



DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES
OFFICE OF STATE PROCUREMENT SERVICES
 STATE OF MAINE

PROCUREMENT JUSTIFICATION FORM (PJF)

This form must accompany all contract requests and sole source requisitions (RQS) over \$10,000 submitted to the Office of State Procurement Services.

INSTRUCTIONS: Please provide the requested information in the white spaces below. All responses (except signatures) must be typed; no hand-written forms will be accepted. See the guidance document posted with this form on the Procurement Services intranet site (Forms page) for additional instructions.

PART I: OVERVIEW			
Department Office/Division/Program:		Department of Corrections, Division of Juvenile Services	
Department Contract Administrator or Grant Coordinator:		Sonja Charest	
(If applicable) Department Reference #:			
Agency Department Code:	03A	Advantage CT / RQS #:	2026020200000001625
Amount: (Contract/Amendment/Grant)	\$65,000.00		
CONTRACT	Proposed/Original Start Date:	3/1/2026	Proposed/Most Recent End Date: 6/30/2027
AMENDMENT	New Effective Date:		New End Date (if Applicable):
GRANT	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
Vendor/Provider/Grantee Name, City, State:		Justice System Partners, South Easton, MA	
Brief Description of Goods/Services/Grant:		Coach Referee Model for Change Training for Juvenile Community Corrections	

PART II: JUSTIFICATION FOR VENDOR SELECTION			
Check the box below for the justification(s) that applies to this request. (Check all that apply.)			
<input type="checkbox"/>	A. Competitive Process	<input type="checkbox"/>	G. Grant
<input type="checkbox"/>	B. Amendment	<input type="checkbox"/>	H. State Statute/Agency Directed
<input checked="" type="checkbox"/>	C. Single Source/Unique Vendor	<input type="checkbox"/>	I. Federal Agency Directed
<input type="checkbox"/>	D. Proprietary/Copyright/Patents	<input type="checkbox"/>	J. Willing and Qualified
<input type="checkbox"/>	E. Emergency	<input type="checkbox"/>	K. Client Choice
<input type="checkbox"/>	F. Higher Education Cooperative Project	<input type="checkbox"/>	L. Other Authorization

Please respond to ALL of the questions in the following sections.

PART III: SUPPLEMENTAL INFORMATION	
1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.	<p>The Department needs a training provider that is an expert in Probation Transformation and is certified to train on the <i>Coach Referee Model for Change</i>, which is a transformative approach to community supervision.</p>
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the solicitation (RFP/RFA/RFQ) number if applicable.	<p>Justice System Partners created the <i>Coach Referee Model for Change</i> curriculum and is currently the only provider able to administer the training/model.</p> <p>The identified provider, Justice System Partners (JSP), a non-profit organization that has been operating since 2014 has over a decade of experience working directly with probation and pre-trial services in 18 of the 50 states, with 43 different counties/districts across those 18 states engaging in this model. They employ 22 highly experienced staff that bring in an unprecedented amount of experience, expertise, education, and background to JSP.</p> <p>The identified trainer for this is Dr. Brian Lovins, who is the President of Justice System Partners. Dr. Lovins has a PhD in Criminology and has held roles in Assistant and Associate Director of youth systems and developed the Ohio Youth Assessment Systems and the Adult Ohio Risk Assessment System. Dr. Lovins served as the President of the American Probation and Parole Association from 2021 to 2023. Dr. Lovins has received the Dr. Simon Dinitz Award for his work and dedication in helping correctional agencies adopt evidence-based programs and the David Dillingham Award, as well as a being recognized as a Distinguished Alumnus from the University of Cincinnati. His publications include articles on risk assessment, sexual offenders, effective interventions, and cognitive-behavioral interventions.</p> <p>This model is recognized by Annie E. Casey Foundation, Justice Clearing House, U.S. Courts, Minnesota Association of Probation, National Treatment Court Resource Center, Confederation of European Probation, and the American Probation and Parole Association.</p> <p>Justice System Partners is uniquely positioned to train our staff and supervisors through unparalleled agency experience and recognition from renowned agencies. Currently, no other agency or individual has this level of experience to meet the Department's needs.</p>
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.	<p>The cost was negotiated by the Department and Provider and is aligned with other states' charges for the same services. The Department deems the cost of this contract to be fair and reasonable.</p>
4. Describe the plan for future competition for the goods or services.	<p>Justice System Partners created the <i>Coach Referee Model for Change</i> curriculum and is currently the only provider able to administer the training/model. This is a one-time contract and does not require a future competitive bid.</p>

PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)

Does this request utilize ARPA/MJRP funds?

Yes, MJRP funds (023) – If Yes, please attach the approved Business Case(s).

Yes, ARPA funds (025) or (026) – If Yes, please be aware of the requirements from awarding federal agencies.

No – If No, proceed to Part V.

PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE

Maine law contains Conflict of Interest statutes directed to State Departments, State Officers, and Employees Generally under MRS [Title 5, §18](#) and [§18-A](#), in harmony with MRS [Title 17, §3104](#).

The requesting department’s signatory affirms, understands, and acknowledges Maine’s Conflict of Interest statutes and, in accordance with those statutes and to the best of their knowledge, has determined that no conflict of interest exists at the time of this contract, renewal, or amendment.

PART VI: APPROVALS

Governor/Department Commissioner or Designee

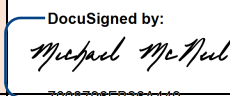
1. The signature below indicates approval of this procurement request.

Signature of requesting Department’s Commissioner (or designee):			
Typed Name:	Christine Thibeault, Assoc. Commissioner	Date:	3/2/2026

2. Additional signature required **ONLY if box E (Emergency) is selected in PART II**. The signature below indicates approval by the Department’s Commissioner, or the designee specifically authorized to approve emergency procurement requests.

Signature of requesting Department’s Commissioner (or designee):			
Typed Name:		Date:	

****OSPS Section Only****

Signature of DAFS Procurement Official:			
Typed Name:	Michael McNeil	Date:	3/4/2026