



Child Welfare

Request for Information For Human Trafficking Care Coordination

RFI Response due date & time: *Friday, October 9, 2026 at 8:00 a.m. CDT*

This Request for Information (RFI) is solely for information and planning purposes and does not constitute a solicitation. This information will be reviewed and discussed by the state agency and may result in the advertisement of a formal and competitive Request for Proposal for any or all of the services included in the RFI.

Only information which is in the nature of legitimate trade secrets or non-published financial data may be deemed proprietary or confidential. Any material within a response to this RFI identified as such must be clearly marked and will be handled in accordance with the Louisiana Public Records Act. R.S. 44:1-44 and applicable rules and regulations. Any response marked as confidential or proprietary in its entirety may be rejected without further consideration or recourse.

Date of Issuance: September 10, 2026

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1. GENERAL INFORMATION

1.1. Introduction and Purpose

The Louisiana Department of Children and Family Services (DCFS) is issuing this Request for Information (RFI) to obtain information from qualified organizations with experience and capacity regarding the delivery of a trauma-informed, multidisciplinary care coordination model for children and youth who are suspected or confirmed victims of human trafficking. The model includes case coordination and advisory council functions. The purpose of this RFI is to gather information on trauma-informed multidisciplinary service delivery approaches, staffing models, data collection practices, and potential contract structures to inform a future procurement process

1.2. Background

The Louisiana Department of Children and Family Services (DCFS) administers an established statewide Human Trafficking Care Coordination Model designed to ensure that children and youth who are suspected or confirmed victims of sex and labor trafficking receive timely, coordinated, and trauma-informed services. The model utilizes a survivor-centered multidisciplinary approach that brings together Child Advocacy Centers (CACs), law enforcement, child welfare, prosecutors, medical and behavioral health providers, victim service organizations, and other community partners to assess victim needs, coordinate services, and improve outcomes.

1.3. DCFS Regions

- 1.3.1. During the previous fiscal year, approximately 1,091 new children received human trafficking care coordination services. Referral volume varies by geographic region, with higher concentrations in urban areas and emerging needs in rural and underserved communities.

DCFS Region	Approximate Regional Human Trafficking Care Coordination Referrals in 2025 (not including previously served victims)
Alexandria	66
Baton Rouge	168
Covington	131
Lafayette	137
Lake Charles	83
Monroe	91
Orleans	244
Shreveport	108
Thibodaux	63

Historical referral data, regional distribution, and other program information are provided for planning purposes only and should not be interpreted as a guarantee of future workload or funding levels. Respondents are encouraged to use this information when developing recommendations regarding staffing, service delivery models, regional coverage, and program implementation

1.4. Goals and Objectives

- 1.4.1. Implement and administer an established trauma-informed human trafficking care coordination model to support the timely identification, assessment, referral, and coordination of services for children and youth that are victims of human trafficking.
- 1.4.2. Coordinate multidisciplinary teams (MDTs) that include child welfare, law enforcement, Child Advocacy Centers (CACs), medical and behavioral health providers, prosecutors, victim service providers, and other community partners to ensure a coordinated, victim centered response.
- 1.4.3. Facilitate investigative emergency response, ongoing case coordination and advisory council meetings that promote communication, collaboration, accountability and coordinated decision-making among multidisciplinary partner agencies.
- 1.4.4. Provide training, community engagement, performance measurement, data collection, reporting, and continuous quality improvement activities to support the implementation and ongoing administration of the Human Trafficking Care Coordination Model.

2. ADMINISTRATIVE INFORMATION

2.1. RFI Coordinator

Request for copies, questions, and submission responses to this RFI must be directed to the RFI coordinator listed below:

Lauren Brocksmith
Child Welfare Human Trafficking Services Manager
627 N. 4th Street, Baton Rouge, LA 70802
Lauren.Brocksmith.DCFS@la.gov (Contact via email only)

This RFI has been posted to Louisiana Procurement and Contract Network (LaPAC) and the DCFS Website, which can be found at the following links:

LaPAC: <https://wwwcfprd.doa.louisiana.gov/osp/lapac/pubMain.cfm>

DCFS Website: <https://www.dcms.louisiana.gov/page/requests-for-proposals>

2.2. Schedule of Events

DCFS reserves the right to deviate from this Schedule of Events at any time without notice.

Activity/Event	Date
Public notice of RFI	September 10, 2026
Deadline for receipt of written inquiries	September 18, 2026
Response to written inquiries	September 25, 2026
Deadline for receipt of RFI submissions	October 9, 2026

2.3. Response Content

2.3.1. Executive Summary

The executive summary should provide administrative information including, at a minimum, authorized representative contact name and phone number, email address, and any other pertinent contact information. This section should also include a summary of qualifications, ability, and willingness to comply with the State's requirements.

2.3.2. Corporate Background and Experience

The responder should provide a brief description of the organization, including its history, corporate structure, organizational details, and years in business. Responders should also describe their experience with projects of this type with other states or corporate/governmental entities of comparable size and diversity.

