Wyatt B., et al. v. Tina Kotek, et al.,
U.S. District Court, District of Oregon (Eugene Division), Case No. 6:19-cv-00556-AA
First Annual Review by Kevin M. Ryan, Neutral
October 29, 2026

Introduction and Methodology

Through counsel, children in the care and custody of the Oregon Department of Human Services ("ODHS") reached a Settlement Agreement ("Agreement") in 2024 with the Governor of Oregon and ODHS in *Wyatt B. v. Kotek* to "promote ODHS' efforts to protect child safety, continue to make improvements to Oregon's child welfare system, and support and preserve families."[1]

The Agreement "is structured around a collaborative partnership between ODHS and an experienced Neutral with subject matter expertise." U.S. District Court Judge Ann Aiken appointed Kevin Ryan as the Neutral on June 14, 2024, and approved the Agreement on September 12, 2024. The case was subsequently transferred to Chief U.S. District Court Judge Michael McShane.

The Agreement assigns to the Neutral the responsibility to conduct an Initial Review of the Oregon child welfare system and "determine Measurements, Ultimate Outcomes, and Timelines" for ODHS performance under this Agreement. The parties defined "Measurements" in the Agreement to "mean methods of assessing progress toward Ultimate Outcomes." "Timelines" are defined to "mean specific benchmarks, dates, and/or periods of time by which to achieve Measurements and Ultimate Outcomes." "Ultimate Outcomes mean specific, concrete, and identifiable metrics that are goals to be met at the conclusion of the term of this Settlement Agreement."

The Neutral submitted the Initial Review to Chief Judge McShane and the parties on July 29, 2025 and, following consultation with and by agreement of the parties, amended and submitted the Initial Review on April 23, 2026.[2] The Initial Review contains ten Ultimate Outcomes, with associated Measurements (Measurements 1-2, 4-11) that delineate the "methods of assessing progress toward" those Outcomes. In addition, there are four Measurements (Measurements 3 and 12-14) which will be assessed annually but do not contain "goals to be met at the conclusion" of the Settlement Agreement. In total, there are 14 Measurements contained in the Initial Review,[3] designed to work together to support system transformation, to which the parties aspire in the Agreement's Recitals Section.

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[1] *Wyatt B., et al. v. Tina Kotek, et al.,* U.S. District Court, District of Oregon (Eugene Division), Case No. 6:19-cv-00556-AA, Settlement Agreement ("Agreement"), Document 481, (filed May 23, 2024).

[2] *Wyatt B., et al. v. Tina Kotek, et al.,* U.S. District Court, District of Oregon (Eugene Division), Case No. 6:19-cv-00556-AA, ("Initial Review"), Document 564, (filed April 24, 2026).

[3] Agreement Section 2.8 states that "The Categories above will not contain, in total, more than fifteen (15) Measurements."

The parties stipulated in the Agreement that "the Neutral shall conduct an annual review assessing whether ODHS' Efforts are in Substantial Compliance within the Timelines established ("the **Annual Review**")."[4] Specifically, the parties agreed in Section 6.1.1 of the Agreement:

> The Neutral's Annual Review shall include:
>
> (a) Whether ODHS is undertaking the Efforts it has established (or the Neutral has recommended) to substantially achieve the Measurements and Ultimate Outcomes within the Timelines established;
> (b) Whether the Efforts taken by ODHS (or recommended by the Neutral) are effective in substantially achieving the Measurements and Ultimate Outcomes with the Timelines established;
> (c) Whether there are circumstances outside of the control of ODHS that have affected ODHS' ability to substantially achieve the Measurements and Ultimate Outcomes within the Timelines established, and whether such circumstances warrant a change in the Measurements, Ultimate Outcomes, and/or Timelines established;
> (d) What changes, if any, should be made to the Efforts previously established;
> (e) Whether any category no longer needs to be part of the Neutral's Annual Review because a particular Ultimate Outcome has been met (or alternatively, if any released Category needs to be re-included in the Neutral's Annual Review because a particular Category has become an area of concern); and
> (f) Any other recommendations the Neutral may have for Defendants relating to ODHS' Efforts to achieve the Measurements and Ultimate Outcome within the Timelines established.

This is the first year in which the State began to implement and track all of its commitments under the *Wyatt B. v. Kotek* Agreement and Initial Review. Many of ODHS' efforts to improve performance consistent with the Measurements are just getting underway in 2026 and cannot be evaluated in rigor or efficacy until at least the conclusion of 2026. Therefore, this Annual Report reflects a baseline reporting of performance for 13 of 14 Measurements, a general discussion of the State's reported efforts and the Neutral's recommendations to ODHS.

To conduct this Annual Review, the Neutral and two senior child welfare colleagues ("Neutral team") met with both parties,[5] and reviewed numerous documents including:

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[4] Initial Review, p. 3. "To facilitate this streamlined reporting, while ensuring the Neutral has adequate time to prepare the Annual Report, the parties have agreed that they will not object to the Neutral seeking a 30-day extension to complete the Annual Review in any given year pursuant to Section 6.1 of the Agreement."

[5] Section 3.12 of the Agreement stipulates that, "After the Neutral completes the Initial Review, the Neutral's communications related to this Settlement Agreement shall be limited to designated representatives for the Parties, the Parties' counsel, and the Court, unless the Parties give prior written consent for other communications (*e.g.*, communications with subject matter experts such as Casey Family programs, government agencies such as Centers for Medicare & Medicaid Services, or legislative testimony), or as otherwise required by law."

- ODHS' Progress Report of May 1, 2026,[6] as amended on June 18, 2026 to reflect amended performance results for Measurement 6.[7] ODHS submitted the Progress Report pursuant to Measurement 14 of the Initial Review, which states in part:

> Beginning in 2026, by May 1st and November 1st of each year, ODHS will submit to the Neutral a detailed semi-annual Efforts Report delineating, and assessing the effectiveness of, the agency's efforts to substantially achieve the Measurements and Ultimate Outcomes, identifying the agency's core strategies for each Measurement and Ultimate Outcome, as well as detailed, data-informed plans, including timelines, to refine, add, or alter Core Strategies. The Efforts Report will also analyze relevant performance data, identify systemic, statewide or district-specific barriers to improved performance, and assess the effectiveness of ODHS' efforts to substantially achieve the Measurements and Ultimate Outcomes. The Efforts Reports shall identify circumstances outside of the control of ODHS that affect ODHS' ability to substantially achieve the Measurements and Ultimate Outcomes.

- Children's records as described in this Annual Review, pursuant to Sections 2.5 and 3.10.1 of the Agreement;
- Publicly available quarterly reports from ODHS to the Oregon Legislature pursuant to Senate Bill 1515 (2016) and Senate Bill 243 (2017);
- The Human Services Group's Enhancing Safety: Strengths and Opportunities report authored for ODHS in 2025;
- The ODHS Placement Stability (Third Alarm) Survey Results PowerPoint, dated February 10, 2026;
- The ODHS Facilitator's Guide to Safety Plan Calibration, dated Jun 22, 2026;
- The ODHS Safety Plan Calibration Tool, Phase One;
- The ODHS Quarterly Progress Reports to the Governor;[8]
- ODHS' Performance Improvement Plan to the federal government pursuant to the Child and Family Services Review (CFSR) process, dated June 2026;[9]
- The *Wyatt v. Kotek* Performance Dashboard maintained by ODHS and viewable by the Neutral and Neutral team;
- The CFSR Round 4 Oregon Statewide Assessment; and

[6] https://www.oregon.gov/odhs/data/cwdata/cw-cse-report-05-01-2026.pdf (captured on September 15, 2026).

