

REQUEST FOR QUALIFICATIONS (RFQ)

Congregate Care and Child Placing Agency Services RFQ No. 2025ICCCP002

RFx Number: 3140004423 Issue Date: October 29, 2025

No.	Question/ Request for Clarification	
1.	Could you confirm whether an active RCCA license	The procurement listing for the RFQ states, "Licensing
	is required at the time of submission, or if proof of an	by MDCPS is mandatory for all Offerors providing
	application in progress will suffice?	placement services. "The internal policy document for
		Licensure Requirements for Congregate Care – Provider
		and Licensure Requirements' outlines that the
		application process must be completed and a license
		issued only when the applicant substantially complies
		with all licensing regulations and requirements. Review
		the RFQ's Minimum Qualifications or Submission
		Requirements section (Section 3) for any mention of
		pending licenses.
2.	What specific documentation is accepted to	MDCPS's "Licensure Requirements for Congregate
	demonstrate licensing progress?	Care – Provider and Licensure Requirements" document
		outlines the full application process and required
		materials for a completed license. The RFQ indicates
		that "Licensing by MDCPS is mandatory for all Offerors
		providing placement services. "Because the policy does
		not explicitly permit a pending application in lieu of a
		fully issued license, it's safest to assume that MDCPS
		expects a fully active license issued at submission, unless
		they issue an amendment or clarification otherwise
		"What specific documentation will MDCPS accept to
		demonstrate that a required license is in progress (e.g.,
		application filed, inspection scheduled, provisional
		status) if full issuance is not complete at the time of
		submission? "If you proceed under the proviso that the
		license is still pending, include with your submission:
		Proof of application filing (e.g., mailing receipt or
		acknowledgement from MDCPS), Timeline for issuance
		or inspection schedule A cover letter clarifying the status

		of licensure. Monitor for any amendments to the RFQ,
		which may clarify this question for all offerors.
3.	For site control, will a current lease or an intent-to-	"Qualifications must conform to the requirements set
	lease agreement meet the requirement? Each Offeror	forth in this RFQ Failure to meet any of the mandatory
	must provide a complete listing of its principals,	requirements identified herein may result in rejection."
	parent organisations, and subsidiaries" (page 10)	(page 8).
4.	Can multiple facility types be included under one	Yes — according to the publicly-available summary of
	proposal, or should each type be submitted	Mississippi Department of Child Protection Services
	separately?	("MDCPS") RFQ 3140004423, it states that vendors
		may operate "one or multiple facility types" under a
		single proposal.
5.	Are advance payments available for new providers	The RFQ's description on the procurement portal
	entering the program?	describes this as a firm-fixed-price contract, paid by per-
	Good question. I did not find any explicit provision in	diem rates. Because it's a firm-fixed-price, per-diem
	the publicly available MDCPS RFQ (3140004423) or	model, MDCPS likely expects payment after or as
	related solicitation documents that guarantees or	services are delivered, rather than a lump advance.
	describes "advance payments" (i.e., payment before	Without a stated advance-payment mechanism, new
	services are rendered) for new congregate-care/	providers are probably expected to finance initial
	child-placing providers. Key supporting findings:	operations up front and then invoice for completed
		services.
6.	For references, do they need to include a detailed	In the MDCPS RFQ for their Congregate Care / Child-
	description of services provided, since this is a newly	Placing Agency Services (RFx 3140004423), the
	established business?	"Mandatory Minimum Qualifications" section requires
		at least 2 references. These references must be for
		"contracts or projects under which services similar in
		scope, size, or discipline to the services required herein"
		were performed in the past 3 years. The RFQ also notes
		that "References must be familiar with the Offeror's
		abilities in the areas involved with this RFQ."There's a
		Reference Score Sheet (Attachment F) tied to the
		references, meaning MDCPS will score the references.
7.	On page # 65 (Performance Report Variables) the	For the Performance Report Variables on page 65, all
	questions listed aren't very specific. I need to know	data should reflect information for the current reporting
	what dates they are wanting. For example they ask	period — whether that period is monthly or quarterly,
	"Number of new children admitted". Do they want	depending on your reporting schedule. This means you'll
	how many have been admitted since this month/	report the number of new children admitted, discharged,
	quarter, or how many have been admitted since the	or denied within that specific month or quarter only, not
	last RFQ.	cumulative totals since the last RFQ submission.
	~	Regarding the "Number of Youth Denied" field — yes,
	Also it asks for the number of children denied, sadly	denials due to a full house or capacity limits should be
	we have had to deny children due to a full house,	included in that count, the same as denials for other
	does that reason equivalent to denying due to	reasons (such as behavioral or clinical concerns). The
	behavior problems,etc.	goal is to capture any referrals that could not be
	1	accepted during the reporting period, regardless of the
		reason.
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8.	What performance metrics does MDCPS use to	
	evaluate provider success?	