2.3.3. Approach and Methodology

Responders are encouraged to answer as many questions as applicable; however, complete responses to all questions are not required. The responder should provide:

- 2.3.3.1. The recommended approach and methodology to accomplish the Scope of Services;
- 2.3.3.2. Any known systems that support the functional areas outlined in the RFI, including a description of the systems and how they support the services;
- 2.3.3.3. Best practices garnered from previous experience with this scope of services;
- 2.3.3.4. A list of issues/concerns that were not taken into consideration in the scope of services that may be essential for the agency to consider; and

2.3.3.5. Alternative solutions for accomplishing the project objectives, if applicable, and any other additional pertinent information;

2.3.4. Cost Estimate

The responder should provide a general overview of its pricing model (e.g., subscription-based, per user, per transaction). While this is an RFI, a high-level understanding of potential costs is beneficial. The responder should include any information regarding typical implementation and operational costs, as well as factors influencing them, with a focus on the cost-effectiveness.

2.4. Response Instructions

2.4.1. Response Submittal

Responders interested in providing information for this RFI must submit responses containing the information specified no later than the deadline stated in the Schedule of Events. Responses must be submitted via email to the RFI Coordinator. Hand-delivered responses will not be accepted. Responses must be received by the RFI Coordinator on or before the time and date specified in the Schedule of Events.

It is solely the responsibility of the responder to ensure that their submission is delivered prior to the deadline. Responses misdirected or otherwise received late may not be considered.

2.5. Additional Instructions and Notifications to Responders

2.5.1. RFI Addenda/Cancellation

The State reserves the right to revise any part of the RFI by issuing an addendum to the RFI at any time. Issuance of this RFI, or subsequent addendum, (if any) does not constitute a commitment by the State to issue an RFP or any other process resulting in award of a contract of any type or form. In addition, the State may cancel this informal process at any time without penalty.

2.5.2. Ownership of Response

The materials submitted in response to this request shall become the property of the State.

2.5.3. Cost of Preparation

The State shall not be liable for any costs incurred by responders associated with developing the response, preparing for discussions (if any) or any other costs, incurred by the responder associated with this RFI.

3. Scope of Services

3.1. Care Coordination Services

- 3.1.1. The Contractor shall provide multidisciplinary care coordination services for suspected and confirmed child victims of sex and labor trafficking victims within the time frames established within the Investigative Response Protocols that include Investigative Emergency Response and Ongoing Case Coordination. Care coordination meetings shall support communication, shared decision-making, accountability, and continuity of care among partner agencies throughout the life of the case.
- 3.1.2. The Contractor shall develop, maintain, and update written protocols, standardized operating procedures, referral pathways, care coordination guidance, and communication processes that promote consistent service delivery and submit to DCFS for approval by the third month of the contract.
- 3.1.3. The Contractor shall facilitate at least one (1) ongoing case coordination meeting following the point of initial referral with parental consent if applicable. Additional follow-up case coordination shall be determined by the team if necessary.
- 3.1.4. The Contractor shall develop, implement, monitor, and update individualized care coordination plans that are trauma-informed, victim-centered, and responsive to the evolving needs, safety concerns, strengths, and circumstances of each child. Plans shall identify, as applicable, the child's needs and goals, recommended services and interventions, responsible agencies or partners, anticipated timelines, identified barriers, and progress toward established case objectives. The Contractor shall monitor implementation of the plan, document progress toward identified goals, coordinate services, and revise the plan as circumstances or service needs change until case closure.
- 3.1.5. The Contractor shall ensure care coordination recommendations are feasible and incorporate youth voice by discussing the plan with the child to make sure all needs are being met and is in the child's best interest.
- 3.1.6. The Contractor shall invite Advocacy Providers to all Care Coordination meetings to ensure advocacy services are made available to all cases receiving Care Coordination when determined eligible by the Advocacy Provider.
- 3.1.7. The Contractor shall coordinate services for victims of human trafficking across participating agencies.
- 3.1.8. The Contractor shall maintain documentation of all coordination activities, including dates, participating agencies or partners, key issues identified, and action items or recommendations in accordance with DCFS requirements.

3.2. Community Collaboration

- 3.2.1. The Contractor shall establish, maintain, and strengthen multidisciplinary partnerships that support a coordinated trafficking response.
 - 3.2.1.1. Develop regional multidisciplinary partnerships.
 - 3.2.1.2. Establish communication protocols among partner agencies.
 - 3.2.1.3. Coordinate participation in multidisciplinary meetings.
 - 3.2.1.4. Identify service gaps and recommend improvements.
 - 3.2.1.5. Develop strategies to increase stakeholder participation.
- 3.2.2. The Contractor shall have an Advisory Council and shall meet quarterly at a minimum or more often to address all aspects of the continuous improvement of care coordination, including protocol development, training/education, and improvement of the continuum of care for victims. The Contractor shall conduct a minimum of four (4) Advisory Team meetings within a 12-month period to increase engagement and improve relationships within the community.
- 3.2.3. The Contractor shall collaborate with, at a minimum: Child Advocacy Centers, Department of Children and Family Services, Law Enforcement, Courts, Medical Providers, Behavioral Health Providers, Juvenile Justice, Families in Need of Services (FINS), Tribal Agencies, Community Based Advocacy organizations.