[7] https://www.oregon.gov/odhs/data/cwdata/cw-cse-report-amendment-2026-06.pdf (captured on September 18, 2026).

[8] https://www.oregon.gov/odhs/child-welfare-transformation/pages/progress-reports.aspx

[9] https://www.oregon.gov/odhs/data/cwdata/cw-cfsr-ah4ec-pip-report-2026.pdf

- Email from Lacey Andresen, Deputy Director, Child Welfare, ODHS, to ODHS Statewide Managers, dated July 24, 2026, Confirming Safe Environments Package, including monthly District performance data on Safety Plans, Age of Safety Plans, Monthly Safety Plan Reviews, Child Face-to-Face Contacts and Parent Face-to-Face Contacts.

Seven of the 14 Measurements reflect, to some degree, new data collection or tracking and reporting work by ODHS:

- Measurement 2, Maltreatment in Care, which uses the CFSR methodology but eliminates from the methodology the periods when children are living at home or on Trial Home Visit;
- Measurement 3, Risk and Safety Assessment, which builds from the agency's historic CFSR case read process, but includes in the review only children in care;
- Measurement 6, Nursing Assessments;
- Measurement 7, Mental Health Assessments;
- Measurement 8, Complete Medical Assessments;
- Measurement 13, Notifications of Reports of Abuse of Children in Care;[10]
- Measurement 14, Core Strategies and Efforts Reporting.

Pursuant to Sections 2.5 and 3.10.1 of the Agreement, the Neutral, as described later in this report, selected and requested ODHS produce certain children's records. The Neutral team received and completed reviews of randomly selected Nursing Assessments pursuant to Measurement 6; Mental Health Assessments pursuant to Measurement 7; and Medical Assessments pursuant to Measurement 8. The Neutral also requested and received a sample of six case records from the case review process used to assess Measurements 3, 9-12. Review of those records is ongoing.

The State's efforts, as set forth in its Progress Report and associated documents are all reasonably described to improve performance for children in the class. These efforts involve new or expanded partnerships, processes, practices, data tracking and accountability measures that may require time to mature and impact certain Measurements. The Neutral's recommendations to ODHS in this Annual Review are designed to support Oregon's efforts, to strengthen ODHS' understanding of the challenges to achieve substantial compliance with the Ultimate Outcomes and to better inform the agency's efforts going forward.

The Neutral submitted the Annual Review in draft form to the parties pursuant to Section 6.2 on September 29, 2026. The Annual Review is now final and will be filed with the Court pursuant to Section 6.3.

[10] Pursuant to the Initial Review, performance assessment for Measurement 13 gets underway in 2027.

Summary of Reported Measurement Performance

Measurement	ODHS Reported Baseline Performance	Ultimate Outcome or Target	Timeline
CATEGORY 1: RATE OF MALTREATMENT OF CHILDREN IN CARE (SETTLEMENT AGREEMENT SECTION 2.1)			
1. The Rate of Maltreatment of Children in Custody	24.7 Substantiated/Indicated Reports of Child Maltreatment per 100,000 days in care between October 1, 2024 and September 30, 2025	Ultimate Outcome: 9.07 Substantiated/Indicated Reports of Child Maltreatment per 100,000 days in care	Achieve by September 30, 2029 and sustain for three years
2. The Rate of Maltreatment of Children in Custody, Excluding Children Who are Home or on Trial Home Visit	22.0 Substantiated/Indicated Reports of Child Maltreatment per 100,000 days in care between October 1, 2024 and September 30, 2025	Ultimate Outcome: 9.07 Substantiated/Indicated Reports of Child Maltreatment per 100,000 days in care	Achieve by September 30, 2029 and sustain for three years
3. Risk and Safety Assessment: The percent of cases in which the ODHS-convened team found as a Strength the agency's efforts to assess and address risk and safety concerns for children in custody	Of 72 cases reviewed by the ODHS team between November 2023 and February 2025, 47 (65%) were deemed to show as a Strength the agency's efforts to assess and address risk and safety concerns for children in custody	There is no Ultimate Outcome. The goal is for ODHS to make efforts sufficient to achieve a performance of 90 percent of reviewed cases rated as a Strength	Assessed annually
CATEGORY 2: RE-ENTRY RATE FOR CHILDREN IN CARE (SETTLEMENT AGREEMENT SECTION 2.2)			
4. The Rate of Children's Re-Entry to Foster Care	For children who exited care between October 1, 2023, and September 30, 2024, the rate of re-entry was 5.7%	Ultimate Outcome: 5.6% of children or fewer	Achieve by September 30, 2028 and sustain for three years

Measurement	ODHS Reported Baseline Performance	Ultimate Outcome or Target	Timeline
CATEGORY 3: TIMELINESS INITIAL CASE PLANS FOR CHILDREN (SETTLEMENT AGREEMENT SECTION 2.3)			
5. Percent of Children Who Receive an Initial Case Plan Within 60 Days	For calendar year 2025, ODHS reported that 81.1% of children received an initial case plan within 60 days	Ultimate Outcome: 90%	Achieve by April 1, 2028 and sustain for three years
CATEGORY 4: TIMELINESS TO COMPLETE PROFESSIONAL MENTAL HEALTH AND MEDICAL ASSESSMENTS AND REFERRALS FOR REASONABLE AND NECESSARY MEDICAL AND MENTAL HEALTH CARE AND TREATMENT FOR A CHILD IN CARE (SETTLEMENT AGREEMENT SECTION 2.4)			
6. Percent of Children who Receive a Nursing Assessment within 10 Days of Entering Care	For calendar year 2025, ODHS reported 30.1% of children received a nursing assessment within 10 days of entering care	Ultimate Outcome: 90%	Achieve by December 31, 2028 and sustain for three years
7. Percent of Children who Receive a Mental Health Assessment within 60 Days of Entering Care	For calendar year 2025, ODHS reported 88% of children received a mental health assessment within 60 days of entering care[11]	Ultimate Outcome: 90%	Achieve by December 31, 2029 and sustain for three years

[11] As described later in this report, the Neutral team selected and reviewed a sample of 25 assessments and found a modestly smaller percentage of timely assessments than the State in the sample. ODHS' data indicated 92 percent of children in the Neutral's selected sample received a mental health assessment within 60 days of entry into substitute care. The Neutral team found that 88 percent of children in the sample received a timely mental health assessment as required.

