



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/OCFS		
Department Contract Administrator or Grant Coordinator:		Jennifer Levesque/Cathy DeRocher		
(If applicable) Department Reference #:		CBH-23-3015		
Amount: (Contract/Amendment/Grant)	\$ 49,510.00	Advantage CT / RQS #:	CT 10A 20220808000000000435	
CONTRACT	Proposed Start Date:	7/1/2022	Proposed End Date:	6/30/2023
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:		National Early Childhood Systems, LLC Terryville CT		
Brief Description of Goods/Services/Grant:		Consultation/Support Services for Early Childhood Consultation Program		

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 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.

This Agreement is a result of State of Maine LD 997: An Act To Promote Social and Emotional Learning and Development for Young Children and LD 533: An Act to Expand the Statewide Voluntary Early Childhood Consultation Program. These pieces of legislation state that the Department shall develop, establish, and implement a statewide program for infant and early childhood mental health consultation (IECMHC) available to children ages 0-8 in Early Care and Education Settings, including child care facilities, family child care providers, public schools, children involved in the State Child Welfare system, and afterschool programs. To meet the requirements of the legislation, the Department has chosen to implement the Early Childhood Consultation Partnership® (ECCP®) model. The ECCP® model is currently the only evidence-based model of IECMHC in the nation and is listed on the California Evidence-Based Clearinghouse for Child Welfare. The ECCP® model provides mental health consultation, support, and training to improve the abilities and skills of teachers and providers in Early Care and Education Settings to meet the social-emotional and behavioral needs of young children. The goal of ECCP® is to reduce the risk of children under the age of eight (8) developing learning difficulties and prevent children being suspended or expelled from Early Care and Education Settings due to behavioral and social-emotional needs. ECCP® began offering services in five (5) pilot sites in Maine in 2021 and expanded to eight (8) sites later in 2021. Per LD 533, the Department will further expand ECCP® to provide services statewide beginning in January 2023.

The Provider shall provide Consultation and Support Services to the State's IECMHC program team and the Office of Child and Family Services. This support shall include technical assistance regarding implementation of the ECCP® and integration of the model into the statewide Early Care and Education and mental health systems of care, identification and connections to national resources related to IECMHC as a field, consultation regarding workforce development for the State's IECMHC professionals, and consultation regarding high-quality provision of IECMHC services within a State system.

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

Elizabeth Bicio was the founder and developer of the Early Childhood Consultation Partnership (ECCP®) model as well as the ECCP® Information System (EIS), an integrated data system. She is a nationally-recognized expert in IECMHC and was past director of the Center of Excellence for Infant and Early Childhood Mental Health Consultation. Ms. Bicio is the only expert in the field who can provide Maine with guidance and support to ensure that the ECCP® model is successfully integrated and brought to scale in a state system. Ms. Bicio oversaw the original statewide implementation of ECCP® in Connecticut as well as a subsequent replication in Nassau County, New York. Her expertise in ECCP®, implementation science, and IECMHC policy is necessary to ensure successful and sustainable implementation of ECCP® in Maine.

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

The rate of \$215.00/hour was negotiated by the Department and the Provider. This rate is considered fair and reasonable based on other contracts providing similar services such as CFS-19-903 (Trisha Mosher charges \$260.00/hour) and OVP-20-1504 (Carole Martin charges \$150.00/hour).

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

The Department anticipates that this service will be renewed annually as needed to implement the requirements of LD 997 and LD 533. The Department does not plan to competitively procure this service.

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

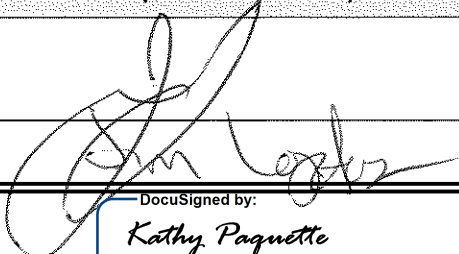

Does this request utilize ARP/MJRP funds?

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:	29-Aug-22
Signature of DAFS Procurement Official:	DocuSigned by:  Kathy Paquette		
Typed Name:	41C2BA36FAF44CD... Kathy Paquette	Date:	10/20/2022