

**PROCUREMENT JUSTIFICATION FORM (PJF)**

This form must accompany all contract requests and sole source requisitions (RQS) over \$5,000 submitted to the Division of 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 Division of Procurement Services intranet site (Forms page) for additional instructions.

PART I: OVERVIEW				
Department Office/Division/Program:		OADS/Aging Services/CNCS Volunteer Programs		
Department Contract Administrator or Grant Coordinator:		Jennifer Levesque / Melanie Boucher		
(If applicable) Department Reference #:		ADS-24-2629		
Amount: (Contract/Amendment/Grant)	\$ 57,360.00	Advantage CT / RQS #:	CT 10A 20230329000000002496	
CONTRACT	Proposed Start Date:	7/1/2023	Proposed End Date:	6/30/2025
AMENDMENT	Original Start Date:		Effective Date:	
	Previous End Date:		New End Date:	
GRANT	Project Start Date:		Grant Start Date:	
	Project End Date:		Grant End Date:	
Vendor/Provider/Grantee Name, City, State:		The Opportunity Alliance Portland, Maine		
Brief Description of Goods/Services/Grant:		Volunteer Program (FGP & SCP)		

PART II: JUSTIFICATION FOR VENDOR SELECTION			
Mark an "X" before 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 type="checkbox"/>	C. Single Source/Unique Vendor	<input type="checkbox"/>	I. Federal Agency Directed
<input type="checkbox"/>	D. Proprietary/Copyright/Patents	<input checked="" type="checkbox"/>	J. Willing and Qualified
<input type="checkbox"/>	E. Emergency	<input type="checkbox"/>	K. Client Choice
<input type="checkbox"/>	F. University 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.

AmeriCorps is a voluntary civil society program supported by the U.S. federal government, foundations, corporations, and other donors that engages adults in public service work with a goal of "helping others and meeting critical needs in the community." AmeriCorps Seniors helps meet the needs and challenges of America's communities by connecting persons fifty-five (55) and older to service opportunities through the following programs: Foster Grandparents, RSVP, and Senior Companions. AmeriCorps Seniors programs include RSVP, Foster Grandparents and Senior Companions. See: <https://americorps.gov/serve/american-corps-seniors>.

Through a legislatively authorized annual State General Fund allocation, OADS contracts funds to CNCS program providers in Maine to support AmeriCorps Seniors program administration and to expand volunteer opportunities for adults aged 55 and older in Maine. These funds help meet program administration and volunteer activities expansion costs not allowed or covered by federal CNCS grant funds received directly by the provider agencies.

2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.

The Office of Aging and Disability Services has determined that those providing AmeriCorps Seniors funded programs, noted above, in Maine are eligible to receive this funding. This provider provides a federally funded Corporation for National and Community Service Senior Corps volunteer program, Senior Companion Program (SCP) and Foster Grandparent Program (FGP).

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

The establishment of General Funds for the Senior Volunteer Program occurred with the 1999-2001 General Fund appropriation and has been a part of the baseline budget going forward. It stipulates that the money is to be awarded in equal share by program to agencies in Maine who administer federally funded Corporation for National and Community Service Senior Corps (now known as AmeriCorps Seniors) volunteer programs, specifically, Foster Grandparents, Senior Companion, and RSVP.

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

The department does not intend to issue an RFP for these services.

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

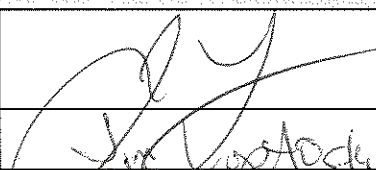

Does this request utilize ARPA/MJRP funds?

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

No – If No, proceed to Part V

PART V: APPROVALS

The signatures below indicate approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):		
Typed Name:	Jim Lagacy	Date: 22-May-23
Signature of DAFS Procurement Official:		
Typed Name:	Kathy Paquette	Date: 6/21/2023