Measurement	ODHS Reported Baseline Performance	Ultimate Outcome or Target	Timeline
8. Percent of Children who Receive a Complete Medical Assessment within 60 Days of Entering Care	For calendar year 2025, ODHS reported 75% of children received a complete medical assessment within 60 days of entering care[12]	Ultimate Outcome: 90%	Achieve by December 31, 2029 and sustain for three years
CATEGORY 5: APPROPRIATENESS AND QUALITY OF PLACEMENTS AND SERVICES FOR CHILDREN IN CARE (SETTLEMENT AGREEMENT SECTION 2.5)			
9. Stability and Appropriateness of Placements: The percent of cases in which the ODHS-convened team found as a Strength the Stability of the Child's Placement(s) and determined that movements, if any, were in the child's best interests and consistent with the child's permanency goal(s)	Of 60 cases reviewed by the ODHS team between November 2023 and February 2025, 50 (83%) were deemed to show as a Strength	Ultimate Outcome: 90%	Achieve by April 1, 2028 and sustain for three years

[12] As described later in this report, the Neutral team selected and reviewed a sample of 25 assessments and found a smaller percentage of timely assessments than the State in the sample. ODHS' data indicated 84 percent of children in the sample received a medical assessment within 60 days of entry into substitute care. The Neutral team found that 76 percent of children in the sample received a timely medical assessment as required.

Measurement	ODHS Reported Baseline Performance	Ultimate Outcome or Target	Timeline
10. Children's Physical Health Needs: The percent of cases in which the ODHS-convened team found as a Strength the agency's efforts to address the physical health needs of children	Of 63 cases reviewed by the ODHS team between November 2023 and February 2025, 47 (75%) were deemed to show as a Strength	Ultimate Outcome: 90%	Achieve by April 1, 2028 and sustain for three years
11. Children's Mental and Behavioral Health Needs: The percent of cases in which the ODHS-convened team found as a Strength the agency's efforts to address the mental and behavioral health needs of children	Of 54 cases reviewed by the ODHS team between November 2023 and February 2025, 37 (69%) were deemed to show as a Strength	Ultimate Outcome: 90%	Achieve by April 1, 2028 and sustain for three years
12. Assess and Meet Children's Needs: The percent of cases in which the ODHS-convened team found the agency made concerted efforts to assess the needs of and provide services to children	Of 72 cases reviewed by the ODHS team between November 2023 and February 2025, 59 (82%) were deemed to show as a Strength	There is no Ultimate Outcome. The goal is for ODHS to make efforts sufficient to achieve a performance of 90 percent of reviewed cases rated as a Strength	Assessed annually

Measurement	ODHS Reported Baseline Performance	Ultimate Outcome or Target	Timeline
CATEGORY 6: NOTIFICATION OF CHILD MALTREATMENT (SETTLEMENT AGREEMENT 2.6)			
13. Notification of Maltreatment in Care	Performance measured in calendar year 2027 following establishment of case review protocols and tools with the Neutral, and training of the review team, in 2026	There is no Ultimate Outcome. The goal is for ODHS to make efforts sufficient to achieve a performance of 90 percent of reviewed cases rated as a Strength	Assessed annually
CATEGORY 7: CORE STRATEGIES AND EFFORTS REPORTING (SETTLEMENT AGREEMENT SECTION 2.7)			
14. Semi-Annual Reporting by ODHS on May 1 and November 1 of each year, as described above	Progress Report submitted by ODHS on May 1, 2026	There is no Ultimate Outcome. The goal is for ODHS to submit Progress Reports to the Neutral on May 1 and November 1 of each year which delineate and assess the effectiveness of the agency's efforts, identify the agency's core strategies and set forth detailed, data-informed plans.	Assessed annually

Category One: Child Safety

Maltreatment in Care (Measurements 1 and 2)

One of ODHS' most significant challenges is to reduce the prevalence of abuse and neglect among children in care, and they have identified a range of strategies to do so. ODHS has described multiple initiatives and efforts, some just getting underway in 2026, to improve the safety of children in custody. The agency provided the Neutral with a copy of its June 15, 2026 report to ODHS Director Wendt from the agency's child welfare leadership team entitled Maltreatment in Care (MIC) Reduction Efforts.[13] That report identifies 488 child maltreatment in care incidents recorded in 2025, which the agency's staff reviewed to inform its child safety strategies. The report to ODHS Director Wendt focuses heavily on enhanced safety practices for children on Trial Home Visit status; improved practice, including safety assessments and data analysis for children placed in family-based settings; and improved maltreatment data accuracy. The agency's May 1, 2026 Progress Report includes a number of strategies set forth on pages 36 to 43, intended to prevent child maltreatment, including enhanced Face-to-Face contacts by ODHS caseworkers with children and caregivers, the roll out of a new Safety Calibration Tool, improved staff and caregiver training and a 90-day staffing protocol.

In a number of instances, it is clear from the various documents how the State has connected a specific strategy to a diagnosed risk to child safety. For example, in the June 15, 2026 report to ODHS Director Wendt, the agency's child welfare leaders report that of 50 founded reports of child maltreatment involving relative caregivers, "seven were related to the relative resource parent allowing the parent to have unsupervised contact with the child." That learning then led to the strategy described in the June 15, 2026 report to update caregiver training on appropriate boundaries and "managing contact between the child in their care and the parent."[14]

In other instances, it became clear to the Neutral through discussions with ODHS leadership how a specific strategy addressed a data-informed learning about the risk to child safety. ODHS Deputy Director Lacey Andresen reported in an August 10, 2026 video meeting with the Neutral and team that the agency had observed better child safety outcomes in the agency's Family Preservation Program than in its Trial Home Visit work. ODHS correlates the difference to more frequent engagement by ODHS caseworkers with children and families involved in the Family Preservation Program, and therefore decided to expand caseworkers' presence with children and families in their homes during Trial Home Visits.

For FFY2025, ODHS reported that the State substantiated 370 reports of child abuse and neglect across 1,496,634 days in care, for an observed rate of 24.7 victimizations per 100,000 days in foster care. Based on the State's reported data, ODHS would have had to prevent an additional 235 confirmed reports of maltreatment to meet the Measurement 1 Ultimate Outcome. With

[13] See Appendix A.

[14] Appendix A.

respect to Measurement 2, which excludes the time children are in Trial Home Visit status or at home, ODHS reported 293 reports of child abuse and neglect across 1,329,056 days in care, for an observed rate of 22 victimizations per 100,000 days in foster care. Based on the State's reported data, ODHS would have had to prevent an additional 173 confirmed reports of maltreatment to meet the Measurement 2 Ultimate Outcome.[15]

Safety and Risk Assessment (Measurement 3)

The Initial Review establishes that the goal of Measurement 3 is for the ODHS-convened team to find that 90 percent of reviewed cases within the agency's case review process are rated a Strength for the agency's efforts to assess and address risk and safety concerns for children in custody. The State has been measuring its performance on Measurement 3 since at least 2019 according to the CFSR Round 4 – Oregon Statewide Assessment.[16] Reported performance on risk and safety assessment has meaningfully improved from the FFY2019 baseline of 53.6 percent but is now dipping from the high-water mark of 69.7 percent in FFY2022 to 65 percent in the selection of cases reviewed on a rolling basis between November 2023 and February 2025.

The significant investment of time and resources that ODHS has expended to assess these children's cases – now hundreds over the course of more than six years – provides a data and information-rich source of knowledge to surface barriers to better performance and power the development of strategies targeted to address those challenges.

