

## State of Maine Procurement Justification Form

This form must accompany ALL contract requests and sole source requisitions submitted to the Division of Procurement Services.

INSTRUCTIONS: Please provide the requested information in the white spaces below.

PART I: OVERVIEW			
Department Office/Division/Program:	Department of Labor, Bureau of Rehabilitation Services		
Department Contract Administrator or Grant Coordinator:	Libby Stone-Sterling		
(If applicable) Department Reference #:			
Estimated Contract or Grant Amount:	\$ 6,000	Advantage CT / RQS #:	20191223*1927
AMENDMENT	Original Start Date:		New Start Date:
	Original End Date:		New End Date:
GRANT	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
ALL OTHER	Proposed Start Date:	1/15/2020	Proposed End Date: 9/30/2020
Vendor/Provider/Grantee Name, City, State:	Work Opportunities Unlimited, dba Contracts Inc. Dover, NH		
Brief Description of Goods/Services/Grant:	<b>The purpose of this Contract is to encourage Community Rehabilitation Providers to promote and provide employment services to referred clients and develop new businesses in their areas. This contract also provides training for Employment Specialists to enable them to provide these services</b>		

PART II: JUSTIFICATION FOR VENDOR SELECTION			
Mark an "X" before the justification(s) that applies to this request.			
A. Competitive Process		G. Grant	
B. Amendment		H. State Statute/Agency Directed	
C. Single Source/Unique Vendor		I. Federal Agency Directed	
D. Proprietary/Copyright/Patents	X	J. Willing and Qualified	
E. Emergency		K. Client Choice	
F. University Cooperative Project		L. Other Authorization	

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### PART III: SUPPLEMENTAL QUESTIONS

Please respond to ALL of the following questions.

**1. Provide a more detailed description of the goods, services or grant to supplement the response in Part I.**

The Provider Shall: dedicate one or more certified Employment Specialist (ES) to provide employment services to referred clients; attend (including via distance technology) and participate in regularly scheduled planning and coordination meetings, entitled, "Jobsville", in the Lewiston/Auburn and the Portland/York DVR offices; develop new business and collect and report client data during the duration of the Progressive Employment (PE) Phase V pilot project. Services stipulated in this contract do not supersede the standard CRP contract which the Contractor has with the Bureau of Rehabilitation Services

**2. Provide a brief justification for the selected vendor to supplement the response in Part II.**

Four CRP agencies applied to provide the services as outlined above. The applications were reviewed and each of the four agencies that had applied was accepted to participate. **WOU** is one of the four agencies that has agreed to provide employment services to clients of DVR and has agreed to fully participate throughout the duration of the 9-month project.

**3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.**

The Director of DVR considers the hourly commitment and the commitment for staffing, sufficient to justify the cost of the contracted amount.

Minimum participation for completing the requirements total approximately 100 hours over the course of the project. We expect WOU will dedicate over 200 hours, which includes, at least one or more dedicated Employment Specialists, administrative time and agency resources. Travel time and mileage will also be covered by the CRP agency.

**4. Describe the plan for future competition for the goods or services.**

Potentially, this pilot project will provide positive results, increasing the number of employment outcomes and ultimately, provide opportunities for further testing and rollout into other areas, throughout the state.

### PART IV: APPROVALS

**Signature of requesting  
Department's Commissioner  
(or designee):**

By signing below, I signify that I approve of this procurement request.

*Laura A. Fortman*

**Printed Name:**

Laura A. Fortman, Commissioner

**Date:**

1/23/2020

**Signature of DAFS  
Procurement Official:**

DocuSigned by:  
*Kathy Paquette*

**Printed Name:**

41C2BA36FAF44CD...  
Kathy Paquette

**Date:**

1/23/2020