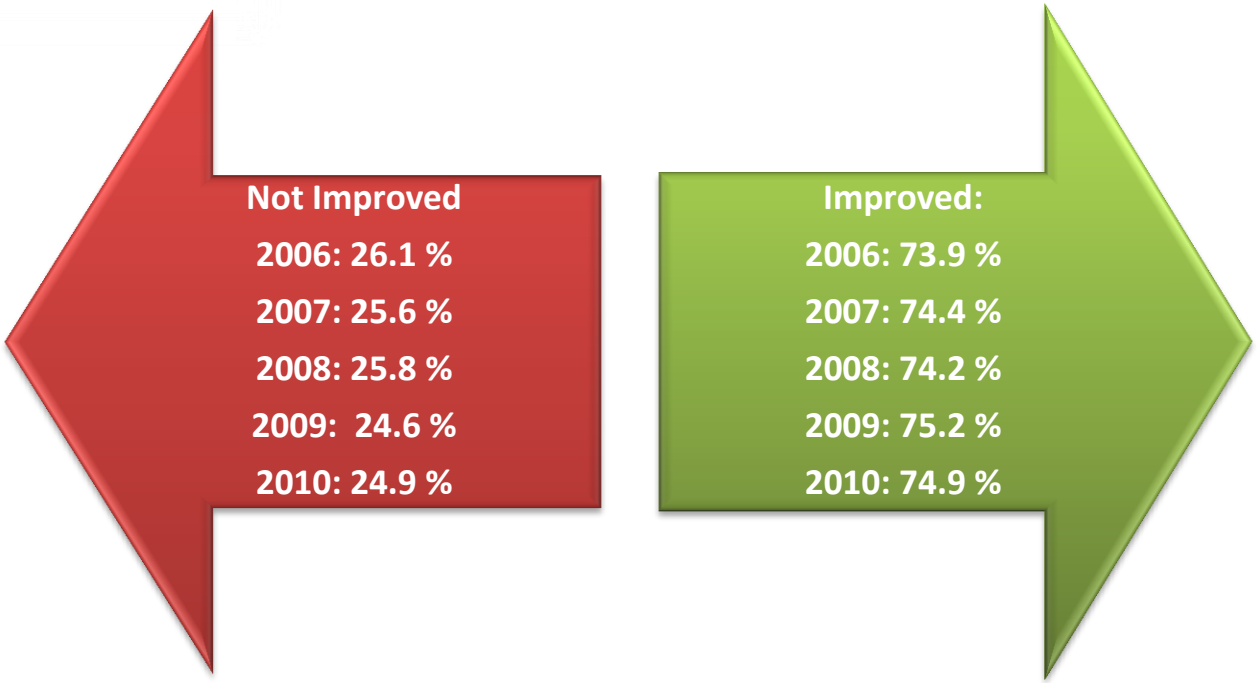
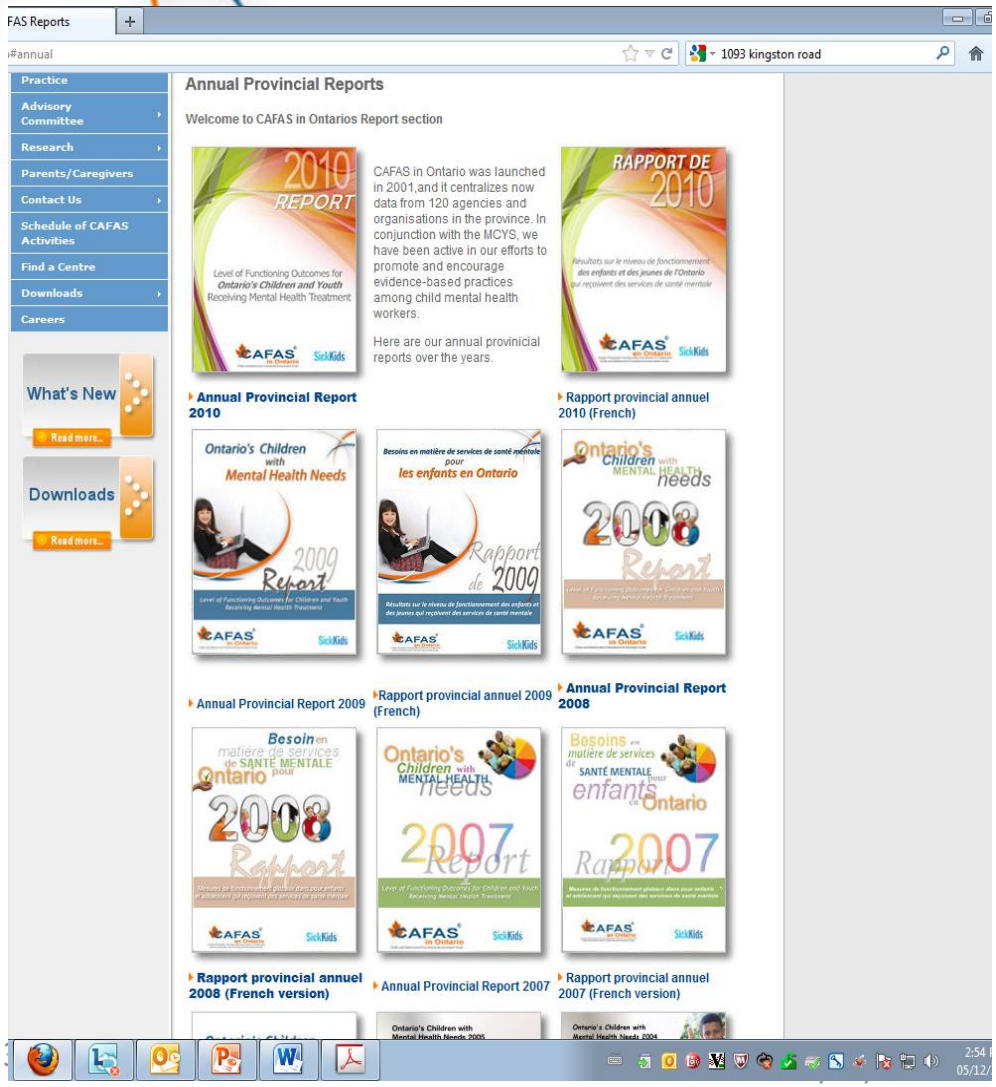
Absolute Change in Level of Functioning



