

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:		Corrections/Mt. View	
Department Contract Administrator or Grant Coordinator:		Gerry Merrill, Deputy Warden	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 18,000	Advantage CT / RQS #:	03E 20210910*0639
CONTRACT	Proposed Start Date:	09/20/2021	Proposed End Date: 10/31/2021
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:		American Correctional Association, Alexandria, VA	
Brief Description of Goods/Services/Grant:		Accreditation Services – Mt. View	

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
	B. Amendment		H. State Statute/Agency Directed
X	C. Single Source/Unique Vendor		I. Federal Agency Directed
	D. Proprietary/Copyright/Patents		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.

In order to maintain our ACA certification for Mt. View Correctional Facility, we must go through an audit process by the American Correctional Association. This process audits our process and procedures throughout the facility to ensure that the residents who reside in our facility are given appropriate housing, programming, education, appropriate food and are treated fairly and that established policies and procedures are followed.

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PART III: SUPPLEMENTAL INFORMATION

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

The American Correctional Association certifies correctional facilities utilizing multiple standards that facilities must meet to ensure that juveniles under their care are treated fairly and these facilities adhere to the policies and standards. This is the only organization that certifies juvenile facilities for these standards.

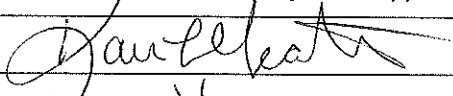
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.

The fee is a standard fee charged by the American Correctional Association.

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

There are currently no other vendors who perform this specific service. If/when additional providers become available who can perform this work, the Department will seek competitive bids at that time.

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:	KAREN YEATON	Date:	9/22/21
Signature of DAFS Procurement Official:	<small>DocuSigned by:</small> <i>William J.E. Allen</i>		
Printed Name:	<small>2D5B6E39F57E44A...</small> William J.E. Allen	Date:	9/27/2021

NOI 0920210768 09/27/2021 - 10/03/2021