3.3. Training and Outreach

- 3.3.1. The Contractor shall conduct DCFS approved training, community awareness, and outreach activities designed to increase awareness, improve victim identification, strengthen referral pathways, and promote collaboration among service providers and community partners. Each Care Coordinator shall conduct a minimum of twenty (20) training and outreach activities during each twelve (12) month period, with an emphasis on reaching rural and underserved populations. Documentation of each activity shall be submitted to DCFS in the required reporting format and shall include, at a minimum, the date, location, topic, intended audience, estimated number of participants, participant feedback, and results of any required knowledge assessments.
- 3.3.2. The contractor shall expand local partner engagement within the care coordination process to include service providers.

3.4. Screening, Referrals, and Victim Navigation

- 3.4.1. The contractor shall implement standardized screening, victim navigation, and service coordination for children who are suspected or confirmed victims of human trafficking. At a minimum, the Contractor shall:
 - 3.4.1.1. The Contractor shall conduct screenings for both sex and labor trafficking utilizing DCFS approved screening tools.
 - 3.4.1.2. The Contractor shall maintain a single point of entry referral process for care coordination referrals aligning with established response protocols.
 - 3.4.1.3. The Contractor shall obtain informed consent, when required, and explain available services in a manner that promotes autonomy, trust, confidentiality, and informed decision-making, while ensuring compliance with applicable federal and state laws, DCFS policies, and mandatory reporting requirements.
 - 3.4.1.4. Coordinate with victim service providers and other appropriate system partners to facilitate access to comprehensive, individualized services and address identified needs.
 - 3.4.1.5. The Contractor shall coordinate with victim service providers and other appropriate system partners to facilitate access to comprehensive, individualized services and address identified needs.
 - 3.4.1.6. Provide ongoing victim navigation and care coordination throughout the life of the case to reduce barriers to services, facilitate referrals and follow-up, support engagement, and promote continuity of care.
 - 3.4.1.7. Ensure all care coordination activities are trauma-informed and victim-centered and prioritize the safety, dignity, empowerment, strengths, and individualized needs of each child.

3.5. Data Collection and Reporting

- 3.5.1. The Contractor shall collect, maintain, analyze, and report program-level and case-level data necessary to support effective care coordination, contract monitoring, evaluation of program performance, and continuous quality improvement.
 - 3.5.1.1. The Contractor shall maintain accurate and complete case-level data, including, as applicable, demographic information, referrals, services provided, service utilization, case activities, identified needs and barriers, case status, and client outcomes.

- 3.5.1.2. The Contractor shall track DCFS established performance measures and key performance indicators (KPIs), including service utilization, timeliness, service delivery, client outcomes, and other measures required by DCFS to evaluate program effectiveness and contractor performance.
- 3.5.1.3. The Contractor shall submit accurate, complete, and timely programmatic and performance reports in the format and frequency established by DCFS. Reports shall include, as applicable, program activities, service utilization, performance measures, trends, outcomes, identified barriers or service gaps, and other information required by DCFS. The Contractor shall also provide ad hoc reports or data upon reasonable request by DCFS.
- 3.5.1.4. The Contractor shall routinely review and utilize program and performance data to identify trends, monitor outcomes, evaluate service effectiveness, identify areas requiring improvement, and support data-informed decision-making and continuous quality improvement activities.
- 3.5.1.5. The Contractor shall ensure that all collection, maintenance, reporting, sharing, storage, and transmission of program and case level data complies with applicable federal and state laws, DCFS policies and requirements, and applicable confidentiality, privacy, and information security standards.

3.6. Quality Assurance

- 3.6.1. The Contractor shall develop, implement, and maintain a quality assurance and continuous quality improvement process to monitor compliance with program requirements, evaluate the quality and effectiveness of services, identify areas for improvement, and promote consistent delivery of high-quality care coordination services.
- 3.6.2. The Contractor shall conduct routine case reviews to assess compliance with procedures, protocols, documentation standards, contractual requirements, and established care coordination practices. Case reviews shall evaluate, as applicable, timeliness of required activities, service coordination, case documentation, progress toward identified goals, and continuity of care.
- 3.6.3. The Contractor shall routinely monitor program performance and utilize performance data, outcome measures, case review findings, and stakeholder feedback to identify trends, service gaps, barriers, and opportunities for improvement. Identified deficiencies shall be addressed through corrective action, technical assistance, process improvement, or other appropriate interventions.