Recommendations

1. The Neutral recommends that ODHS, either in partnership with a research institution or using its own quality assurance and research staff, generate a report by May 1, 2027 that **analyzes the FFY2025 and FFY2026 Maltreatment in care ("MIC") data and includes a root cause analysis to inform safety practice for children in custody.** The report should examine and analyze:
    - The types and prevalence of confirmed child maltreatment in care;
    - The placement settings where children experience confirmed child maltreatment;

[15] ODHS reports that after Oregon submitted its Maltreatment in Care data for FFY2025 (October 1, 2024-September 30, 2025) to the federal government, ODHS completed a manual review of every MIC incident in CY 2025 – a distinct but overlapping period with the federal reporting period - and discovered substantial data entry inaccuracies in the underlying investigations with respect to the date(s) of the confirmed maltreatment. The analysis concluded that some historical incidents of abuse were recorded inaccurately, thus appearing incorrectly in the data period.

The agency has not analyzed how many of the confirmed reports of MIC in FFY2025 should have been included in prior federal reporting years rather than in FFY2025.

[16] https://www.oregon.gov/odhs/data/cwdata/cw-cfsr-statewide-assessment-2024.pdf (captured on August 4, 2026).

- The demographics of children who are confirmed victims of maltreatment by age at the time of the incident and assess at what ages children are most at risk for victimization;
- The proportionality of maltreatment by placement setting in light of the number of children placed in each identified setting type;
- The classifications (e.g.: nonrelative resource caregiver; CCA staff) and prevalence of confirmed MIC perpetrators;
- The number of days between the confirmed MIC incident and the report to the Oregon hotline;
- The number of days between the report to the Oregon hotline and the confirmation disposition;
- The percent of confirmed MIC reports with a prior "closed at screening" report involving the same child(ren) and perpetrator(s);
- The percent of confirmed MIC reports with a prior investigative disposition of unfounded/unsubstantiated involving the same child(ren) and perpetrator(s);
- For MIC in family-based settings, the percentage of confirmed maltreatment reports by number of affected child victims (e.g.: what percent involved 1 child; what percent involved 2 children, etc.);
- The median and average lengths of time children are in care at the time of the confirmed MIC incident. It is important to observe when MIC is most likely to occur as the question of timing is important to prevention. The report should depict each confirmed MIC report by the number of month(s) from a child's removal and highlight the average and median;
- The median and average lengths of time children are in Trial Home Visit status at the time of the confirmed MIC incident. It is important to observe when MIC is most likely to occur as the question of timing is important to prevention. The report should depict each confirmed MIC report by the number of week(s) from a child's placement in Trial Home Visit status and highlight the average and median.
- Assess qualitatively the context (circumstances) of MIC by placement type and report themes that emerge with respect to risk and safety.
- Considering all MIC investigations from FFY2020-2024 that were unsubstantiated/unfounded, how many and what percentage were later confirmed involving at least one of the same child(ren) and at least one of the same perpetrator(s)?
- Considering all MIC reports that were closed at screening from FFY2020-2024, how many and what percentage were later confirmed involving at least one of the same child(ren) and at least one of the same perpetrator(s)?
- Senate Bill 243 (2017) directs ODHS to submit a quarterly report to the interim legislative committees on child welfare regarding substantiated reports of abuse occurring in ODHS certified resource homes and developmental disabilities residential facilities licensed by the ODHS Office of Developmental Disabilities Services (ODDS). Those reports indicate that the number of certified resource homes involved in a confirmed incident of MIC was 64 in FFY2023. According to the most recent ODHS

reporting, the number of certified resource homes involved in a confirmed incident of MIC was 83 in FFY2025. The report should analyze the causes and contributing factors of the growth in the number of certified resource homes where children in care have been maltreated.

2. The Neutral recommends that ODHS **track and report the number of children in the class placed in CCAs who experience maltreatment** in the FFY and identify the types of maltreatment that are founded in those settings.
3. The Neutral recommends that ODHS **track and report the number of children in the class placed in CCAs who experience an inappropriate restraint in the FFY**.
4. The Neutral recommends that ODHS **develop and implement strategies to improve safety for children in the class placed in CCAs**, informed by Recommendations 2 and 3 above.
5. ODHS' reported performance on Measurement 3 declined from 69.7 percent in FFY2022 to 65 percent in the most recent selection of cases reviewed on a rolling basis between November 2023 and February 2025. The Neutral recommends that ODHS **identify the primary reasons that each of the 25 cases assessed as Needs Improvement did not achieve Strength** and report on the themes in those cases adversely impacting performance.
6. In Appendix A of the May 1, 2026 Progress Report, the Department identifies **increased relative placement** as a strategy for placement stability, reduced MIC and reduced re-entry. The Neutral recommends that ODHS **share the historic data and analysis underlying this strategy on child safety, and update the data and analysis annually**, including in the May 1st Progress Reports each year.
7. The Neutral recommends ODHS **analyze the FFY2025 confirmed MIC reports and assess whether there is any correlation between caseworker workloads and substantiated reports of child maltreatment**.

Category Two: Child Re-entry

Rate of Re-entry to Foster Care (Measurement 4)

The Initial Review establishes the Ultimate Outcome for this measurement as no more than 5.6 percent of children re-enter care within 12 months of exit. ODHS reported its performance as very close to the Ultimate Outcome at 5.7 percent of children who exited care between October 1, 2023 and September 30, 2024, nearly meeting the Ultimate Outcome.

The ODHS Progress Report of May 1, 2026 sets forth a number of strategies, many getting underway or expanding in 2026. The agency emphasizes that its focus on improving the prevalence and quality of caseworkers' face-to-face contacts with children, birth parents and resource parents is important for safety (Measurements 1, 2 and 3) and preventing re-entry (Measurement 4). Similarly, the Progress Report focuses on monthly safety reviews and 90-day staffings for broad, positive impact:

> Implementing timely and high-quality contacts with children, parents and resource parents helps inform ongoing assessments of safety and the need for additional services and supports. Conducting monthly safety plan reviews and 90-day staffings ensure that caseworkers and supervisors are reviewing, discussing and taking steps to address safety concerns, tracking progress on identified issues and identifying the need for additional services and supports. All these activities inform safety decision-making and inform ODHS' recommendations to the court regarding reunification. As such, these Efforts contribute to improved decision-making pertaining to safety and permanency and thereby may contribute to reductions in re-entry. It is also understood that these strategies are not determinative, given that families' circumstances can change after being reunified and the case is closed with ODHS.

The agency also describes in its first Progress Report an enhanced reunification practice for transitioning children:

> In addition, ODHS is developing additional procedures and practice tools to support children and families in a successful transition from foster care to returning home. These tools are being developed with community, lived experts, resource parents and staff. We have drafted the procedure and practice tools and are reviewing and refining them in CY 2026 Q2. ODHS will develop an implementation plan in Q2 and Q3 with implementation beginning in Q4 of 2026. This work addresses MIC and re-entry by supporting sufficient safety planning in-home after foster care.

The Neutral plans to review the additional procedures, practice tools and implementation plan in collaboration with ODHS.

