



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: | | Maine Department of Corrections | |
| Department Contract Administrator or Grant Coordinator: | | Sonja Charest | |
| (If applicable) Department Reference #: | | N/A | |
| Agency Department Code: | 03A | Advantage CT / RQS #: | 2025031700000002120 |
| Amount: (Contract/Amendment/Grant) | | \$12,500.00 | |
| CONTRACT | Proposed/Original Start Date: | 7/1/2025 | Proposed/Most Recent End Date: 6/30/2026 |
| AMENDMENT | New Effective Date: | 7/1/2026 | New End Date (if Applicable): 12/31/2026 |
| GRANT | Project Start Date: | | Grant Start Date: |
| | Project End Date: | | Grant End Date: |
| Vendor/Provider/Grantee Name, City, State: | | Community Care, 40 Summer Street, Bangor, ME, 04401 | |
| Brief Description of Goods/Services/Grant: | | Emergency Shelter & Support Services | |

| 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 checked="" type="checkbox"/> | B. Amendment | <input type="checkbox"/> | H. State Statute/Agency Directed |
| <input 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.

The Department is required by Statute – Maine Juvenile Code to review detention requests made by law enforcement to determine whether a youth needs to be detained in a secure setting pending an initial Court appearance and the Department whenever possible utilizes least restrictive and community-based services closest to the youth’s home as an alternative to secure detention. In addition, youth under the jurisdiction of the Department need to have access to provide short term placement options when experiencing family conflict, other crisis or who have parents unwilling to have them remain in the home. To meet the mandates of the juvenile code and ensure access to less restrictive placement options for all youth, the Department contracts with licensed emergency shelters.

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.

This contractor is currently the only licensed emergency shelter program located in N. Maine that provides short term crisis stabilization and support services to homeless youth and that is willing to take DOC referrals. It provides an array of less restrictive detention alternative services directed towards those youth under the jurisdiction of the Division of Juvenile services, including those who are one step away from being detained or committed, who are homeless, and those who are run-a-ways or on the verge of being homeless or a run-a-way due to the current domestic issues they are faced with. It is the distinctness in these services that makes this contract so vital to the youth DJS serves and to ensure the mission and goals of the Department of Corrections are being addressed. This Amendment is needed to ensure there is no delay in services for youth while the RFP is delayed. The additional six-month contract will maintain continuity of care and an appropriate discharge timeframe.

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

The funds added will continue services as written for FY2027, for the identified 6-months. The Department deems this decrease to be fair and reasonable. A full budget will be included with the contract submission

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

An RFP is currently in process for this service, but additional time is needed to complete all required documentation and to ensure compliance with the State of Maine Office of Information Technology policies and procedures. The RFP anticipated contract start date is 01/01/2027.

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): | DocuSigned by: <i>Christine Thibeault</i> <small>1EE8D7298D7F406...</small> | | |
| Typed Name: | Christine Thibeault, Assoc. Commissioner | Date: | 3/27/2026 |

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: | DocuSigned by: <i>Michael McNeil</i> <small>7008796FB38A449...</small> | | |
| Typed Name: | Michael McNeil | Date: | 3/30/2026 |

NOI 0320260200 3/30-4/5