Critical Incident Review Team Final Report

A Critical Incident Review Team is convened by the Department Director when the Department becomes aware of a critical incident resulting in a child fatality that was reasonably believed to be the result of abuse and the child, child's sibling or another child living in the household with the child has had contact with the Department (ODHS). The reviews are called by the Department Director to quickly analyze ODHS actions in relation to the critical incident and to ensure the safety and well-being of all children within the custody of ODHS or during a child protective services assessment. The CIRT must complete a final report which serves to provide an overview of the critical incident, relevant Department history, and may include recommendations regarding actions that should be implemented to increase child safety. Reports must not contain any confidential information or records that may not be disclosed to members of the public. *The CIRT report is created at a specific time as required by statute and does not account for events occurring after the posting of the report*. Versions of all final reports are posted on the ODHS website.

CIRT ID: O7UT334ITY	
Date of critical incident: February 23, 2022	**Date Department became aware of the fatality:** February 24, 2022
Date Department caused an investigation to be made: February 24, 2022 March 31, 2022 (updated information received; CIRT eligibility criteria met)	**Date of child protective services (CPS) assessment disposition:** Founded
Date CIRT assigned: April 4, 2022	**Date Final Report submitted:** July 12, 2022

Date of CIRT meetings:	Number of participants:	Members of the public?
April 25, 2022 June 3, 2022	20 18	Yes No

Description of the critical incident and Department contacts regarding the critical incident:

Date of report:	Allegation(s):	Disposition(s):
March 31, 2022 **Assignment decision:** Within 24 hours	Neglect by mother; Threat of harm by mother	Founded Founded, Unfounded

On March 31, 2022, ODHS received a report of neglect by the mother to the child, deceased, and threat of harm to the child's older siblings who resided out of the mother's care at the time of the child's death. The report described fentanyl in the child's system at the time of their death on February 24, 2022. Circumstances surrounding the child's death, outlined below in the Report dated February 24, 2022, involved the child being found unresponsive in their home with their mother after a short nap. The child could not be revived by emergency medical respondents and was pronounced deceased at the hospital on that date. At that time, no immediate safety concerns or cause of death was evident. Based upon the information outlined in the March 31, 2022 referral, the referral was assigned for a 72 -hour response.

Between February 24 and March 9, 2022, the CPS caseworker attempted contact with the mother multiple times via phone and text messages. The caseworker also attempted contact with the mother by letter, sent on March 30, 2022, with a request for her to attend an appointment scheduled with the CPS caseworker on a specific date. The mother did not attend the appointment or make contact with the CPS caseworker. At the date of this

writing, the mother has not yet made contact with the CPS caseworker or law enforcement.

This CPS assessment was coded as founded for neglect by the mother to the child, as the child was found to have lethal levels of fentanyl in their system at the time of their death. The mother did not engage in the assessment activities with the CPS caseworker or law enforcement; she was the sole caregiver of the child at the time of their death, and considering historical information obtained through previous CPS assessment activities, it is reasonable to believe she did not meet the child's basic needs, which resulted in their death.

This CPS assessment was coded as unfounded for a threat of harm by the mother toward one of the child's siblings, as there was no indication the mother had any contact with the child, unsupervised or other, for a significant period of time.

This CPS assessment was also coded as founded for a threat of harm by the mother to one of the child's siblings because there was sufficient information to suggest the mother had substances in her home while that child was visiting, which posed a significant risk to their health and safety.

Description of relevant prior Department reports under the case of child's mother:

Date of report: June 4, 2012 **Assignment decision:** Within 24 hours	**Allegation(s):** Threat of harm, Neglect by mother	**Disposition(s):** Founded

On June 4, 2012, ODHS received a report of neglect and threat of harm to the child's sibling, age 2. The mother presented to a community provider in need of emergency funding and appeared highly impaired by substances. The mother acknowledged using marijuana, but her behavior was reported

to be inconsistent with marijuana use. The mother reported being houseless and living in a car with the child's sibling and her boyfriend. The sibling was present with the mother who expressed not knowing how she was going to feed or care for the sibling. The referral was assigned for a 24-hour response.