Recommendations

1. The Neutral recommends ODHS **include in its next Progress Reports details on the additional procedures and practice tools** developed to support children and families in a transition from foster care to home.
2. The Neutral recommends ODHS **include in its November 1, 2026 Progress Report the implementation plans for these additional procedures and practice tools, and an assessment of ongoing implementation** in the May 1, 2027 Progress Report.
3. In Appendix A of the May 1, 2026 Progress Report, the Department identifies increased relative placement as a strategy for placement stability, reduced MIC and reduced re-entry. The Neutral recommends that ODHS **share the historic data and analysis underlying this strategy on child reentry**, **and update the data and analysis annually,** including it in the May 1st Progress Reports each year.

Category Three: Timely Case Plans

Initial Case Plans Within 60 Days (Measurement 5)

The Initial Review establishes the Ultimate Outcome for this Measurement as 90 percent of children receive an initial case plan within 60 days of coming into care. For calendar year 2025, ODHS reported that 81.1 percent of children received an initial case plan within 60 days. This is a significant improvement from the performance of 71.1 percent as of December 2023 as set forth in the Agreement, Section 2.3.1.

State data make clear that performance on this Measurement varies across Oregon. Two of the 14 ODHS Districts performed above the statewide standard in 2025, including District 2, which includes Oregon's most populous county – Multnomah. An additional four Districts were within five percentage points of the Ultimate Outcome standard.

Three Districts – 1, 4 and 14 – reported the lowest performance across the state at no better than 60 percent. The ODHS Progress Report of May 1, 2026 includes commitments to enhanced monitoring and technical assistance in those Districts. The agency's strategies also include a tickler/reminder system that alerts caseworkers and supervisors of approaching deadlines, better alignment with court processes and ongoing case reviews.

Recommendation

1. The May 1, 2026 Progress Report states on page 51 that "Fidelity to the current process is being supported with technical assistance in the lowest performing districts: D1, 4, 6, and 14." The Neutral recommends ODHS **add Districts 3, 9, 11 and 12, all of which had lower performance than District 6 in 2025**.

Category 4: Medical and Mental Health Assessments

Nursing Assessments (Measurement 6)

The Initial Review establishes the Ultimate Outcome for this Measurement as at least 90 percent of children entering substitute care will receive a completed ODHS nursing assessment within ten days of entry to substitute care. In its May 1, 2026 Report, ODHS reported baseline performance for Measurement 6, Nursing Assessments, as 80.6 percent for calendar year 2025. ODHS later determined that due to a data filtering error in building the report for this new measure, ODHS had incorrectly reported baseline performance as 80.6 percent instead of 30.1 percent. ODHS published the Amendment to its May 1, 2026 Progress Report on June 18, 2026 to correct its reporting for Measurement 6. ODHS reported 653 (30.1 percent) of the 2,166 children who were

due for a nursing assessment within ten days of entry into substitute care during the period January 1 to December 31, 2025 received a timely nursing assessment.

The agency has adopted a new management model to track timely nursing assessments. The Progress Report highlights:

> In fall 2025, the nursing program created a referral desk to more efficiently assign cases to nurses. All incoming placements now filter through one position, filled by three rotating staff who are trained to ensure workload is evenly distributed, preventing backlogs for individual nursing staff, and improving timeliness.

The Nursing Manager maintains a dashboard of children's entries and assessment deadlines, centralizing focus and responsibility in a key position. The ODHS Progress Report frames the "primary barrier to completing nursing assessments within 10 days [as] not having placement data entered timely," and identifies strategies and efforts to ensure more timely data entry. The Progress Report details that about half of initial placements are entered more than three days after a child enters care. Assessing the impact of delayed data entry on timely assessment would be aided by data and analysis on the number and percentage of children who received a nursing assessment within 11-13 days of entry; 14-16 days of entry; and 17-20 days of entry.

Table 1 below shows the reported timing of nursing assessments for the period.

Table 1. Nursing Assessment Timeliness, 2025

n=2,166

Timing of Assessments	# of Children Receiving Timely Assessment	% of Children Receiving Timely Assessment
Nursing Assessment 1-10 days after entry	653	30.1%
Nursing Assessment 11-20 days after entry	850	39.2%
Nursing Assessment 21+ days after entry	626	28.9%
No documentation of Nursing Assessment	37	1.7%
Total	2,166	100.0%

Source Data: ODHS Child Welfare

Pursuant to Section 3.10.1 of the Agreement, the Neutral team selected and requested from ODHS a sample of nursing assessments,[17] if available, for 25 children who entered substitute care during the period to confirm the accuracy of ODHS' aggregate data reporting. ODHS' data indicated 28 percent of these children received a timely nursing assessment. The Neutral team also found that 28 percent of children in the sample had a nursing assessment within ten days of entry into substitute care as required.

Recommendation

1. In addition to existing reporting as reflected in Table 1 above, the Neutral recommends **ODHS track and report the number and percentage of children who received a nursing assessment within 11-13 days of entry; 14-16 days of entry; and 17-20 days of entry**.

Mental Health Assessments (Measurement 7)

The Initial Review establishes the Ultimate Outcome for this Measurement as at least 90 percent of children aged 3 years and older who enter substitute care and remain in substitute care for at least 60 days will receive age-appropriate mental health assessments within 60 days of entry to substitute care. ODHS reported 1,131 (88.4 percent) of the 1,280 children aged 3 years and older who were due for a mental health assessment within 60 days of entry into substitute care during the period January 1 to December 31, 2025 received a timely mental health assessment.

In its May 1, 2026 Progress Report, ODHS states:

> A work group of ODHS and OHA staff determined that a core opportunity to improve timeliness was the fact that notifications of children being placed in care were being provided by ODHS to OHA on a weekly basis. Changing this from weekly to daily would enable the CCOs to more immediately begin scheduling children for assessments and services. In addition, eligibility determination times can further delay timely assessments.

Appendix A of the Progress Report indicates that notifications of children's entries to care are now being made to CCOs daily, and ODHS is monitoring the data for impact. Similarly, the ODHS nursing program manager and others have been charged to shorten children's Medicaid eligibility determinations to three days.

Table 2 below shows the reported timing of mental health assessments for the period.

[17] ODHS redacted the children's names and other identifying information from the nursing assessments provided but preserved case numbers in order for the Neutral to review and confirm the accuracy of the aggregated data.

Table 2. Mental Health Assessment Timeliness, 2025

n=1,280

Timing of Assessments	# of Children Receiving Timely Assessment	% of Children Receiving Timely Assessment
Mental Health Assessment 1-60 days after entry	1,131	88.4%
Mental Health Assessment 61+ days after entry	101	7.9%
No documentation of Mental Health Assessment	48	3.8%
Total	1,280	100.0%

Source Data: ODHS Child Welfare

Pursuant to Section 3.10.1 of the Agreement, the Neutral team selected and requested from ODHS a sample of mental health assessments,[18] if available, for 25 children who entered substitute care during the period to confirm the accuracy of ODHS' aggregate data reporting. In preparing to submit the requested assessments to the Neutral, ODHS identified gaps between the reported mental health assessment information and the information the agency was able to review once ODHS had received the actual assessments from resource parents, providers and others. For its initial data collection, ODHS had relied on representations from resource parents as its primary source for tracking compliance with Measurement 7.

