

State of Maine Procurement Justification Form

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 website (Forms page) for additional instructions.

PART I: OVERVIEW

Department Office/Division/Program:		DOE-Educ In The Unorg Territories	
Department Contract Administrator or Grant Coordinator:		Cathy Severance	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$50,000.00	Advantage CT / RQS #:	05C20190719*208
CONTRACT	Proposed Start Date:		Proposed End Date:
AMENDMENT	Original Start Date:	08/15/19	Effective Date:
	Previous End Date:	08/14/21	New End Date:
GRANT	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
Vendor/Provider/Grantee Name, City, State:		Stacey White PO Box 23, Passadumkeag, ME 04475 VC#0000148702	
Brief Description of Goods/Services/Grant:		AY21-22 Speech Therapy Services for UT students	

PART II: JUSTIFICATION FOR VENDOR SELECTION

Mark an "X" before the justification(s) that applies to this request. (Check all that apply.)

	A. Competitive Process		G. Grant
X	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

PART III: SUPPLEMENTAL INFORMATION

Please respond to ALL of the following:

- 1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.**

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PART III: SUPPLEMENTAL INFORMATION

Student's residing in the unorganized territories will be provided special education services as identified in each student's Individual Education Plan (IEP). Students are identified using mandated criteria set forth per Federal IDEA & Maine State Regulations. Every school is required by federal statute to provide a Free Appropriate Public Education (FAPE) for all students regardless of disability. The EUT does not have certified licensed speech therapist professionals on staff to provide the required services. The EUT reaches out to and is **willing to contract with any willing and qualified, certified licensed provider to perform the necessary services.**

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

The EUT does not have certified licensed speech therapist professionals on staff to provide the required services. The EUT reaches out to and is **willing to contract with any willing and qualified, certified licensed provider to perform the necessary services.**

***NOTE** – For AY20-21 Cary Medical Center announced that they would no longer be able to provide the needed services for UT Connor CS students due to staff shortages of therapists. Stacey White has agreed to, in addition, serve the Connor CS students requiring Speech Therapy services via in-person and remote teletherapy services.

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


Stacey White is fully licensed and able to provide the necessary services as needed and upon request. In addition, the fees charged by Stacey White are consistent with other service providers who were willing in the past to provide these services. The cost of travel for Stacey White is less costly because of the location of the office in Passadumkeag and the distance to the school that is being served.

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

The EUT began the State of Maine process of submitting an RFP in order to advertise/request services from providers. During the RFP review process, it was determined that due of the nature of the rural areas requiring services, limited responses to past competitive bids for these services in these areas and the fact that the UT was willing to accept any willing, certified licensed provider, a competitive process was not required at this time.

The UT continually inquires, coordinates and collaborates with local area school districts and professionals in order to gain information in order to acquire willing providers who are qualified and/or already providing services in other nearby local districts.

PART IV: APPROVALS

Signature of requesting Department's Commissioner (or designee):	<i>By signing below, I signify that I approve of this procurement request.</i>		
			
Printed Name:	Daniel A. Chuhta	Date:	8/23/2021
Signature of DAFS Procurement Official:	DocuSigned by: <i>Michelle Fournier</i>		
Printed Name:	Michelle Fournier	Date:	8/26/2021


Certificate Of Completion

Envelope Id: B66740254A9046E596614D58654B9038	Status: Completed
Subject: Please DocuSign This Document	
Source Envelope:	
Document Pages: 2	Signatures: 1
Certificate Pages: 1	Initials: 0
AutoNav: Enabled	Envelope Originator: Daniel A. Chuhta Daniel.Chuhta@maine.gov
Envelope Stamping: Disabled	IP Address: 64.207.219.7
Time Zone: (UTC-05:00) Eastern Time (US & Canada)	

Record Tracking

Status: Original 8/23/2021 10:37:19 AM	Holder: Daniel A. Chuhta Daniel.Chuhta@maine.gov	Location: DocuSign
Security Appliance Status: Connected	Pool: StateLocal	
Storage Appliance Status: Connected	Pool: Maine Department of Education	Location: DocuSign

Signer Events

Signer Events	Signature	Timestamp
Daniel A. Chuhta Daniel.Chuhta@maine.gov Deputy Commissioner Maine Department of Education Security Level: Email, Account Authentication (None)	 Signature Adoption: Uploaded Signature Image Using IP Address: 72.231.250.95	Sent: 8/23/2021 10:37:20 AM Viewed: 8/23/2021 10:37:54 AM Signed: 8/23/2021 10:38:24 AM Freeform Signing

Electronic Record and Signature Disclosure:
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In Person Signer Events**Signature****Timestamp****Editor Delivery Events****Status****Timestamp****Agent Delivery Events****Status****Timestamp****Intermediary Delivery Events****Status****Timestamp****Certified Delivery Events****Status****Timestamp****Carbon Copy Events****Status****Timestamp****Witness Events****Signature****Timestamp****Notary Events****Signature****Timestamp****Envelope Summary Events****Status****Timestamps**

Envelope Sent	Hashed/Encrypted	8/23/2021 10:37:20 AM
Certified Delivered	Security Checked	8/23/2021 10:37:54 AM
Signing Complete	Security Checked	8/23/2021 10:38:24 AM
Completed	Security Checked	8/23/2021 10:38:24 AM

Payment Events**Status****Timestamps**