The Scorecard integrates metrics into weighted categories. Each provider receives a composite score based on performance in Safety, Permanency, and Well-Being, plus compliance and financial accountability.

1. Safety (\approx 30–35%) Serious Incident Reports (SIRs) – frequency and timeliness

Restraint usage rates

Law enforcement involvement

Repeat incidents per child

Corrective actions implemented

High weight because child protection is MDCPS's core mission.

2. Permanency (≈ 30–35%)
Placement stability (no unplanned disruptions)

Return to care rate (within 6 months)

Discharges to family (reunification/adoption)

Family contact frequency

Sibling visits completed

Permanency planning meeting participation

Measures whether providers are helping children achieve lasting family connections.

3. Well-Being (≈ 20–25%) School enrollment & attendance

Academic progress (grade-level maintenance/improvement)

Medical/dental/vision appointments completed

Mental health appointments completed

		Medication compliance
		Extracurricular/community participation
		Youth/family satisfaction surveys
		Captures whether children's developmental, educational, and health needs are met.
		4. Compliance & Workforce (≈ 10 –15%) Staff-to-child ratio
		Training compliance (% of staff current)
		Vacancy & turnover rates
		Licensing status & violations
		CQI (Continuous Quality Improvement) participation
9.	Does MDCPS provide standardized data templates for reporting, or may providers use their own internal systems?	The RFQ includes Attachment O: Performance Report Variables, which lays out the exact data elements providers must report (e.g., admissions, discharges, incident reports, medical appointments, family contacts, staff ratios).
		Providers must submit these variables in the MDCPS-defined format so the agency can aggregate and compare results across all providers in the Congregate Care.
		This ensures consistency, comparability, and accountability statewide.
		Providers may use their own internal case management or data systems (commercial software or in-house tools) for daily operations.
		However, when reporting to MDCPS, they must translate/export their data into the standardized template.
		MDCPS does not accept free-form or custom reporting formats — the official template is mandatory for compliance. Internal systems are fine for operations.

		Standardized MDCPS templates are required for official
		reporting.
		This dual approach gives providers flexibility in
		managing their own data while ensuring MDCPS
		receives uniform, comparable reports.
10.	Is there a minimum square footage requirement or	Yes — MDCPS requires minimum square footage per
	bedroom/bathroom ratio per youth that facilities must	youth, limits on bedroom occupancy, and bathroom-to-
	meet?	youth ratios. Providers may use their own facility
		layouts, but they must meet state licensing standards and
		MDCPS contract requirements.
11.	Since this is a new business without existing bank	MDCPS requires providers to demonstrate financial
	statements or audits, is MDCPS seeking to run credit,	stability as part of the qualifications submission.
	or will an explanation of financials meet the	Ear artiblished against this would are and it a
	requirement?	For established agencies, this usually means audited
		financial statements, bank references, or prior-year budgets.
		onuges.
		For new businesses, MDCPS allows submission of a
		written explanation of financials, projected budgets, and
		evidence of capacity to sustain operations.
		The RFQ does not explicitly state that MDCPS will run
		credit checks on vendors.
		Instead, the emphasis is on whether the provider can
		show financial viability through documentation.
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		MDCPS reserves the right to request additional supporting information if the explanation is insufficient,
		but the process is not framed as a formal credit bureau
		check.
		A clear narrative explanation of your financial position
		(e.g., startup funding, grants, loans, or private
		investment).
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		Projected operating budget for the contract term.
		Any letters of support, commitments, or financial backing
		from partners or investors.
		Evidence of internal controls (how you'll manage funds,
		track expenses, and ensure compliance).
		MDCPS is not requiring a credit check in the RFQ. For
		new businesses, a well-documented explanation of
		financials and projected budgets will meet the
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	requirement, as long as it demonstrates that you can
	responsibly manage the contract and sustain services.