Similarly, once the agency produced the assessments, the Neutral team identified additional gaps between the reported mental health assessment dates and the actual mental health assessment dates, some earlier and some later, for approximately half of the sample. To address the issue, ODHS developed and submitted to the Neutral enhanced data validation processes designed to

[18] ODHS redacted the children's names and other identifying information from the mental health assessments provided but preserved case numbers in order for the Neutral to review and confirm the accuracy of the aggregated data.

foster better coordination between its data and program teams to improve data accuracy going forward.[19]

ODHS' data indicated 92 percent of children in the Neutral's selected sample received a timely mental health assessment. The Neutral found that 88 percent of children in the sample had a mental health assessment within 60 days of entry into substitute care as required.

Complete Medical Assessments (Measurement 8)

The Initial Review establishes the Ultimate Outcome for this Measurement as at least 90 percent of children who enter substitute care and remain in substitute care for at least 60 days will receive a complete medical assessment with a primary health provider within 60 days of entry to substitute care. ODHS reported 1,625 (74.8 percent) of the 2,172 children who were due for a complete medical assessment within 60 days of entry into substitute care during the period January 1 to December 31, 2025 received a timely complete medical assessment with a primary health provider.

Table 3 below shows the timing of complete medical assessments for the period.

Table 3. Complete Medical Assessment Timeliness, 2025
n=2,172

Timing of Assessments	# of Children Receiving Timely Assessment	% of Children Receiving Timely Assessment
Complete Medical Assessment 1-60 days after entry	1,625	74.8%
Complete Medical Assessment 61+ days after entry	155	7.1%
No documentation of Complete Medical Assessment	382	18.0%
Total	2,172	100.0%

Source Data: ODHS Child Welfare

Pursuant to Section 3.10.1 of the Agreement, the Neutral team selected and requested from ODHS a sample of medical assessments,[20] if available, for 25 children who entered substitute care

[19] See Appendices B and C.

[20] ODHS redacted the children's names and other identifying information from the medical assessments provided but preserved case numbers in order for the Neutral team to review and confirm the accuracy of the aggregated data.

during the period to confirm the accuracy of ODHS' aggregate data reporting. The Neutral team identified gaps between the reported medical assessment dates and the actual medical assessment dates recorded in the documents, some earlier and some later, for 20 percent of the sample.

ODHS' data indicated 84 percent of children in the Neutral's sample received a medical assessment within 60 days of entry into substitute care. The Neutral team found that 76 percent of children in the sample received a timely medical assessment as required.

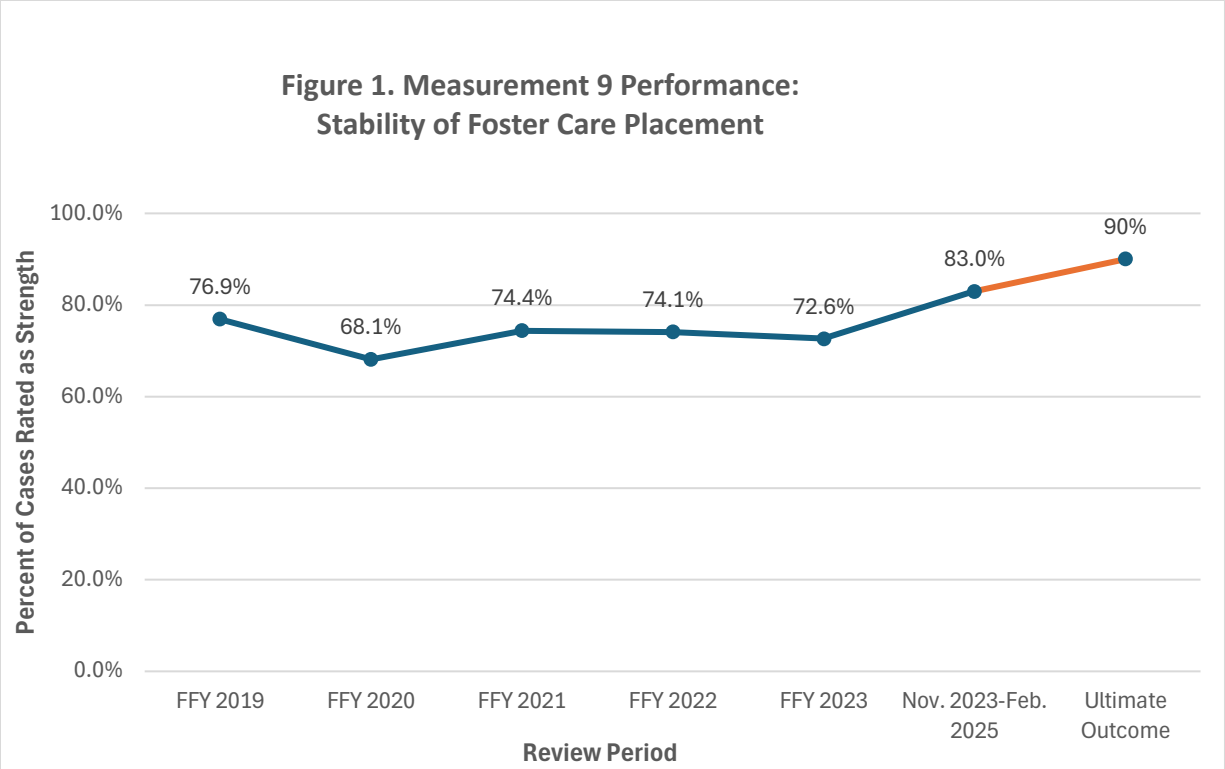
Category 5: Appropriateness and Quality of Placements and Services

Stability and Appropriateness of Placement (Measurement 9)

The Initial Review establishes the Ultimate Outcome of Measurement 9 is for the ODHS-convened team to find that 90 percent of cases reviewed through the agency's case review process are rated as a Strength for the Stability of the Child's Placement(s), including the determination that movements, if any, were in the child's best interests and consistent with the child's permanency goal(s). The State has been measuring its performance on Measurement 9 since at least 2019 according to the CFSR Round 4 – Oregon Statewide Assessment.[21] Reported performance on Measurement 9 has meaningfully improved from the FFY2019 baseline of 76.9% to 83% among the cases reviewed on a rolling basis between November 2023 and February 2025.

In Appendix A of the Progress Report, the Department identifies a goal to "[i]ncrease the number/percent and quality of 90-day staffings" in order to "improve case planning, service provision, placement stability and progress toward permanency." The Neutral and ODHS are continuing to discuss the data and information the Department assessed to conclude that this strategy will be effective for the referenced Measurements. ODHS' goal within the Progress Report is 35 percent of monthly reviews completed for 90-day staffings by June 30, 2026.

[21] https://www.oregon.gov/odhs/data/cwdata/cw-cfsr-statewide-assessment-2024.pdf (captured on August 4, 2026).



Source: Oregon CFSR Round 4 and ODHS Performance Dashboard

The significant investment of time and resources that ODHS has expended to assess these children's cases – now hundreds over the course of more than six years – provides a data and information-rich source of knowledge to surface barriers to better performance and power the development of strategies targeted to address those challenges.