- 3.6.4. The Contractor shall provide ongoing technical assistance, coaching, case consultation, and supervisory support to personnel to address identified needs, strengthen staff competencies, promote consistent practice, and support compliance with program and contractual requirements.
- 3.6.5. The Contractor shall establish and maintain standards for professional conduct and ethical practice for all personnel assigned to the program. Standards shall address, at a minimum, confidentiality and privacy, professional boundaries, trauma-informed and victim-centered practices, cultural responsiveness, ethical decision-making, and professional accountability.
- 3.6.6. The Contractor shall maintain a process for evaluating staff performance and addressing identified performance concerns. Performance evaluation and accountability measures shall be used to promote compliance with program expectations, identify training or professional development needs, recognize exemplary performance, and support ongoing professional growth.

3.7. Contractor Requirements

3.7.1. Project Requirements

3.7.1.1. Project Organization and Management

- 3.7.1.1.1. The Contractor shall maintain staff who will facilitate care coordination within their contracted area and ensure timely and effective completion of all deliverables.
- 3.7.1.1.2. The Contractor shall provide DCFS a copy of the data submitted to the Louisiana's Governor's Office of Human Trafficking Prevention for the Louisiana Annual Human Trafficking Report Pursuant to ACT 352 of Louisiana 2021 Regular Session.
- 3.7.1.1.3. The Contractor shall work collaboratively with key stakeholders who include but are not limited to DCFS, Governor's Office, Louisiana State Police and Advocacy Agencies.

3.7.1.2. State-Furnished Resources

- 3.7.1.2.1. Access to designated DCFS staff for consultation and coordination.
- 3.7.1.2.2. Access to necessary project related documentation and information

The Contractor shall use these resources responsibly and only for purposes related to the contract.

3.7.1.3. Project Management

- 3.7.1.3.1. The Contractor shall immediately notify DCFS of any issues, delays, or changes that may impact the project scope, schedule, or budget and shall provide a proposed resolution plan.

3.8. Staffing Requirements

3.8.1. Key Personnel

- 3.8.1.1. The Contractor shall ensure that all personnel assigned to this contract possess the knowledge, skills, experience, and training necessary to provide high-quality, trauma-informed care coordination services for children that are confirmed or suspected victims of human trafficking. Personnel shall demonstrate competency in victim-centered service delivery, multidisciplinary case coordination, safety planning, crisis response, resource navigation, confidentiality, cultural responsiveness, and the identification of the complex needs of human trafficking victims. Personnel must demonstrate the ability to develop and sustain collaborative relationships. Staff shall maintain the qualifications and ongoing professional development necessary to effectively coordinate services and support positive outcomes.
- 3.8.1.2. For the duration of the contract, the Contractor shall include at a minimum the following qualified key personnel member, who must be present for onsite meetings at DCFS in Baton Rouge within twenty-four (24) hours' notice.
- 3.8.1.3. DCFS shall approve all key personnel before the key personnel member commences work under this contract.
- 3.8.1.4. Key personnel shall not be removed or reassigned without approval of DCFS, which approval will not be unreasonably withheld if a suitable candidate is proposed.
- 3.8.1.5. An individual may not occupy more than one (1) key personnel position, unless prior approval is obtained by DCFS.
- 3.8.1.6. The Contractor shall inform DCFS in writing within seven (7) calendar days of the resignation or termination of any of the key personnel positions. Staff assignments shall be fully covered at all times, and the name of the interim contact person must be included in the

notification. The vacancy shall be filled within thirty (30) calendar days. The name and resume of the replacement key personnel must be submitted to DCFS for approval. Upon approval, Contractor shall submit to DCFS a revised organization chart complete with key personnel time allocation.

- 3.8.1.7. The Contractor shall replace resigned or terminated key personnel with a person of equivalent experience, knowledge and talent, to be approved by DCFS
- 3.8.2. All employees, both paid and volunteer, must pass a background check compliant with state and federal law and receive clearance from the DCFS State Central Registry. The Contractor shall submit a comprehensive list of all current staff in an annual statement to DCFS, indicating if the staff have a background check and State Central Registry clearance.
- 3.8.3. The Contractor shall prohibit substance use for all employees, both paid and volunteer.
- 3.8.4. The Contractor shall have in place the organizational, operational, managerial and administrative capacity to fulfill all contract requirements outlined in this Contract. No later than the start date of the Contract, the Contractor shall submit an organizational chart including names and titles.
- 3.8.5. The Contractor must employ sufficient staffing and utilize appropriate resources to achieve contractual compliance. The Contractor's resource allocation must be adequate to achieve outcomes in all service delivery areas within the organization. Adequacy will be evaluated based on outcomes and compliance with contractual and DCFS policy requirements, including the requirement for providing culturally competent services to all clients, including those with limited English proficiency, diverse cultural and ethnic backgrounds, and disabilities. If the Contractor does not achieve the desired outcomes or maintain compliance with contractual obligations, additional monitoring and regulatory action may be employed by DCFS, including but not limited to requiring the Contractor to hire additional staff.
- 3.8.6. The Contractor shall remove or reassign, upon written request from DCFS, any employee or subcontractor employee that DCFS deems to be unacceptable.
- 3.8.7. The Contractor shall provide the appropriate staff representation for attendance and participation in meetings and/or events scheduled by DCFS. All meetings shall be considered mandatory unless otherwise indicated.