The CPS caseworker made contact with the mother and sibling on June 4, 2012. The mother advised she used marijuana daily and used methamphetamine sporadically, with the last time being approximately two weeks prior. She described only having the clothes she and the sibling were wearing because her belongings were in storage that she could not access. She advised she was houseless and living in her truck. The mother was given clothing for the sibling. Her significant other arrived at the office with visible injuries from a recent assault and took the sibling to the car. Arrangements were made for the mother to meet with the CPS caseworker at a later date for additional follow-up.

On June 8, 2012, the mother met with the CPS caseworker and Addiction Recovery Team (ART) worker; she reported using marijuana earlier in the day and methamphetamine on June 2, 2012. The mother was not able to engage in service planning with the CPS caseworker or ART worker at that time. She did not have the sibling in her care. The CPS caseworker met with the sibling at their father's home on June 11, 2012. It was reported the mother took the sibling to their father's home a few days prior and left them in the custody of their father indefinitely. There were no concerns regarding the sibling's health or living environment in their father's home. The referral was coded as founded for threat of harm due to the mother placing the sibling at threat of severe harm due to her current and significant substance use, and inability to provide for the sibling's basic needs.

Date of report: October 30, 2015 **Assignment decision:** Within 5 days	**Allegation(s):** Neglect by mother	**Disposition(s):** Founded

On October 30, 2015, ODHS received a report of neglect to the child's newborn sibling. The report indicated the sibling was born at 35 weeks; the pregnancy was deemed high risk due to the mother's daily IV heroin use, houselessness, and late/limited prenatal care. Upon hospital admission for the delivery, the mother tested positive for methamphetamines, heroin, marijuana, and opiates, and admitted to daily heroin use. The newborn was administered morphine to assist with withdrawals, although their drug urine screen had not yet been completed. They were admitted to the NICU. The reporter stated the mother's older child was in the custody of their father; the older sibling's father was alleged to be this sibling's father as well. Recommendations were made to the mother to engage in services. Mother was reported to be living with her father, and her family was working to develop a supportive plan for her and the newborn. The referral was assigned for a 5-day response.

On November 2, 2015, the CPS caseworker made contact with medical staff caring for the newborn. Medical staff advised that they were not able to reach the mother and she had not visited with the newborn consistently since her hospital discharge. The CPS caseworker made contact with the newborn at the hospital on November 3, 2015. They were low birthweight and undergoing opiate withdrawals. Attempts to reach the mother via phone on that same date were unsuccessful. It was later discovered that the mother was incarcerated.

On November 4, 2015, the CPS caseworker met with the mother while she was incarcerated. The mother acknowledged daily heroin use throughout her pregnancy, and historically. She also reported using methamphetamine regularly throughout her pregnancy. She disclosed a lengthy history of substance use from age 13 to present with her heroin use beginning several years prior. Recommendations were made for mother to engage in services. Relatives were contacted by the CPS caseworker, and the relatives did not note any significant concerns regarding the sibling's legal father, although it was noted he may still use marijuana and sometimes used poor judgment. The referral was coded as founded for neglect by the mother as she used heroin and methamphetamine consistently throughout her pregnancy resulting in her newborn requiring extended medical care for their in-utero substance exposure. The mother had also failed to visit the newborn

consistently since her discharge, after their birth. Additionally, mother was found to be incarcerated. The newborn was placed in the care of the father who also had primary custody of an older sibling.