Recommendations

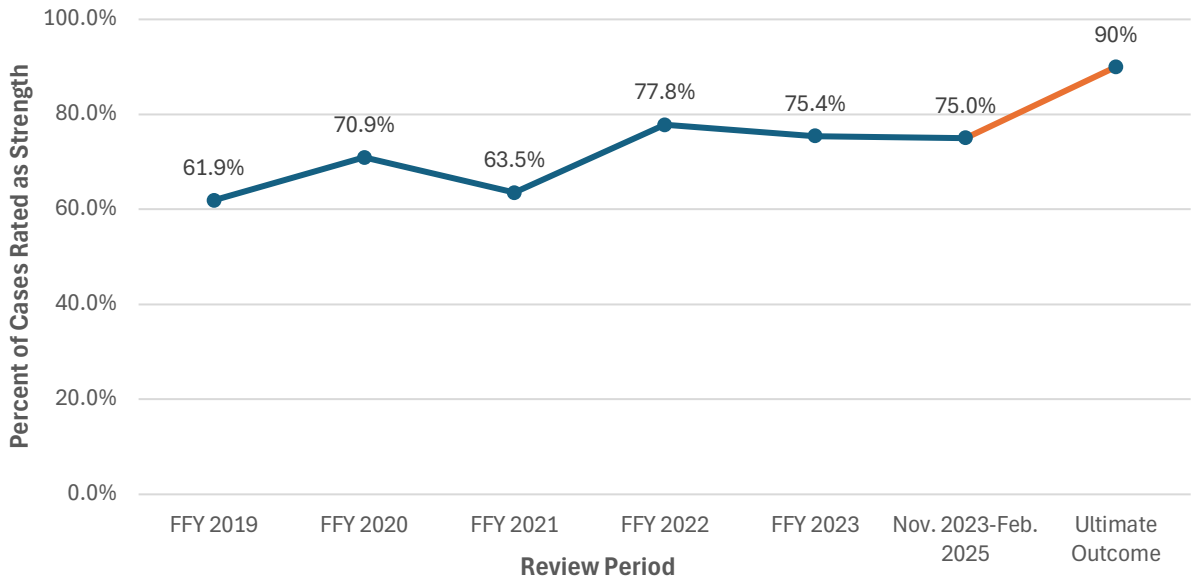
1. ODHS' reported performance on Measurement 9 improved from 76.9 percent in FFY2019 to 83 percent in the most recent selection of cases reviewed on a rolling basis between November 2023 and February 2025. The Neutral recommends that ODHS **identify the primary reasons that each of the 10 cases assessed as Needs Improvement did not achieve Strength** and report on the themes in those cases adversely impacting performance.
2. As ODHS has identified **the 90-day staffings** as a core strategy, the Neutral recommends the agency include current performance targets and actual performance for monthly reviews of the staffings in its semi-annual reporting pursuant to Measurement 14.
3. The Neutral recommends ODHS assess in 2026 and 2027 **whether children whose cases are subject to the staffings are more stable in their placements** than children who do not have staffings.

4. In Appendix A of the May 1, 2026 Progress Report, the Department identifies **increased relative placement as a strategy for placement stability,** reduced MIC and reduced re-entry. The Neutral recommends that ODHS **share the historic data and analysis underlying this strategy on placement stability**, and update the data and analysis annually, including it in the May 1st Progress Reports each year.

Children's Physical Health (Measurement 10)

The Initial Review establishes the Ultimate Outcome of Measurement 10 is for the ODHS-convened team to find that 90 percent of cases reviewed through the agency's case review process are rated as a Strength for the agency's efforts to address the physical health needs of children. The State has been measuring its performance on Measurement 10 since at least 2019 according to the CFSR Round 4 – Oregon Statewide Assessment.[22] Reported performance on Measurement 10 has improved from the FFY2019 baseline of 61.9 percent to 75.4 percent in FFY2023 and remained relatively flat at 75 percent among the cases reviewed on a rolling basis between November 2023 and February 2025.

Figure 2. Measurement 10 Performance: Physical Health of the Child



Source: Oregon CFSR Round 4 and ODHS Performance Dashboard

[22] https://www.oregon.gov/odhs/data/cwdata/cw-cfsr-statewide-assessment-2024.pdf (captured on August 4, 2026).

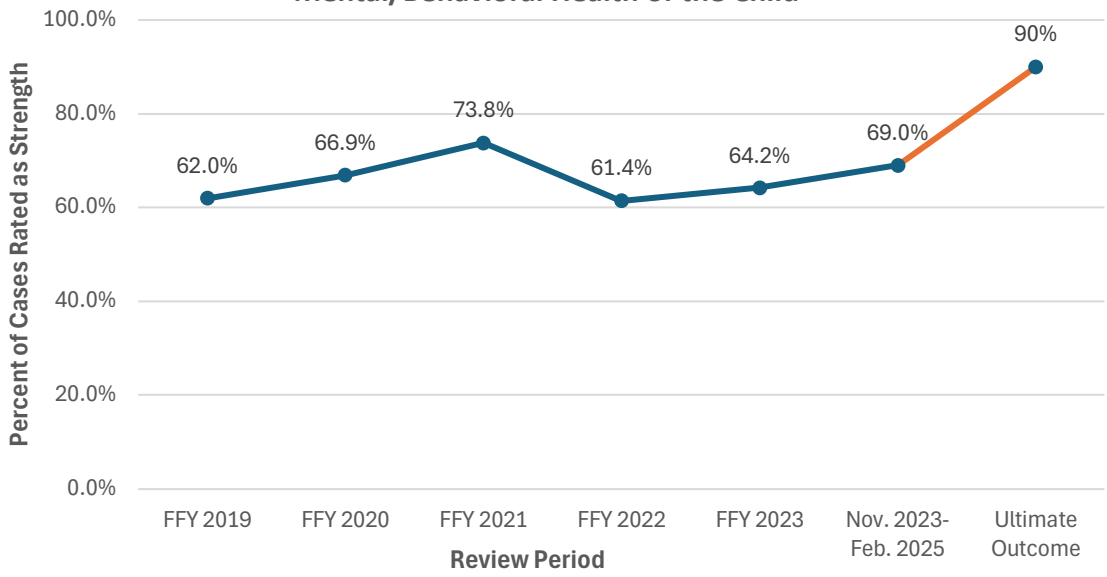
Recommendations

1. ODHS' reported performance on Measurement 10 improved from 61.9 percent in FFY2019 to 75 percent in the most recent selection of cases reviewed on a rolling basis between November 2023 and February 2025. The Neutral recommends that ODHS **identify the primary reasons that each of the 16 cases assessed as Needs Improvement in the most recent selection of cases reviewed on a rolling basis between November 2023 and February 2025 did not achieve Strength** and report on the themes in those cases adversely impacting performance.
2. Going forward, the Neutral recommends ODHS track whether there is **a correlation between a Strength finding and the occurrence of 90-day staffings** in a child's case.

Children's Mental and Behavioral Health (Measurement 11)

The Initial Review establishes the Ultimate Outcome of Measurement 11 is for the ODHS-convened team to find that 90 percent of cases reviewed through the agency's case review process are rated as a Strength in addressing the mental and behavioral health needs of children. The State has been measuring its performance on Measurement 11 since at least 2019 according to the CFSR Round 4 – Oregon Statewide Assessment.[23] Reported performance improved slightly from the FFY2019 baseline of 62 percent to 64.2 percent in FFY2023 and rose to 69 percent among the cases reviewed on a rolling basis between November 2023 and February 2025.

