

Wyatt Ultimate Outcomes vs. Current Performance

Sources and Key Definitions:

Federal data dashboard, Maltreatment in foster care
CFSR Round 4
Child Welfare Division Progress Report to the Governor, May 2025

Key Definitions:

“CANS” information: <https://praedfoundation.org/tcom/tcom-tools/the-child-and-adolescent-needs-and-strengths-cans/>

“CATS” information: <https://istss.org/clinical-resources/child-adolescent-trauma-assessments/child-and-adolescent-trauma-screen/>

“**Licensed Medical Practitioner (LMP)**” means an individual who meets the following minimum qualifications as documented by the Local Mental Health Authority (LMHA) or designee:

- (a) Physician licensed to practice in State of Oregon; or
- (b) Nurse practitioner licensed to practice in the State of Oregon;
- (c) Physician’s assistant licensed to practice in the State or Oregon; and
- (d) Whose training, experience and competence demonstrate the ability to conduct a mental health assessment and provide medication management;
- (e) For IOSS and ITS providers, LMP means a board-certified or board-eligible child and adolescent psychiatrist licensed to practice in the State of Oregon.

“**Qualified Mental Health Professional (QMHP)**” means a LMP or any other person meeting the minimum qualifications as authorized by the LMHA, or designee, and specified in 309-019-0125 (8).

Wyatt Ultimate Outcomes vs. Current Performance :
Comparable current performance data available

Measure	Federal Standard (Where applicable)	Ultimate Outcome and date	Current Oregon Performance	GAP
M1: Maltreatment in care (All children in legal OR physical custody of ODHS) <i>(Federal data dashboard on ODHS website; link above)</i>	9.07 or less	9.07 or less by 9/30/29	25.1	Must decrease maltreatment rate by 16.03
M4: Rate of foster care reentry <i>(Federal data dashboard on ODHS website; link above)</i>	5.6% or below	5.6% or below by 9/30/2025	8.87%	Must decrease rate of foster care entry to 3.27 percentage points lower than current rate
M5: Timeliness of Initial Case Plans for Children in Care <i>Child Welfare Division Progress Report to Governor, May 2025 page 12; link above</i>	NA	90% or more of reviewed cases rated as strength by 4/1/2028	84.4%	Must improve strength rating for timeliness of initial case plans by 5.6%
M 9: Appropriateness and quality of placements <i>(CSFR Round 4, Item 17; Page 29. Link above)</i>	NA	At least 90% of reviewed cased rated as strength by 4/1/2028	72.6%	Must improve strength rating for placement quality by 17.4%

Measure	Federal Standard (Where applicable)	Ultimate Outcome and date	Current Oregon Performance	GAP
M 10: Physical health needs <i>(CSFR Round 4, Item 17; Page 53. Link above)</i>	NA	At least 90% of reviewed cases rated as strength by 4/1/2028	75.4%	Must improve strength rating for addressing physical health needs by 14.6%
M11: Mental and behavioral health of child <i>(CSFR Round 4, Item 17; Page 55. Link above)</i>	NA	At least 90% of reviewed cases rated as strength by 4/1/2028	64.2%	Must improve strength rating for addressing the mental and behavioral health needs of children by 25.8%
M12: Needs assessment and services for children	NA	At least 90% of reviewed cases rated as strength	84.9%	Must improve strength rating for appropriate needs assessment and services for children by 5.1%

Wyatt Ultimate Outcomes vs. Current Performance:

Apples to Apples Data not Available

Measure	Federal Standard (Where applicable)	Ultimate Outcome and data	Current Oregon Performance	Notes
M 2: Maltreatment in Care (Only children who are both in the LEGAL and PHYSICAL custody of ODHS. This includes children on safety plans and those on trial home visits)	9.07 or less	9.07 or less by 9/30/29	NA with this narrower data set.	This data is currently available only as reported to the federal government, which includes ALL children in the legal custody of ODHS, regardless of whether they are in substitute care or with their parents. Although the 9 th Circuit ruled that the class includes ALL children in the legal OR physical custody of ODHS, this measure in the settlement will allow better understanding of how safety of children in ODHS custody compares between substitute care and care with their parents.
M3: Risk & Safety Assessment (CSFR Round 4, Item 3; Page 20)	NA	90% or more of reviewed cases rated as a strength	55.1% across ALL assessed children (see note)	Note strength rating in this category for CFSR Round 4, Item 3 is for ALL children assessed by ODHS and not for the smaller class identified by the neutral—only children who have been in ODHS custody for at least 6 continuous months prior to October of each year assessed. The reporting under Wyatt will provide the opportunity to look specifically at timeliness for risk assessment for children in care.

Wyatt Ultimate Outcomes vs. Current Performance:

Current Data not Available

Measurement	Ultimate Outcome	Current or Baseline Performance	Data source and notes
<p>Measure 6: Nursing Assessments</p>	<p>At least 90% of children entering substitute care will receive a completed ODHS nursing assessment within 10 days of entry to substitute care by 12/31/28.</p>	<p>Not available</p>	<p>The neutral provides an explicit definition of what will be accepted as a nursing assessment and what documentation must be offered. This is found in footnote 6 in the Neutral’s report:</p> <p style="text-align: center;"><i>“The Nursing Assessment means an assessment conducted by a DHS-contracted or DHS-employed nurse, and includes all aspects defined in the ODHS Policy and Procedures Manual, Chapter 5, Section 48, effective May 20, 2025. The Nursing Assessment includes all forms provided by ODHS to the Neutral via email on March 7, 2025, in Appendix D to the ODHS Wyatt B. Collaborative Agreement Packet submission, pp. 37-55.”</i></p>

Measurement	Ultimate Outcome	Current or Baseline Performance	Data source and notes
Measure 7: Mental Health Assessments	At least 90% 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, by 12/31/29.	Not Available	<p>The neutral provides an explicit definition of what will be accepted as a mental health assessment, and explicitly excludes certain tools. This is found in footnote 10 of the Neutral’s initial report:</p> <p><i>“A mental health assessment includes a comprehensive evaluation conducted by a community based Qualified Mental Health Professional (QMHP) that includes an interview to assess symptoms, behaviors and overall mental health status and a review of relevant medical and mental health records. A Child and Adolescent Needs and Strengths (CANS) screening is not a mental health assessment. Although Oregon does not presently use a Child and Adolescent Trauma Screen (CATS), the CATS is not a mental health assessment.”</i></p>

Measurement	Ultimate Outcome	Current or Baseline Performance	Data source and notes
<p>M 8: Complete medical assessments</p>	<p>At least 90 percent of children who enter substitute care and remain in substitute care for at least 60 days will receive a complete health assessment with a primary health provider (PHP) within 60 days of entry to substitute care by 12/31/29.</p>		<p>The neutral provides an explicit definition of what will be accepted as a complete medical assessment. This is found in footnote 13 of the Neutral’s initial report:</p> <p><i>A complete medical assessment of a foster child means an assessment by a healthcare provider within the child’s CCO Medical Home. The assessment includes a thorough examination of the child’s physical health and developmental status, as well as screenings for potential health issues and referrals for specialized care. It also involves reviewing available medical records, assessing immunization status, and developing a treatment plan and well child visit schedule.</i></p>

Measurement	Ultimate Outcome	Current or Baseline Performance	Data source and notes
M13: Notifications of Reports of Abuse of Children in Care	90% of cases qualitatively reviewed each year shall be rated as a strength.	Not available	This is not currently measured. ODHS must develop and submit a proposed assessment tool to the neutral by November 15, 2025 with tool ready to pilot by 6/1/26
M 14: Core Strategies and Efforts Reporting	NA	NA	NA