Reporting



- Agency level - quarterly
- Regional level - quarterly
- Provincial level - annually

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CAFAS Web Version

Functional Assessment Systems - CAFAS Item Endorsements - Windows Internet Explorer provided by The Hospital for Sick Children

https://staging.fasoutcomes.com/CAFASAssessment.aspx?asri=ShLq7D5Osd%2blR69bU9bGuWJn7aOOhu3tvV1u92%2frca0BVstvwQ2Um0ct8ow%2bmmLQ

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Functional Assessment Systems - CAFAS Item Endors...

FAS Functional Assessment Systems
CAFAS | PECFAS | JIFF | CWL

STAGING

Rhonda Couch
10/8/2012
Home | Sign Out | Help

Clients
- My Clients
- New Client
- Search Clients
- Search by Caregiver
- Admin Search
- Exact Client Search
- Transfer History

Dashboards
- Supervisor Dashboard
- My Dashboard

Reports
- Aggregate Report

Administration
- Overview
- Users
- Data Export
- TA Requests
- Programs
- Assessment Settings

My Profile

CAFAS – CAFAS Item Endorsements

See Scoring Help

Client : Hobbs, Julie | Primary ID : 54322 | DOB: 10/09/1996 | Assessment: 10/08/2012(Initial CAFAS)

CAFAS Items | Review Assessment & Print Report | Treatment Plan | Modify CAFAS Setup Info | Client Options

Amend | What's this?

School* | Home* | Community* | Behavior* | Moods* | Self-Harm* | Sub Use* | Thinking* | Caregiver ▸ | Add Strength and Goals

Severe Impairment	Moderate Impairment	Mild Impairment	Minimal Or No Impairment
☐ 001 Out of school or job due to behavior that occurred at school or on job during the rating period (e.g., asked to leave or refuses to attend)	☐ 012 Non-compliant behavior which results in persistent or repeated disruption of group functioning or becomes known to authority figures other than classroom teacher (e.g., principal) because of severity and/or chronicity	☐ 022 Non-compliant behavior results in teacher or immediate supervisor bringing attention to problems or structuring youth's activities so as to avoid predictable difficulties, more than other youth	☐ 028 Reasonably comfortable and competent in relevant roles
☐ 002 Expelled or equivalent from school due to behavior (e.g., multiple suspensions, removed from community school, placed in an alternative school)	☐ 013 Inappropriate behavior which results in persistent or repeated disruption of group functioning or becomes known to authority figures other than classroom teacher (e.g., principal) because of severity and/or chronicity	☐ 023 Inappropriate behavior results in teacher or immediate supervisor bringing attention to problems or structuring youth's activities so as to avoid predictable difficulties, more than other youth	☐ 029 Minor problems satisfactorily resolved
☐ 003 Judged to be a threat to others because of aggressive potential (i.e., resulting from youth's actions or statements); monitoring or supervision needed	☐ 014 Frequently truant (i.e., approximately once every two weeks or for several consecutive days)	☐ 024 Occasionally disobeys school rules, with no harm to others or to property, more than other youth	☐ 030 Functions satisfactorily even with distractions
☐ 004 Harmed or made serious threat to hurt a teacher/peer/co-worker/supervisor		☐ 025 Problems in school, including behaviors related	☐ 031 School grades are average or above
			☐ 032 Schoolwork is commensurate with ability and youth is mentally retarded
			☐ 033 Schoolwork is commensurate with ability and youth is learning disabled
			☐ 034 Schoolwork is commensurate with ability and youth is a slow learner
			☐ 035 Schoolwork is

