



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:	DHHS/OCFS		
Department Contract Administrator or Grant Coordinator:	Jennifer Levesque / Melinda Farrell		
(If applicable) Department Reference #:	CFS-26-7011		
Agency Department Code:	10A	Advantage CT / RQS # :	20250716000CFS267011
Amount: (Contract/Amendment/Grant)	\$200,000.00		
CONTRACT	Proposed/Original Start Date:	10/1/2025	Proposed/Most Recent End Date: 9/30/2026
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:	Maine Community Action Association (MCAA) DBA: Maine Community Action Partnership (MECAP) Bangor, ME		
Brief Description of Goods/Services/Grant:	Community Action Agency Training and Technical Assistance		

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.

The Department of Health and Human Services' Office of Child and Family Services (OCFS) has a legal requirement under the Federal Community Services Block Grant (CSBG) Act, the Maine Community Services Act, and Community Services Block Grant (CSBG) Program Rules to provide Training and Technical Assistance (T/TA) to the ten (10) Community Action Agencies (CAAs) in the State. This required T/TA initiative will support the efficient and effective administration of the program, as well as support timely and accurate outcome data required under the same legal requirements to be reported annually to the Federal Government.

Training must be provided by the end of FFY 2026, on the topics of OMB/Uniform Guidance, Board Governance, Results Oriented Management and Accountability (ROMA) a/o ROMA Next Gen, the Organizational Standards, National Performance Indicators (NPI) and targets, and performance measures. Increased T/TA in each CAA will also improve the State's current federally recorded American Consumer Satisfaction Index (ACSI) survey from the Agencies and proactively prevent non-compliance issues with the CAA's core funding source, the CSBG. T/TA funds will also support the implementation of a single statewide reporting system to be used by all CSBG providers to capture service data and provide outcome measure reporting as mandated by the United States Health and Human Services' (HHS) Office of Community Services (OCS).

To be successful in these T/TA initiatives, the Department requires an entity to oversee and coordinate the activities of the ten (10) CAA providers. This contract supports that need and will allow for increased consistency among the CAA providers and ease of management of all aspects of the contract.

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.

MECAP is recognized as the only entity of its kind and is the only identified Maine Association responsible for participating in the Administration for Children and Families (ACF)'s T/TA Program: Regional Performance and Innovation Consortium (RPIC). This cooperative agreement supports an ongoing State and regional strategy for collaboration, capacity-building, and exemplary practice in the CSBG program and among State CAA Associations, which include the MECAP. The OCS funds eleven (11) RPICs to serve as geographic focal points, lead in implementing organizational standards, and develop a comprehensive system of T/TA activities among State Associations, including the MECAP. The central mission of the RPIC strategy is to ensure that all CSBG-eligible entities are able to meet organizational standards and performance management efforts and utilize evidence-informed approaches to address the identified needs of low-income people in communities.

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

As the only centralized organizational association for Maine's ten (10) CAAs and through its relationship and ongoing T/TA work with the CAAs, MECAP is the only provider that has access to proprietary data from the agencies, allowing MECAP to provide specific T/TA as needed, as well as to provide the ongoing T/TA support as required by the OCS. The ten (10) CAA providers have been consulted about this and are in agreement.

PART III: SUPPLEMENTAL INFORMATION

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

The Department does not plan to RFP this service in the future.

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) – If Yes, please be aware of the requirements from awarding federal agencies.

No – If No, proceed to Part V.

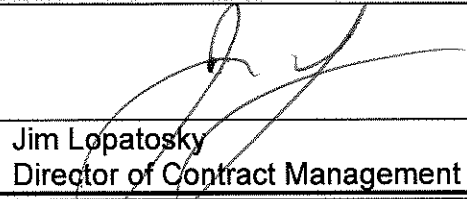
PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE

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 signatory understands and acknowledges Maine’s Conflict of Interest statutes.

PART VI: APPROVALS

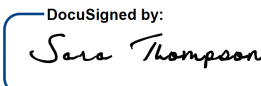
The signature below indicates approval of this procurement request.

Signature of requesting Department’s Commissioner (or designee):			
Typed Name:	Jim Lopatosky Director of Contract Management	Date:	6 - Aug 25

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:	DocuSigned by:  1AA58C7FD4B44B6...		
Typed Name:	Sara Thompson	Date:	21 August 2025