Date of report:	**Allegation(s):**	**Disposition(s):**
May 29, 2021 **Assignment decision:** Within 72 hours	Neglect by mother	Unfounded

On May 29, 2021, ODHS received a report of neglect to the child's older sibling, age 11. The report stated the sibling was in the care of the mother while she was using methamphetamine, heroin, and prescription medications. It was unknown if they were within the sibling's access. There was no available information as to how the mother's substance use impacted her parenting of the sibling. The sibling was reported to be using marijuana and was frequently with their friends during the time they were in their mother's care. The reporter did not believe the sibling had witnessed the mother using drugs; it was stated the sibling rarely interacted with the mother during visits. The mother was noted to be pregnant, working full time, and using methamphetamine to stay awake, heroin to sleep, and methadone to hide her heroin use at the time of delivery. The referral was assigned for a 72-hour response.

The CPS caseworker met with the sibling and their father on June 1, 2021 at which time it was confirmed the sibling had used marijuana, which was addressed by the father. The sibling's visitation with the mother was noted to be informally occurring; the sibling reported not having seen their mother for several months. The CPS caseworker met with the mother on June 8, 2021. She admitted to a significant substance use history, including current, significant substance use and stated her children were not involved in or aware of her substance use. She reported keeping her substances secured and out of reach of her children. She was noted to be nine months pregnant.

She confirmed the sibling usually spent time with their friends when they were at her home. The sibling was interviewed and denied observing their mother using drugs or having access to substances while in her home. During the assessment period, an additional report of concern involving the mother was received by ODHS on June 15, 2021 (see below for detailed information).

In a subsequent home visit on June 25, 2021, the mother showed the CPS caseworker a lockbox she used to store substances and paraphernalia. The mother was reportedly engaged in services. Collateral contacts confirmed she was engaging in all appropriate postnatal care for her newborn. No additional concerns regarding the sibling's substance use or time in her home were noted. The referral was coded as unfounded for neglect as there was no indication the sibling had access to the mother's substances, her use was in their presence, or her use impacted her care of the children.

Date of report: June 15, 2021 **Assignment decision:** Within 24 hours	**Allegation(s):** Threat of harm by mother	**Disposition(s):** Unfounded

On June 15, 2021, ODHS received a report the mother tested positive for amphetamines, opiates, and methadone at the delivery of the child. It was reported the mother used heroin throughout her pregnancy and was under the care of a doctor. The mother had not named a father and stated the child's father was currently incarcerated. There were no noted medical issues or needs for the child at the time of the report. The mother was also noted to have received little to no prenatal care. No additional information regarding services, supports, or her substance use was known. The referral was assigned for a 24-hour response and assigned to the CPS caseworker currently assessing the mother for neglect on a report received May 29, 2021.

The CPS caseworker made contact with the mother and child at the hospital. The mother was open about her substance use and acknowledged she was in need of services. She acknowledged using methamphetamine and heroin throughout her pregnancy. The child was observed to be doing well with no concerns or signs of substance withdrawal. The mother agreed to follow-up visits and to engage in services.

The CPS assessment caseworker met with the mother on June 25, 2021, to discuss the reports of concern received on May 29, 2021, and June 15, 2021. The mother showed the worker the lockbox she kept substances in and the storage out of reach of her children. The mother agreed to a plan to engage in services, as previously described, and to engage the child in all necessary medical appointments. This was confirmed through collateral contacts until July 27, 2021, at which time the mother tested positive for methamphetamines and methadone.

When discussing her return to use, the mother stated that she had been triggered by a family event and denied using methamphetamine in the presence of her children. She expressed a desire to continue with services. The mother showed continuing engagement with her services as well as growing support systems throughout the CPS assessment period. Multiple unannounced home visits were conducted. No concerns regarding the child's care, well-being, or home environment were noted. The referral was coded as unfounded for threat of harm to the child as the mother was engaging in multiple supportive services and no evidence of a risk of severe harm or injury to the child was evident.

Date of report: October 26, 2021 **Assignment decision:** Closed at screening	**Allegation(s):** Neglect by third party	**Disposition(s):** N/A

On October 26, 2021, ODHS received a report of neglect to the child, age four months, by an unknown perpetrator. The report stated the child's

babysitter may be using methamphetamine while caring for them and their siblings. The reporter had not directly witnessed any substance use or substances in the home and had received the information from another source. The referral was closed at screening due to not being a report of abuse.