Figure 3. Measurement 11 Performance: Mental/Behavioral Health of the Child



Source: Oregon CFSR Round 4 and ODHS Performance Dashboard

[23] https://www.oregon.gov/odhs/data/cwdata/cw-cfsr-statewide-assessment-2024.pdf (captured on August 4, 2026).

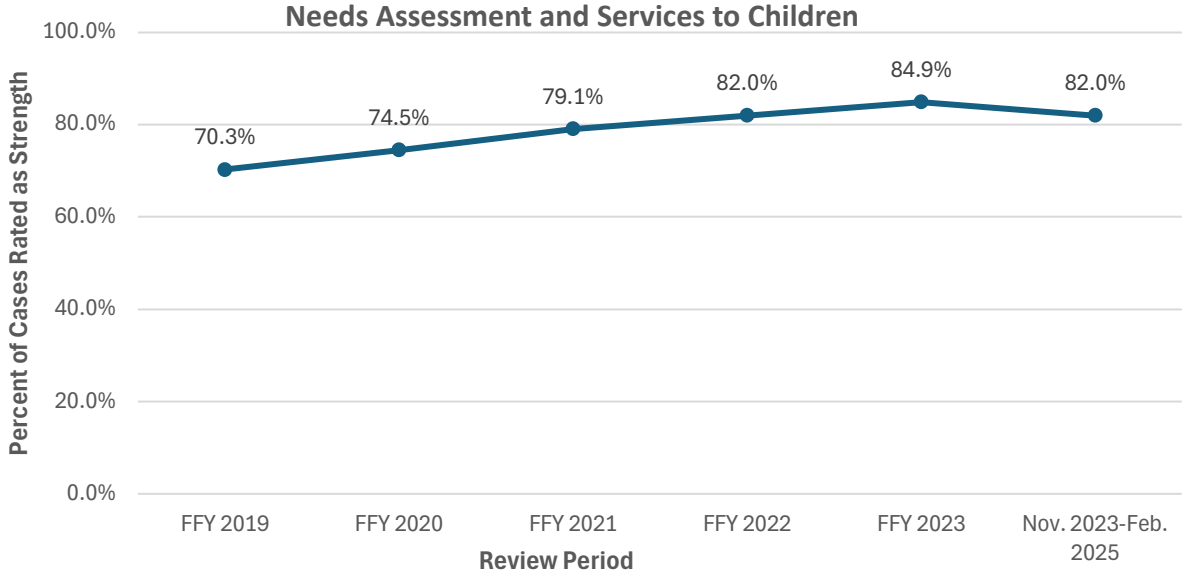
Recommendations

1. The Neutral recommends that ODHS **identify the primary reasons that each of the 17 cases assessed as Needs Improvement in the most recent selection of cases reviewed on a rolling basis between November 2023 and February 2025 did not achieve Strength** and report on the themes in those cases adversely impacting performance.
2. Going forward, the Neutral recommends ODHS **track whether there is a correlation between a Strength finding and the occurrence of 90-day staffings in a child's case.**

Children's Needs (Measurement 12)

The Initial Review establishes the goal of Measurement 12 is for the ODHS-convened team to find that 90 percent of reviewed cases within the agency's case review process are rated a Strength for the agency's efforts to assess the needs of and provide services to children. The State has been measuring its performance on Measurement 12 since at least 2019 according to the CFSR Round 4 – Oregon Statewide Assessment.[24] Reported performance improved steadily from the FFY2019 baseline of 70.3 percent to 84.9 percent in FFY2023 and declined to 82 percent among the cases reviewed between November 2023 and February 2025.

Figure 4. Measurement 12 Performance: Needs Assessment and Services to Children



Source: Oregon CFSR Round 4 and ODHS Performance Dashboard

[24] https://www.oregon.gov/odhs/data/cwdata/cw-cfsr-statewide-assessment-2024.pdf (captured on August 4, 2026).

Recommendations

1. The Neutral recommends that ODHS **identify the primary reasons that each of the 13 cases assessed as Needs Improvement in the most recent selection of cases reviewed on a rolling basis between November 2023 and February 2025 did not achieve Strength** and report on the themes in those cases adversely impacting performance.
2. Going forward, the Neutral recommends ODHS **track whether there is a correlation between a Strength finding and the occurrence of 90-day staffings** in a child's case.

Category 6: Notification of Child Maltreatment

Tool, Methodology and Training in 2026 (Measurement 13)

The Agreement requires the Neutral to "assess ODHS' efforts, policies, and practices" regarding notifications and providing records about maltreatment in care as required by applicable Oregon statutes.[25] Performance will be measured beginning in CY 2027.

Because the tool and methodology for review of Measurement 13 did not exist in 2025, ODHS in consultation with Neutral developed a review tool, a detailed methodology description, and definitions for terms used in the tool. The tool will be used to both (A) report whether ODHS made the required notifications in the timeframe set forth in statute and (B) report on ODHS' efforts to make the required notifications in the timeframe set forth in statute using the "Strength" and "Needs Improvement" framework, consistent with federal methodology and current reporting processes on other items measured during the CFSR process. The methodology will include a sampling of 100 reports annually, randomly selected by the Neutral, from the complete list of all reports received by ODHS during the preceding calendar year, January 1 to December 31, alleging that a child in care may have been subjected to abuse. ODHS committed to train reviewers and pilot the tool beginning by June 1, 2026.

Category 7: Core Strategies and Efforts Reporting

ODHS Progress Report (Measurement 14)

Beginning in 2026, by May 1st and November 1st of each year, ODHS is committed to submit to the Neutral a detailed semi-annual Efforts Report describing, and assessing the effectiveness of, the agency's efforts to substantially achieve the Measurements and Ultimate Outcomes. The Efforts Report is expected to identify the agency's core strategies for each Measurement and Ultimate Outcome, as well as detailed, data-informed plans, including timelines, to refine, add,

[25] Agreement, Section 2.6.1.

or alter Core Strategies. The Efforts Report should also analyze relevant performance data, identify systemic, statewide or District-specific barriers to improved performance, and assess the effectiveness of ODHS' efforts to substantially achieve the Measurements and Ultimate Outcomes.

The ODHS Progress Report of May 1, 2026 establishes baseline performance under the Agreement and the Initial Review and contains the first integrated identification of core strategies for the Measurements and Ultimate Outcomes. The Department's May 1, 2026 Progress Report did not – and could not yet have - assessed the effectiveness of ODHS' efforts to substantially achieve the Measurements and Ultimate Outcomes since some of the agency's strategies are just getting underway or expanding in 2026. The parties and the Neutral expect future ODHS Progress Reports to include analysis around the effectiveness of the agency's efforts, informed by relevant performance data. The Neutral and ODHS have discussed the importance of the agency continuing to grow its use of accurate data to identify risks and opportunities for enhanced child safety. It is important that ODHS delineates clearly in future Efforts Reports the data and learning that underlie each specific strategy, the linkage to an identified challenge or barrier to substantial compliance, as well as the data and information on the deployment of each specific strategy and its observable effectiveness.