3.9. Technical Requirements

- 3.9.1. The Contractor will maintain secure systems for tracking services and electronically submitting required documentation to DCFS. Data must be securely stored and meet all applicable state and federal privacy compliance standards.
- 3.9.2. The Contractor shall adhere to all applicable published state security policies, which may be located at <https://www.doa.la.gov/doa/ots/policies-and-forms/>.
- 3.9.3. The Contractor will be required to transmit all non-proprietary data which is relevant for analytical purposes to DCFS on a regular schedule in XML format. Final determination of relevant data will be made by DCFS based on collaboration between both parties. The schedule for transmission of the data will be established by DCFS and dependent on the needs of DCFS related to the data being transmitted. XML files for this purpose will be transmitted via Secure File transfer Protocol (STFP) to DCFS. Any other data or method of transmission used for this purpose must be approved via written agreement by both parties.
- 3.9.4. The Contractor shall be responsible for procuring and maintaining hardware, software, license, and subscription resources that are sufficient to perform the services detailed in this Contract at the service level specified.
- 3.9.5. The Contractor shall adhere to applicable state and federal regulations and guidelines as well as industry standards and best practices for systems or functions required to support the requirements of this Contract.
- 3.9.6. Unless explicitly stated to the contrary, the Contractor is responsible for all expenses required to obtain access to DCFS systems or resources that are relevant to successful completion of the requirements of this Contract. The Contractor is also responsible for expenses required for DCFS to obtain access to the Contractor's systems or resources that are relevant to the successful completion of the requirements of this Contract. Such expenses are inclusive of hardware, software, network infrastructure, and any licensing costs.
- 3.9.7. Any confidential information must be encrypted to Federal Information Processing Standards (FIPS) 140-2 standards when at rest or in transit.
- 3.9.8. Contractor-owned resources must be compliant with industry standard physical and procedural safeguards (NIST SP 800-114, NIST SP 800-66, NIST 800-53A, ISO 17788, etc.) for confidential information (HITECH, HIPAA part 164).
- 3.9.9. Any Contractor use of flash drives or external hard drives for storage of DCFS data must first receive written approval from DCFS and upon such approval shall adhere to FIPS 140-2 hardware-level encryption standards.

3.9.10. All Contractor utilized computers and devices must:

3.9.10.1. Be protected by industry standard virus protection software that is automatically updated on a regular schedule;

3.9.10.2. Have installed all security patches that are relevant to the applicable operating system and any other system software; and

3.9.10.3. Have encryption protection enabled at the operating system level.

3.9.11. DCFS reserves the right to require secure API access to case-level data of state monitoring and recordation in the State's system of record.

3.10. Communication

3.10.1. The Contractor shall participate in monthly meetings with DCFS to review project progress, address issues, and ensure alignment with contract requirements.

3.10.2. Meeting agendas shall be distributed at least 1 days prior to each scheduled meeting.

3.10.3. Minutes will be recorded and shared within 7 business days following each meeting.

3.11. Reporting Requirements

3.11.1. Contractor shall develop real-time dashboards to monitor deliverables and service level requirements, and Contractor shall provide DCFS with access to the dashboards.

3.11.2. Contractor shall develop a monthly report, to be approved by DCFS, that shall be submitted within fifteen (15) calendar days of the end of the month in which services were rendered. The report shall contain information for the month, and in aggregate for the contract period, that details quantity of each deliverable provided and adherence rate to service level requirement.

3.11.3. Contractor shall maintain supporting documentation for every deliverable provided.

3.12. Location/Hours of Operation

3.12.1. The Contractor shall provide services within the regions or regions identified in the resulting contract. The geographic service area may include one (1) region, multiple regions based on the Contractor's proposed service area and the needs of the Department.

- 3.12.2. The Contractor must maintain an office or established physical presence within the State of Louisiana and must demonstrate the ability to provide consistent, accessible services within the region(s), included in the Contractor's designated service area. Staff assigned to the designated service area must be able to routinely provide in-person services, participate in multidisciplinary team meetings, conduct outreach, and establish and maintain partnerships within the communities served.
- 3.12.3. The Contractor shall maintain, at a minimum, eight (8) hours of regular business operations each day, Monday through Friday, excluding State-designated holidays. The Contractor may establish its regular business hours based on the needs of the population and geographic area served, provided that sufficient availability is maintained during customary business hours.
- 3.12.4. If applicable, the Contractor shall also accommodate any after-hours or weekend work as required and agreed upon in advance.

