

**PROCUREMENT JUSTIFICATION FORM (PJF)**

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 intranet site (Forms page) for additional instructions.*

**PART I: OVERVIEW**

Department Office/Division/Program:		DHHS Riverview and Dorothea Dix Psychiatric Centers	
Department Contract Administrator or Grant Coordinator:		Althea Harris / Matt Galletta	
(If applicable) Department Reference #:		RPC-23-021	
Amount: (Contract/Amendment/Grant)	Amend: \$32,347.00 Revised: \$124,661.00	Advantage CT / RQS #:	CT 10A 20220621000000003461
<b>CONTRACT</b>	Proposed Start Date:	Proposed End Date:	
<b>AMENDMENT</b>	Original Start Date:	Effective Date:	07/01/2022 07/1/2023
	Previous End Date:	New End Date:	06/30/2023 09/30/2023
<b>GRANT</b>	Project Start Date:	Grant Start Date:	
	Project End Date:	Grant End Date:	
Vendor/Provider/Grantee Name, City, State:		Unifirst Corp. Bangor, ME	
Brief Description of Goods/Services/Grant:		Laundry and Linen Services	

**PART II: JUSTIFICATION FOR VENDOR SELECTION**

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

<input type="checkbox"/>	A. Competitive Process	<input type="checkbox"/>	G. Grant
<input checked="" 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. University 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 purpose of this amendment is to extend the agreement end date to ensure time to process the renewal and prevent a lapse in services.**

Riverview Psychiatric Center (RPC) is a residential facility for acute mentally ill patients. The 24/7 facility require linen services to provide clean linen such as sheets, blankets, towels and other such housekeeping items. RPC require such linens to be delivered and, when soiled, to be picked up, laundered, and returned to RPC on a regular basis.

2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.

No proposals were received for RFP 202305103. The vendor has provided these services since July 1, 2013. Services during that time period have been acceptable and have successfully met the hospital's needs. The State does not have the necessary staffing, equipment or facilities to provide laundry services.

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

Rates are based on the SFY 2022 contract budget with a price adjustment for FY23. This cost is fair and reasonable.

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

The Department does not intend to competitively procure these services.

### PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)

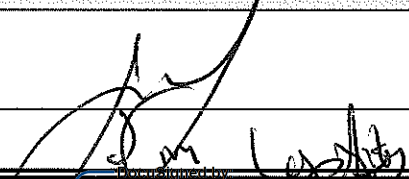
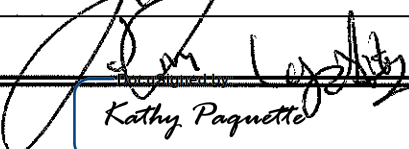
Does this request utilize ARPA/MJRP funds?

Yes – If Yes, please attach the approved Business Case(s).

No – If No, proceed to Part V

### PART V: APPROVALS

The signatures below indicate approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):			
Typed Name:		Date:	28 - Aug - 23
Signature of DAFS Procurement Official:			
Typed Name:	Kathy Paquette	Date:	9/21/2023