Date of report:	**Allegation(s):**	**Disposition(s):**
November 2, 2021 **Assignment decision:** Within 24 hours	Physical abuse by mother	Unfounded

On November 2, 2021, ODHS received a report of physical abuse to the child, age four months. The child was observed with two parallel rectangles on their left forearm, in a pattern shape, that appeared to be healing skin. Neither parent was able to provide an explanation for the markings but did note the child had been scooting on their belly and may have gotten a rug burn. There was also a flat, uniform tan mark on their back reported by the mother's significant other to be a birthmark. The mother and her significant other, who was identified as the child's father, but not the father of the child's siblings, had recently separated. The man stated he was still providing a great deal of care for the child at the time. There were concerns reported about the mother's lack of parenting skills, and it was confirmed she had been told about safe sleep practices by medical staff. The referral was assigned for a 24-hour response.

On November 3, 2021, the CPS caseworker met with the mother and child in their home. The mother confirmed that she and her former significant other were no longer in a romantic relationship, but he was helping her with her child. The injuries of concern were observed and photographed. The injuries were determined to be consistent with age-appropriate development related to crawling. The mother appeared forthcoming. The referral was coded as unfounded for physical abuse as the injuries observed and documented

appeared to be consistent with age- and developmentally appropriate activities and the explanation provided by the mother and her partner.

Date of report:	**Allegation(s):**	**Disposition(s):**
November 3, 2021 **Assignment decision:** Within 24 hours	Neglect by mother	Unfounded

On November 3, 2021, ODHS received a report of neglect to the child, age four months. The mother was reported to be using substances and was observed screaming and yelling at the child, did not express feelings for them, left them unsupervised, and joked about shaken baby syndrome. The child was observed four days prior lying on a blanket in the yard unsupervised for an indeterminate time while the mother was in the house. The referral was assigned for a 24-hour response.

The CPS caseworker and ART worker met with the mother on November 4, 2021. The mother admitted to recently returning to methamphetamine use and stopping services, due to a conflict with the service provider. She denied using methamphetamine in the home and expressed an interest in online services. She stated she used methamphetamine to help her cope with opiate withdrawals. The CPS caseworker staffed the concern of active substance use in the home with other Child Welfare professionals on November 5, 2021. On November 12, 2021, a plan of care meeting was held and a plan to encourage active community supports in the home with the mother and child was developed. The mother accepted the supportive services. Ongoing monitoring of the child's safety in the home occurred.

On December 14, 2021, the CPS caseworker and ART worker met with the mother in her home due to receiving a report from a service provider the mother had quit her job and was engaging in significant substance use in the

home. The home was observed to be clean, appropriate, and free of obvious hazards. The child was observed to be healthy and appeared well cared for. The mother expressed her desire to cease using substances, obtain employment, and engage in services. She demonstrated developing a large community support network of friends, family members, and service providers.

At the end of the CPS assessment period, on February 2, 2022, the mother demonstrated she was maintaining her support network, was employed, engaged in services, had a plan for substances to be out of the reach of her children should she return to use, and was providing safe and appropriate care for the child. The child's medical providers noted no concerns about their health or development. The referral was coded as unfounded for neglect because there was no information the child's health or safety was neglected while in their mother's care.

Date of report:	**Allegation(s):**	**Disposition(s):**
February 24, 2022 **Assignment decision:** Within 24 hours	Neglect by mother	Founded

On February 24, 2022, ODHS received a report of neglect to the child, aged eight months. The report indicated on the previous evening, February 23, 2022, the child fell asleep on their back on the living room floor of the home of their mother. The child's relative was in the home visiting. While the child was asleep, the mother and relative went outside and visited for an indeterminate amount of time. After what she estimated to be about an hour after putting them down, the mother checked on the child and found them unresponsive. EMS was contacted and performed CPR. The child was transported to the hospital where they were pronounced deceased. There were a few items in the child's sleeping area vicinity noted by responding law enforcement, but nothing appeared capable of blocking their breathing.