3.13. Performance Standards

- 3.13.1. The Contractor shall provide an annual report to DCFS regarding Performance Measure Outcomes.
- 3.13.2. The Contractor shall submit to DCFS a bi-annual report detailing outreach activities, trainings provided to stakeholders and community partners to better serve communities across the state, and the number of quarterly Advisory Council meetings held by the teams, including the disciplines of partners attending Advisory Council Meetings.
- 3.13.3. The Contractor shall submit to DCFS the following monthly data by service region:
 - 3.13.4. Total number of referrals received during the month and to date;
 - 3.13.5. Total number of victims served through Care Coordination during the month and to date;
 - 3.13.6. Number of new victims served broken out by response times (i.e. Investigative Emergency Response and Case Coordination);
 - 3.13.7. Number of sex and labor trafficking screenings completed during the month and to date; and
 - 3.13.8. Number of Care Coordination Meetings held by the team.
- 3.13.9. The Contractor's performance will be assessed against Key Performance Indicators (KPIs). DCFS will set baselines annually and may adjust targets based on benchmarks for the service region.

3.13.10. KPIs will include but are not limited to service delivery timeliness, data accuracy, and reporting compliance.

3.13.11. The Contractor shall submit monthly reporting on all KPIs. DCFS will publicly post aggregated results on a quarterly basis.

3.13.12. Performance outcomes will directly affect withholds and penalties as described in this Contract.

Key Performance Indicator	Target
Referral and Response: Initial response to referrals acknowledged within 1 business day . Investigative Emergency Response meetings are held within 1- 7 business days consistent with the timelines established in the Tiered Response Protocol.	≥ 95%
Service Linkage: Victims are connected to recommended services, including medical, behavioral health, forensic interviews, advocacy, placement, and legal services, within established case planning time frames.	≥ 90%
Multi-Disciplinary Team Participation & Partner Engagement: Maintain a minimum 90% participation rate among required partner agencies, including DCFS, law enforcement, victim advocacy, and other designated stakeholders, during MDT meetings. Increase multi-disciplinary partner participation annually.	≥ 90%
Training: Contractor shall collect feedback from participants after each training session to gauge the effectiveness of the program. Feedback will be used to identify areas of improvement and make necessary adjustments to training curriculum.) A satisfaction rate of 75% or higher; An increased knowledge of familial, labor trafficking and sexual exploitation.	≥ 75% ≥ 80%

3.14. Contract Monitor

3.14.1. All work performed by the Contractor will be monitored by the Contract Monitor or their designee. The contract Monitor or their designee, shall serve as the

Contract Monitor. DCFS will notify the Contractor of the initial Contract Monitor and their successor, if applicable. The Contract Monitor is responsible for administering and enforcing the terms and conditions of this Contract and is the primary point of contact through which all information and/or communication pertaining to Contract compliance shall flow between DCFS and the Contractor.

3.14.2. DCFS will monitor Contractor performance through a combination of data reviews, site visits, case record audits, and stakeholder feedback. The Contractor will participate in quarterly review meetings with DCFS staff to discuss performance outcomes, challenges, and corrective actions.

3.14.3. Monitoring will include both announced and unannounced visits to service delivery sites, during which DCFS may observe programming, review documentation, and interview staff or clients. Corrective Action Plans (CAPs) will be issued when Contractor fails to meet required thresholds, and persistent noncompliance may result in contract suspension or termination.

3.15. Contract Term

3.15.1. The term of this Contract shall be for three (3) years.

3.16. Terms of Payment

3.16.1. In consideration of the services required by this Contract, DCFS hereby agrees to pay the Contractor a maximum amount to be determined at a later date.

3.16.2. The Contractor must comply with the Division of Administration State General Travel Regulations, as set forth in Division of Administration Policy and Procedure Memorandum No. 49.

3.16.3. Contractor is responsible for all costs incurred which are not agreed upon for providing services through this contract.

3.16.4. Contractor shall submit correct invoices by the fifteenth (15th) day of the month following the month in which services were rendered using the standard format provided by DCFS in the DCFS Vendor Invoice Portal for all charges as outlined in this Contract. Invoices should be dated, uniquely numbered, and reference the Contract number, associated Deliverables, and be signed by the Contractor's authorized representative. All invoices submitted must meet with the approval of DCFS prior to payment. Incorrect or incomplete invoices will be returned by DCFS to the Contractor for correction and reissue. The purchase order number must appear on all invoices and correspondence relating to this Contract. Invoices must reference this Contract and provide detailed information in a format as reasonably requested by DCFS, including without limitation:

- 3.16.4.1. Contractor name, address, telephone number and federal tax identification number.
 - 3.16.4.2. Invoice date, number and issued Contract number.
 - 3.16.4.3. An itemization of each Deliverable, if applicable.
 - 3.16.4.4. Applicable cost of Deliverables, Charges, and Retainages, if applicable.
 - 3.16.4.5. Signature of authorized representative.
 - 3.16.5. DCFS shall pay properly submitted and approved invoices. DCFS shall make every reasonable effort to make payments within thirty (30) days of receipt of corrected invoices and under a valid contract. After sixty (60) days after receipt of invoices by DCFS, the Contractor shall notify DCFS in writing of payment delinquency.
 - 3.16.6. Any material change in this Contract obligation which may change the maximum value of this Contract shall require an amendment documenting the change.
 - 3.16.7. In such event, either party, as appropriate, may be entitled to receive an equitable adjustment in the compensation otherwise payable to the Contractor under this Contract as a result thereof. Also, in such event, the parties will mutually agree upon an amendment documenting such adjustments.
- 3.17. Administrative Actions and Damages
- 3.17.1. The Contractor acknowledges that failure to meet contractual requirements may result in harm to children, families, and DCFS. Because actual damages are difficult to measure, the parties agree that the liquidated damages described herein represent a fair and reasonable estimate of the damages likely to be incurred. DCFS reserves the right to assess liquidated damages, impose corrective action plans, withhold payments, or pursue other remedies provided under state law and this agreement.
- 3.18. Administrative Actions
- 3.18.1. DCFS shall notify the Contractor through a written Notice of Action when it is determined the Contractor is deficient or non-compliant with requirements of the contract. Administrative actions exclude liquidated damages and termination and include, but are not limited to:
 - 3.18.1.1. A warning through written notice or consultation;
 - 3.18.1.2. Education requirement regarding program policies and procedures;
 - 3.18.1.3. Referral to the appropriate authority for fraud investigation; and/or

- 3.18.1.4. Submission of a corrective action plan within a timeframe directed by DCFS, and to be approved by DCFS. Continued noncompliance with an approved corrective action plan may result in suspension of payments, contract termination, or debarment from future procurements.

3.19. Damages

- 3.19.1. In the event the Contractor fails to achieve the performance standards and/or other deliverables specified in the terms and conditions of the Contract, the liquidated damages defined below may be assessed. DCFS will issue a Notice of Action to the Contractor, along with a cure period of not less than ten (10) business days as an opportunity to cure without the assessment of liquidated damages for the first instance of a deficiency. For all following deficiencies of the same type, DCFS will assess liquidated damages immediately. If assessed, the liquidated damages will be used to reduce DCFS's payments to the Contractor. If the liquidated damages exceed amounts due from DCFS, the Contractor will be required to make cash payments for the amount in excess. DCFS may also delay the assessment of liquidated damages if it is in the best interest of DCFS to do so. DCFS may give notice to the Contractor of a failure to meet performance standards but delay the assessment of liquidated damages in order to give the Contractor the opportunity to remedy the deficiency; if the Contractor subsequently fails to remedy the deficiency to the satisfaction of DCFS, DCFS may reassert the assessment of liquidated damages, even following contract termination.
- 3.19.2. The decision to impose liquidated damages may include consideration of some or all of the following factors:
 - 3.19.2.1. The duration of the violation;
 - 3.19.2.2. Whether the violation (or one that is substantially similar) has previously occurred;
 - 3.19.2.3. The Contractor's history of compliance;
 - 3.19.2.4. Whether there is a force majeure event;
 - 3.19.2.5. The severity of the violation and/or whether it imposes an immediate threat to the health or safety of the children and family served; and
 - 3.19.2.6. The "good faith" exercised by the Contractor in attempting to stay in compliance.
- 3.19.3. In the event the Contractor fails to perform as required, the Contractor shall pay DCFS the specified amounts listed below as agreed upon liquidated damages.

Requirement	Damage Amount
Contractor must submit report by the 15 th calendar day of each month	\$500 per late report
At least 95% of referred children must have a first care coordination meeting scheduled within seven (7) days of referral.	\$150 per missed referral not served within timeframe
One (1) Advisory Team meeting will be held quarterly in each service area.	\$300 per missed monthly session
Hold a minimum of five (5) trainings or outreach events per quarter.	\$500 per missed quarterly event

3.20. Late Invoices

The Contractor shall submit invoices no later than fifteen (15) calendar days following the end of the month in which services were rendered. Failure to comply will result in the imposition of the following penalties:

- 3.20.1. 1 - 30 calendar days late - 5% penalty
- 3.20.2. 31 - 60 calendar days late - 10% penalty
- 3.20.3. 61 or more calendar days late - 15% penalty

4. Outcomes

- 4.1. Timely, coordinated responses to children who are suspected and confirmed trafficking victims.
- 4.2. Improved collaboration and communication among partner agencies.
- 4.3. Reduced service gaps and duplication.
- 4.4. Increased access to timely, trauma-informed, victim-centered services that address the individualized needs of the victims.
- 4.5. Consistent implementation of case coordination practices.
- 4.6. Improved victim safety, stabilization, engagement in services, and long-term recovery.
- 4.7. Improved program accountability through data informed decision making, performance measurements, and continuous quality improvement.