Done | Internet | 100%

Start | Environmental Scan... | CAFAS Web-Based ... | 3 Microsoft Lync 2... | 4 Microsoft Office... | Environmental Scan... | Functional Asses... | Microsoft PowerPoi... | 11:17 AM

CAFAS® in Ontario
Child and Adolescent Functional Assessment Scale

Client Dashboard

Functional Assessment Systems - CAFAS Client Dashboard - Windows Internet Explorer provided by The Hospital for Sick Children

https://staging.fasoutcomes.com/Dash_CAFASClient.aspx?cri=LNglbIpbtVpCJm64XEJ5YIiJNKSOWKCiGDwnlySocFYi5rezmWHL87qBQtYUptvc

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Functional Assessment Systems - CAFAS Client Dashb...

FAS Functional Assessment Systems
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STAGING

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10/8/2012
Home | Sign Out | Help

- **Clients**
  - My Clients
  - New Client
  - Search Clients
  - Search by Caregiver
  - Admin Search
  - Exact Client Search
  - Transfer History
- **Dashboards**
  - Supervisor Dashboa
  - My Dashboard
- **Reports**
  - Aggregate Report
- **Administration**
  - Overview
  - Users
  - Data Export
  - TA Requests
  - Programs
  - Assessment Settings
- **My Profile**

CAFAS® Client Dashboard

Client : Doe, John **Primary ID : 54321** **DOB: 10/08/1998**

Start Assessment | Find Assessments | Edit Client | View Client Dashboard | View Transfer History

JIFF | CAFAS | PECFAS | CWL

Youth Dashboard Most Recent Assessment - 10/08/2012 (Initial CAFAS) - Unsigned

Total Score	High Risk Behavior	Severe Impairments	Pervasive Impairment	CAFAS Tier
110				Possibly Self-Harmful/Severe Mood

View/Edit Assessment
View/Edit Plan
Print Assessment Report
Print Family Report
Print Treatment Plan

What's this?

CAFAS ® Profile - Impairment Level for Each Subscale on Current Asssessment

30 30 20 20 30

Done

Start | Environmental Scan... | CAFAS Web-Based ... | 3 Microsoft Lync 2... | 4 Microsoft Office... | Environmental Scan... | Functional Asses... | Microsoft PowerPoi... | 11:01 AM

Client Dashboard

Functional Assessment Systems - CAFAS Client Dashboard - Windows Internet Explorer provided by The Hospital for Sick Children

https://staging.fasoutcomes.com/Dash_CAFASClient.aspx?cri=LNglbIpbtVpCJm64XEJ5YIiJNK5OWKCiGDwnlySocFYi5rezmWHL87qBQtYUptvc

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Functional Assessment Systems - CAFAS Client Dashb...