There were no observable concerns in the home. The mother stated she checked the formula she was using, and it was not subject to a nationwide recall in place at the time. She also noted the child had been slightly congested and had a low-grade fever of 99 degrees within the last few days but had no other concerns about changes to their health or behavior recently. There were no concerns about the temperature of the home; it was unknown if anyone smoked in the home. The mother had a boyfriend who did not reside in the home and was not present at the time of the child's death; The mother reported the child's biological father was in prison. An autopsy and toxicology report were performed with pending results. The referral was assigned for a 24-hour response.

Attempts to contact the mother via phone and text message were made by the CPS worker multiple times between February 25, 2022, and March 9, 2022. A letter was sent to mother on March 30, 2022, with a request for her to attend an appointment scheduled with the CPS caseworker on a specific date. The mother did not attend the appointment or make contact with the CPS caseworker. At the date of this writing, the mother had not yet made contact with the CPS caseworker or law enforcement.

Information obtained by ODHS revealed that fentanyl was in the child's system at the time of their death, generating a new report of abuse on March 31, 2022. On April 7, 2022, the CPS assessment workers met with the child's siblings in their home with their father and stepmother. No concerns were noted about the children in their father's care.

This assessment was coded as founded for neglect by the mother to the child, as the child was found to have lethal levels of fentanyl in their system at the time of their death. While the mother did not engage in the assessment activities with CPS assessment caseworkers or law enforcement, as she was the sole caregiver of the child at the time of their death and, considering historical information obtained in previous CPS assessments, it is reasonable to believe she did not meet the child's needs resulting in their death.

Description of relevant prior Department reports under the case of child's father:

Date of report: March 30, 2011 **Assignment decision:** Within 24 hours	**Allegation(s):** Physical abuse, sexual abuse by unknown perpetrator	**Disposition(s):** Unfounded

On March 30, 2011, ODHS received a report of physical and sexual abuse to the child's sibling by an unknown perpetrator. The sibling, age 2, returned home from a visit with their mother and was reported to have bruising to their buttocks and broken blood vessels around their anus. The mother did not know where the injuries came from; she did note she worked that day and others cared for the sibling in her absence. The mother was supposed to have the child return to her care for an overnight visit. The referral was assigned for a 24 -hour response.

The disposition was unfounded because a medical examination found that no indication of abuse or neglect was present.

Date of report: April 2, 2012 **Assignment decision:** Closed at Screening	**Allegation(s):** Neglect by mother	**Disposition(s):** Not applicable

On April 2, 2012, ODHS received a report of neglect to the child's sibling, age 2. The report outlined concerns the mother was using substances and under the influence when caring for the sibling. The referral was closed at screening as not a report of abuse or neglect because there was no evidence that the mother's reported substance use impacted her parenting of the sibling.

Date of report: April 27, 2012 **Assignment decision:** Within 24 hours	**Allegation(s):** Physical abuse by mother	**Disposition(s):** Unfounded

On April 27, 2012, ODHS received a report of physical abuse to the child's sibling, age 2. The report alleged physical abuse to the sibling by their mother. According to the report, the sibling talked about their mom being mean and spanking their face. No injuries were observed on the sibling. The referral was assigned for a 24-hour response.

The CPS caseworker made contact with the father via phone on April 27, 2012. The father did not disclose any concerns regarding the mother's parenting, but advised she lived with people of questionable character and background. The CPS caseworker met with the mother on April 30, 2012. The sibling was observed in the home with their mother. No concerns were noted, and the mother did not appear to be under the influence of substances. The CPS caseworker made contact with the sibling and their father on May 2, 2012. No concerns were noted about the child's appearance or home environment at that time. The referral was coded as unfounded due to no evidence physical abuse occurred.

