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:	DHHS / OCFS / Child Welfare Services			
Department Contract Administrator or Grant Coordinator:	Jennifer Levesque / Nicole Mitchell			
(If applicable) Department Reference #:	CFS-27-2301			
Agency Department Code:	10A	Advantage CT / RQS #:	CT-20260724000CFS272301	
Amount: (Contract/Amendment/Grant)	$856,268.00			
CONTRACT	Proposed/Original Start Date:	**8/1/2026**	Proposed/Most Recent End Date:	7/31/2027
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:	The Northern Lighthouse Presque Isle, ME			
Brief Description of Goods/Services/Grant:	The Structured Supervision Pilot is designed to provide short-term support and supervision services for Youth awaiting appropriate placement.			

PART II: JUSTIFICATION FOR VENDOR SELECTION

Check the box below for the justification(s) that applies to this request. (Check all that apply.)

☐	A. Competitive Process	☐	G. Grant
☐	B. Amendment	☐	H. State Statute/Agency Directed
☒	C. Single Source/Unique Vendor	☐	I. Federal Agency Directed
☐	D. Proprietary/Copyright/Patents	☐	J. Willing and Qualified
☒	E. Emergency	☐	K. Client Choice
☐	F. Higher Education Cooperative Project	☐	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.
Currently, Youth in State custody awaiting placement may experience prolonged stays in temporary hotel settings that can limit consistency, reduce access to therapeutic supports, and create increased strain on child welfare staffing resources. The proposed pilot project seeks to provide a more stable and supportive environment focused on safety, supervision, and transition planning. The proposed pilot project is intended to address a growing system need by creating an environment staffed by experienced behavioral health professionals capable of supporting Youth with emotional, behavioral, developmental, and mental health needs. The Provider will deliver a short-term Structured Supervision setting designed to provide a safe, structured, home-like alternative for Youth who would otherwise remain in temporary hotel settings while awaiting appropriate placement.
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the solicitation (RFP/RFA/RFQ) number if applicable.
Child Welfare averages two-point eight (2.8) Youth per week in hotel settings. The pilot provider has a three (3)-bed Youth facility in Caribou capable of diverting Youth who would otherwise need hotel supervision. Child Welfare was approached by multiple providers, but excessive capacity drove up costs. The proposed pilot facility satisfies all the needs of Youth diverted from hotel settings.
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.
OCFS spends approximately $430,000 on hotel and community sitter support costs. Additionally, caseworker and case aide overtime costs are annualized at $832,000. The pilot costs are net savings to the State.
4. Describe the plan for future competition for the goods or services.
OCFS will evaluate the quality of service, costs, and impact on OCFS staff before offering a competitive procurement.

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) or (026) – 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's signatory affirms, understands, and acknowledges Maine's Conflict of Interest statutes and, in accordance with those statutes and to the best of their knowledge, has determined that no conflict of interest exists at the time of this contract, renewal, or amendment.

PART VI: APPROVALS

Governor/Department Commissioner or Designee

1. 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:	26-Aug-26

2. Additional signature required **ONLY if box E (Emergency) is selected in PART II**. The signature below indicates approval by the Department's Commissioner, or the designee specifically authorized to approve emergency procurement requests.

Signature of requesting Department's Commissioner (or designee):			
Typed Name:	R Todd Haber	Date:	8/26/2026

****OSPS Section Only****

Signature of DAFS Procurement Official:			
Typed Name:		Date:	