



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

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:		Corrections	
Department Contract Administrator or Grant Coordinator:		Conner McFarland	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 9,693.75	Advantage CT / RQS #:	03A 2023051*03138
CONTRACT	Proposed Start Date:	7/14/2023	Proposed End Date: 10/31/2023
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 Gerlicher Group, LLC Minnetonka, MN	
Brief Description of Goods/Services/Grant:		PREA Investigator Training	

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 checked="" 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. 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.

The training will equip the Department, along with its affiliated correctional agencies within the state, with comprehensive, specialized training focused on conducting both criminal and administrative investigations into cases of sexual abuse occurring within correctional facilities.

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

Cari Gerlicher is a Department of Justice certified PREA Auditor and has conducted investigations of sexual abuse within jails and prisons for over twenty years. Cari Gerlicher has provided training and technical assistance to the Department through previous grants and is therefore very familiar with Department policies and operations. The Prison Rape Elimination Act requires that correctional investigators receive this training in order to be qualified to conduct these types of investigations.

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

The costs of this training are in line with the market rate for similar types of correctional consultant training. The Gerlicher Group was specifically recommended by the Moss Group, the Department of Justice's primary Training and Technical Assistance agency for the 2022 PREA Implementation Grant, which is funding this training.

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

There are very few other vendors currently which are DOJ-certified PREA Auditors and have extensive supervisory experience as a correctional investigator. These are requirements set by the PREA standards for our correctional investigator training needs. If the DOJ or Moss Group identify other subject matter experts the Department can use, competitive bids will be sought.

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.

Procurement Justification Form (PJF)

Signature of requesting Department's Commissioner (or designee):	DocuSigned by: <i>Conner McFarland</i> FD522942914A4F8...		
Typed Name:	Conner McFarland	Date:	6/29/2023
Signature of DAFS Procurement Official:	DocuSigned by: <i>William J.E. Allen</i> 1208B6E39F57E44A...		
Typed Name:	William J.E. Allen	Date:	7/11/2023