Date of report: November 12, 2014 **Assignment decision:** Within 24 hours	**Allegation(s):** Neglect by father	**Disposition(s):** Unfounded

On November 12, 2014, ODHS received a report of neglect to the child's sibling, age 5, by their father. The report stated the father was using heroin

and was unable to care for the sibling. The sibling had been cared for by their relative for several weeks but returned to the father's care the previous week. The father was observed to be under the influence the previous evening, and the living conditions were unsanitary. The sibling told the reporter they had not eaten for four days. The father left the home with the sibling and went to a relative's home where he was located by law enforcement. A second reporter advised the sibling sometimes stayed with their mother, who was houseless and also struggling with substance use. The father was reported to sleep most of the day, causing the sibling to be frequently unsupervised or cared for. The second reporter reiterated the conditions the home as being unsanitary, and the sibling frequently being soiled and unclean. The father told the reporter he was selling heroin from his home. The second reporter confirmed law enforcement had been called regarding the concerns in the home. The referral was assigned for a 24-hour response.

On November 12, 2014, the CPS caseworker attempted to make contact with the father and sibling in their home. The home appeared to be uninhabited. The father and sibling met with the CPS caseworker on November 18, 2014. The father acknowledged using heroin and came up with a safety plan for the sibling in which he would not use while the sibling was in his care. The father described recent relationship issues as a trigger for his use; he agreed to and engaged in services. He stated he was living with relatives who provided support and assistance to the sibling. The referral was coded as unfounded for neglect. Even though the father was struggling with substance use, his use was not found to be impacting his ability to provide for the sibling's safety or care. The father utilized community and family supports, and immediately engaged in and followed through with supportive services.

Date of report:	**Allegation(s):**	**Disposition(s):**
November 18, 2014 **Assignment decision:** Closed at Screening	Neglect by father	N/A

On November 18, 2014, ODHS received a report of neglect to the child's sibling, age 5, by their father. The report stated the sibling appeared malnourished and frequently left in the same clothing for several days. The sibling was noted to be unsupervised and not cared for while the father used and sold heroin in the home. The sibling had been observed wandering the neighborhood with a bag of food asking people to cook it for them because they were not eating at home. The mother was reported to be attempting to get the sibling into her care; she was reportedly houseless and her whereabouts were unknown. The reporter recommended the sibling be placed with a relative. The referral was screened out due to the allegations already being assessed under a previous report of concern and not being a new report of abuse.

Date of report:	**Allegation(s):**	**Disposition(s):**
August 20, 2015 **Assignment decision:** Closed at screening	Neglect by father	N/A

On August 20, 2015, ODHS received a report of neglect to the child's sibling, age 6, by their father. The mother was currently unhoused and using heroin daily. She did not have consistent contact with the sibling. The sibling lived with their father who was also using heroin, by self-report, and was recently arrested for heroin possession. The report indicated the father and sibling had been unhoused for several months and were frequently staying at the home of the father's girlfriend. The father's girlfriend was reported to be physically abusive to the sibling; no additional information was provided about the abuse. The sibling was reported to spend time with their relatives regularly, frequently being dirty during those visits. The referral was screened out as not being a report of abuse and lacking information as to direct impact on the sibling.

Date of report:	Allegation(s):	Disposition(s):
February 25, 2016 **Assignment decision:** Within 24 hours	Neglect by mother; Neglect by father	Founded

On February 25, 2016, ODHS received a report of neglect to the child's siblings, ages 6 and four months. The report alleged the siblings were not to be unsupervised in the care of their mother due to her untreated substance use but had been seen recently with her unsupervised. The report described that mother had multiple recent arrests for substance use and possession. The referral was assigned for a 24-hour response.

