Iowa REACH Assessment Tool Subcommittee

May 2025





Agenda

- ► Review timeline for assessment implementation
- ▶ Discuss tools and insights from Michigan
- ▶ Public comment



Timeline

Year	Implementation plan steps/milestones
2025	 Subcommittee delivers a memo with key consideration recommendations in August 2025 HHS department decides on the assessment tool Subcommittees provide input on implementation approach
2026	HHS prepares for implementation
2027	 HHS implements new screening tool with early adopter providers HHS fully implements the new screening tools and processes prior to roll-out of services



Discussion of Tools



The Assessment Should Consider:

- A holistic view of a child's needs and strengths (i.e. medical, educational, social, and behavioral)
- Involvement with other child serving systems and programs
- Differences in male and female behaviors
- Culture
- Intellectual disability

Tool	Can include assessment of physical health	Customizable
CANS	• Yes	• Yes
CAFAS	• No	• No
CALOCUS- CASII	• Yes	• Yes



The assessment should be strength-based:

Tool	Focus of tool
CANS	Assesses needs and strengths
CAFAS	Assesses degree of impairment o Assessor identifies youth's strengths and goals
CALOCUS - CASII	Assesses level of intensity of services needed



Assessment should be useful for care planning.

Tool	Output
CANS	Identifies areas where action is needed.
CAFAS	Provides a level of dysfunction score associated with an intensity of treatment.
CALOCUS- CASII	Provides a sum of scores that correspond with service intensity levels including 24-hour monitoring.



The assessment should incorporate family and child voice, choice, and preferences.

Tool	Approach to info gathering
CANS	Assessor completes the assessment in collaboration with child/youth, caregivers, and others in the child's life.
CAFAS	Assessor selects which behavior-based statements apply and identifies strengths and goals. Assessors determine how to collect info for the assessment.
CALOCUS- CASII	Clinicians or mental health providers can complete the assessment as a part of routine clinical assessment, or a wraparound service planning team can complete the assessment with family and youth input.



The assessment should provide useful data.

Tool	Proprietary data management system
CANS	No
CAFAS	Yes
CALOCUS- CASII	No



Public Comment

