



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:		Corrections/ Juvenile Justice Advisory Group		
Department Contract Administrator or Grant Coordinator:		Linda Barry Potter		
(If applicable) Department Reference #:		NA		
Agency Department Code:	03A	Advantage CT / RQS # :	CT 013 03A 20250717*0081	
Amount: (Contract/Amendment/Grant		\$37,000.00		
CONTRACT	Proposed/Original Start Date:	8/1/2025	Proposed/Most Recent End Date:	12/31/2025
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:		Strategies For Youth Cambridge MA		
Brief Description of Goods/Services/Grant:		Evidenced Based Training for local PD's, Sheriff's offices, JCCO's and others.		

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.

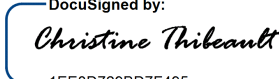
PART III: SUPPLEMENTAL INFORMATION	
1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.	
This contract will help purchase training in Washington and Aroostook Counties from a proven evidenced based program provided by Strategies for Youth, "Policing the Teen Brain". This will provide 2 days of in-depth training for these officers to equip them to successfully understand and de-escalate situations with youth. This training focuses on the developing brain and how to talk with young people to achieve the outcomes that benefit both the officers and the youths as well as de-escalation techniques.	
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the solicitation (RFP/RFA/RFQ) number and the date of award notification, if applicable.	
Strategies for Youth is the only vendor who provides this evidence-based program, as they hold the trademarks on these courses. Maine has used SFY consistently over the last few years to provide training to Officers around the state. Maine has seen a decrease in situations where youth are combative with officers and youth report feeling treated better by these trained officers.	
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.	
The costs are fair and reasonable given that they teach with a trainer, psychologist and others during this training and the costs for travel, hotel, per diem are all part of the costs for presenting this program over 2 days for both counties.	
4. Describe the plan for future competition for the goods or services.	
As Strategies for Youth is the only licensed provider of this training with is proven to work and is registered as an EVP and a police officer certified training.	

PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)	
Does this request utilize ARPA/MJRP funds?	
<input type="checkbox"/> Yes, MJRP funds (023) – If Yes, please attach the approved Business Case(s).	
<input type="checkbox"/> Yes, ARPA funds (025) – If Yes, please be aware of the requirements from awarding federal agencies.	
<input checked="" type="checkbox"/> No – If No, proceed to Part V.	

PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE	
<i>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.</i>	
<input checked="" type="checkbox"/> The requesting department signatory understands and acknowledges Maine’s Conflict of Interest statutes.	

PART VI: APPROVALS

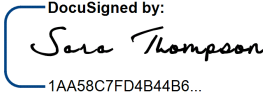
The signature below indicates approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):			
Typed Name:	Christine Thibeault, Associate Commissioner	Date:	7/29/2025

PART VII: EMERGENCY – Required only if selecting E. Emergency Justification

The signature below indicates approval by the Commissioner or designee of this procurement request.

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

Signature of DAFS Procurement Official:			
Typed Name:	Sara Thompson	Date:	01 August 2025