On February 26, 2016, the CPS caseworker met with the mother in her home. The younger sibling was reported to be at their father's relative's home and the older sibling was at school. Historical information provided outlined that the younger sibling had previously been placed into the care of their father shortly after their birth due to the mother being incarcerated. A requirement of that placement was the father not allow the mother unsupervised contact with the siblings due to concerns regarding their safety in her care. On an undocumented date, the father was arrested for substance possessions charges, and the siblings went with their mother at that time.

During the CPS assessment on February 26, 2016, the mother acknowledged the younger sibling was in her home. The siblings were subsequently placed into the care of a relative due to neither their mother or father being safe or available to parent. The referral was coded as founded for neglect by the father because he allowed the mother unsupervised contact with the siblings despite previously being advised against allowing unsupervised contact with mother. The referral was coded as founded for neglect by the mother because she was highly impaired by her substance use and unable to provide safe care for her children. No parent was available to care for the children.

Description of concerns regarding actions taken or not taken by the Department or law enforcement agencies in response to the critical incident or events that led to the critical incident:

The local office identified gaps in CPS assessment practice related to the COVID-19 pandemic restrictions, prohibiting face-to-face contact for an extended period of time. The CIRT recognizes the challenges in knowledge and information transfer occurring between Child Welfare professionals, particularly newly hired professionals, and their leadership during the COVID-19 pandemic restrictions on in-person contact between March 2020 and May 2022. The CIRT discussed the richness of information sharing and training that can occur in informal ways between professionals when in-person access is not restricted. While the loss of informal knowledge and information transfer that occurred in this case was not within the control of Department staff during the COVID-19 pandemic restrictions and is now being remedied by the return of face-to-face contact, the CIRT notes it is important to recognize the breadth of experiential knowledge that is passed down through face-to-face communications. The CIRT encourages the continued recognition and support of such informal information-sharing opportunities in addition to more formal training and onboarding processes for newly hired staff.

The CIRT acknowledges the screening report dated August 20, 2015, was incorrectly closed at screening and should have been assigned for CPS assessment based upon standards for assignment currently in place as a result of screening centralization. The CIRT acknowledges screening decisions in 2015 were localized and not yet under the current centralized screening decision standards.

The CIRT recognizes the new and increasing environmental risk posed by opiates in Oregon communities. While current child safety decisions evaluate the impact of substance use on parental functioning and environmental hazards that may be present in homes with significant parental substance use, the risk posed by opiates, especially illicit fentanyl, is more profound and requires additional assessment and child safety decision standard development. The CIRT recognizes the use of opiates may occur under many circumstances, including under medical supervision or as prescribed

as well as inadvertent exposure through the use of other substances. While there is not a specific action or inaction in this case related to the fentanyl in the home, the presence of fentanyl in this case and in increasing numbers of reports of concern received by ODHS indicate the need for system-wide screening for fentanyl/opiate use, and specific safety decision-making and case planning practice updates.

Recommendations for improvement in the administration and oversight of the child welfare system that are specific to the critical incident and any historical information reviewed by the team:

The CIRT recognizes the importance of joint response efforts when appropriate for families who may need additional supports in their home and within their communities. The CIRT recommends, when appropriate, Child Welfare professionals consider multi-program and/or multi-disciplinary joint response during Child Welfare interventions. These joint response considerations should include consideration of the involvement of community supports including but not limited to Addiction and Recovery Team staff, nurses and other community health professionals, parent or peer mentors, Self-Sufficiency Programs, or Developmental Disability services, etc.

The CIRT understands the Child Safety Program, in collaboration with community partners and Designated Medical Professionals, is currently engaged in intensive efforts to enhance current practice guidelines and tools related to safety planning for families in which opiate use is present. Given the rapid increase in fentanyl-related reports of concern, the significant risk posed by fentanyl and other opiates to the health and safety of children, and the intensity of the spread of fentanyl in Oregon communities, the CIRT recommends the Child Safety Program and its collaborative partners complete the development of the opiate-specific child safety decision tools, trainings, and strategies for introduction to and implementation by Child Welfare professionals no later than September 2022.