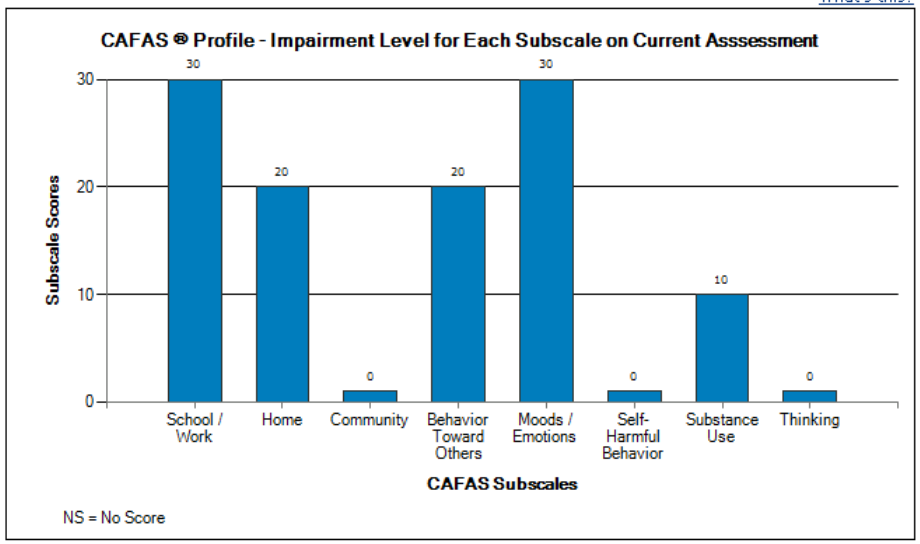
Reports
- Aggregate Report

Administration
- Overview
- Users
- Data Export
- TA Requests
- Programs
- Assessment Settings

My Profile
- Edit Profile
- Change Password
- My Messages

Print Assessment Report
Print Family Report
Print Treatment Plan

What's this?



What's this?

CAFAS® High-Risk Behaviors Present

No risk behaviors were selected by the CAFAS® rater

Done

Start | Environmental Scan... | CAFAS Web-Based ... | 3 Microsoft Lync 2... | 4 Microsoft Office... | Environmental Scan... | Functional Asses... | Microsoft PowerPoi... | 11:02 AM

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Child and Adolescent Functional Assessment Scale

Review Assessment/Print Report

Functional Assessment Systems - Review Assessment & Print Report - Windows Internet Explorer provided by The Hospital for Sick

https://staging.fasoutcomes.com/CAFAS_Summary.aspx?asri=ShLq7D5Osd%2blR69bU9bGuWJn7aOOhu3tvW1u92%2frca0BVstvwQ2Um0ct8ow%2bmmLQ

File Edit View Favorites Tools Help

Functional Assessment Systems - Review Assessment...

FAS Functional Assessment Systems
CAFAS | PECFAS | JIFF | CWL

STAGING

Rhonda Couch
10/8/2012

Home | Sign Out | Help

- Clients
  - My Clients
  - New Client
  - Search Clients
  - Search by Caregiver
  - Admin Search
  - Exact Client Search
  - Transfer History
- Dashboards
  - Supervisor Dashboard
  - My Dashboard
- Reports
  - Aggregate Report
- Administration
  - Overview
  - Users
  - Data Export
  - TA Requests
  - Programs
  - Assessment Settings
- My Profile

CAFAS - Review Assessment & Print Report

Client : Hobbs, Julie | Primary ID : 54322 | DOB: 10/09/1996 | Assessment: 10/08/2012 (Initial CAFAS)

CAFAS Item | Review Assessment & Print Report | Treatment Plan | Modify CAFAS Setup Info | Client Options

Subscales Graph

View Assessment Report

View Family Report

Amend What's this?

Items Selected

Target Behavior(s)	Impairment
School / Work	
013 Inappropriate behavior which results in persistent or repeated disruption of group functioning or becomes known to authority figures other than classroom teacher (e.g., principal) because of severity and/or chronicity	Moderate
023 Inappropriate behavior results in teacher or immediate supervisor bringing attention to problems or structuring youth's activities so as to avoid predictable difficulties, more than other youth	Mild
Home	
051 Persistent failure to comply with reasonable rules and expectations within the home (e.g., bedtime, curfew); active defiance much of the time (OR, if youth is not in the home, youth fails to comply with rules and expectations unless close monitoring/supervision is maintained)	Moderate
Community	
084 Youth does not negatively impact on the community	Minimal or No
Behavior Toward Others	
094 Inappropriate sexual behavior in the presence of others or directed toward others	Moderate
Moods / Emotions	

Done | Internet | 100%

Start | Environmental Scan... | CAFAS Web-Based ... | 3 Microsoft Lync 2... | 4 Microsoft Office... | Environmental Scan... | Functional Asses... | Microsoft PowerPoi... | 11:19 AM

CAFAS In Ontario Team

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More information

www.cafasinontario.ca

Hodges, K. (2003). *Child and Adolescent Functional Assessment Scale (3rd ed.).* Ypsilanti, MI: Eastern Michigan University.

2012: Vendor is
Multi Health Systems
www.mhs.com/CAFAS

CAFAS® in Ontario
Child and Adolescent Functional Assessment Scale