5. Questions

- 5.1. Describe your organization's experience providing human trafficking services, care coordination, case management, victim services, or other comparable multidisciplinary services to children and families.
- 5.2. Describe how your organization would provide care coordination from initial referral through case closure, including screening, multidisciplinary meetings, individualized care coordination planning, referrals, service coordination, follow-up, addressing barriers, and ongoing victim navigation.
- 5.3. Describe the staffing and supervision model your organization would use to provide these services, including proposed positions, qualifications, caseload expectations, supervisory structure, and plans for maintaining service continuity during vacancies or staff absences.
- 5.4. Identify the geographic area(s) your organization could serve and describe your current capacity, infrastructure, community presence, and any additional resources that would be necessary to implement the proposed services.
- 5.5. Describe the organizational structure your organization would recommend to provide statewide care coordination services. Include any recommendations regarding regional staffing, management, supervision, and administrative oversight.
- 5.6. Describe how your organization would establish and maintain multidisciplinary partnerships, engage community and system partners, identify service gaps, and strengthen participation in the care coordination process, particularly in rural or underserved areas.
- 5.7. Describe your organization's approach to providing human trafficking training, community awareness, and outreach, including strategies for reaching rural and underserved populations and evaluating the effectiveness of these activities.
- 5.8. Describe your organization's capacity to collect and report program and case level data, monitor service quality, conduct case reviews, and implement continuous quality improvement. Identify the performance measures or outcomes you believe would best demonstrate the effectiveness of care coordination services.
- 5.9. Describe the anticipated timeframe and activities necessary to begin providing services following contract execution, including staffing, training, infrastructure, and, if applicable, transition of existing cases to ensure continuity of care.
- 5.10. Describe the funding methodology your organization believes would best support these services (e.g., fixed funding, fee-for-service, cost reimbursement, hybrid, or another approach) and provide an estimated annual cost, including the primary assumptions and major cost categories used to develop the estimate.

- 5.11. If services are delivered by multiple organizations, describe the governance, supervision, communication, and quality assurance structure you believe would be most effective to ensure consistent statewide service delivery while maintaining regional flexibility?
- 5.12. What challenges do you anticipate with implementation and how would they be addressed?
- 5.13. What recommendations do you have to improve Louisiana's statewide human trafficking care coordination model?

6. Desired Capabilities

- 6.1. Demonstrated experience providing services within child welfare, victim services, juvenile justice, behavioral health, or human trafficking response systems, with an understanding of the unique and complex needs of children impacted by exploitation.
- 6.2. Experience facilitating multidisciplinary collaboration, including coordinating communication and case planning among child welfare agencies, Child Advocacy Centers, law enforcement, prosecutors, medical providers, behavioral health professionals, schools, and community-based organizations.
- 6.3. Knowledge and implementation of trauma-informed, survivor-informed, culturally responsive, and victim-centered practices that promote safety, trust, empowerment, and equitable access to services.
- 6.4. Established case management and documentation systems capable of supporting comprehensive care coordination, tracking service referrals and outcomes, maintaining accurate records, and ensuring compliance with confidentiality and applicable state and federal requirements.
- 6.5. Demonstrated capacity to collect, analyze, monitor, and report program and performance data, including the ability to utilize data for quality assurance, continuous quality improvement, and program evaluation.
- 6.6. Experience developing, maintaining, and strengthening community partnerships that enhance service coordination, improve multidisciplinary engagement, identify service gaps, and increase access to resources for victims and their families.
- 6.7. Organizational capacity to recruit, train, supervise, and retain qualified staff, while providing ongoing professional development, programmatic oversight, and quality assurance to ensure consistent, high-quality service delivery.
- 6.8. Experience providing services across diverse geographic regions, including rural and underserved communities, and implementing strategies to reduce barriers to accessing services.

7. Appendix A.

Tiered Response Description

Tier	Required Response Time	Description
Tier 1 (Rapid/ Emergency Response)	0-48 hours	An emergency response of 0-48 hours is required for cases involving confirmed victims of human trafficking where there is an open law enforcement or DCFS investigation or where the child or youth has an immediate safety concern and requires a crisis response. The minor may be in crisis, in immediate danger, and/or living in unsafe/unstable housing; safety concerns warranting a rapid response include but are not limited to: • Child does not have a safe place to stay or is staying with an in-home perpetrator • Child is actively being abused or trafficked • Child is missing or on runaway status and/or was recently recovered from being missing or on runaway status • Child was recovered by law enforcement • Child is being treated or assessed for substance abuse, suicidality, or other concerns • Child is at an emergency department for injuries related to abuse
Tier 2	0 - 72 hours	Where a child or youth, who is confirmed for human trafficking, is referred to care coordination and is presumed to be in a safe and stable environment, an initial investigative case coordination response meeting should be scheduled within 72 hours of the case referral. A safe and stable environment includes an environment with supervision and support, where a perpetrator is not accessible to the child in the home, and where the child is not at-risk of being exploited or harmed.
Tier 3	72 hours - 7 days	Cases involving a suspected victim of human trafficking may be scheduled for an initial investigative case coordination response staffing within 7 days of the case referrals. It is recommended that the response time for suspected cases is prioritized by the apparent safety needs of the child or youth; therefore, a Coordinator may determine that a crisis response is needed and schedule an emergency case staffing