



DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES  
**OFFICE OF STATE PROCUREMENT SERVICES**  
 STATE OF MAINE

**PROCUREMENT JUSTIFICATION FORM (PJF)**

<b>PART I: OVERVIEW</b>			
Department Office/Division/Program:		Office of Special Services and Inclusive Education	
Department Contract Administrator or Grant Coordinator:		Stacey Bean	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 19,811.40	Advantage CT / RQS #:	RQS 20240913*0415
<b>CONTRACT</b>	Proposed Start Date:	<b>8/19/2024</b>	Proposed End Date: 8/19/2024
<b>AMENDMENT</b>	Original Start Date:		Effective Date:
	Previous End Date:		New End Date:
<b>GRANT</b>	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
Vendor/Provider/Grantee Name, City, State:		Vitalsmarts, LC DBA Crucial Learning Provo, UT 84604-6065	
Brief Description of Goods/Services/Grant:		To provide training for CDS staff to strengthen their skills in preparation for transition of 3- and 4-year-old students to public preschool.	

<b>PART II: JUSTIFICATION FOR VENDOR SELECTION</b>			
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. University Cooperative Project	<input type="checkbox"/>	L. Other Authorization

Please respond to ALL of the questions in the following sections.

<b>PART III: SUPPLEMENTAL INFORMATION</b>	
1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.	
The contract is to provide training for CDS staff to strengthen their skills in preparation for transition of 3- and 4-year-old students to public preschool. Skills taught via the curriculum will directly relate to managing communication during a shift of the CDS Site from a early childhood special education hub to a support and service hub	
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.	
<p>Backed by over 30 years and 10,000 hours of social science and research, the skills taught in Crucial Conversations for Mastering Dialogue represent the standard in effective communication and the marker of high-performance individuals and organizations. The nine discrete behavioral skills taught in this course focus on a specific kind of interaction: those when stakes are high, opinions vary, and emotions run strong. The course focuses on strengthening relationships and securing results in the moments that matter most. Knowing how to navigate crucial conversations is a universal skill that all employees need to learn. This course is intentionally designed based on the learning experience model and plays an important role on how our courses impact an organization. The instructional design model focuses on insight, practice, and application to create meaningful behavior change in the organization. Crucial Learning is the only vendor that provides follow up work modules.</p> <p>We did reach out to see if other providers were available.</p>	
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.	
The cost was negotiated over several communications, written and by phone, to ensure that the services were appropriate to support operations at CDS during this period of change.	
4. Describe the plan for future competition for the goods or services.	
Any future training will be discussed and then processed in accordance with State procurement policies and procedures	

<b>PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS &amp; RECOVERY PLAN (MJRP)</b>	
Does this request utilize ARPA/MJRP funds?	
<input type="checkbox"/> Yes, MJRP funds (023) – If Yes, please attach the approved Business Case(s).	
<input type="checkbox"/> Yes, ARPA funds (025) – If Yes, please be aware of the requirements from awarding federal agencies.	
<input checked="" type="checkbox"/> No – If No, proceed to Part V.	

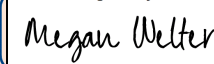
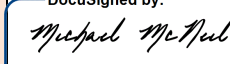
**PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE**

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 signatures below indicate approval of this procurement request.

Signature of requesting Department’s Commissioner (or designee):	DocuSigned by:  <small>46F6FA523BF3479...</small>		
Typed Name:	Megan Welter	Date:	10/17/2024
Signature of DAFS Procurement Official:	DocuSigned by:  <small>7008796FB36A449...</small>		
Typed Name:	Michael McNeil	Date:	10/22/2024

NOI 1020241231

**Certificate Of Completion**

Envelope Id: E0CEB0FB8707402D8F8EDDB330E4E365	Status: Completed
Subject: Complete with DocuSign: Procurement Justification Form - RQS.docx	
Source Envelope:	
Document Pages: 3	Signatures: 1
Certificate Pages: 4	Initials: 0
AutoNav: Enabled	Envelope Originator: Stacey Bean Stacey.Bean@maine.gov
Envelopeld Stamping: Enabled	IP Address: 67.242.211.81
Time Zone: (UTC-05:00) Eastern Time (US & Canada)	

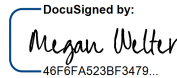
**Record Tracking**

Status: Original 10/16/2024 9:35:59 AM	Holder: Stacey Bean Stacey.Bean@maine.gov	Location: DocuSign
Security Appliance Status: Connected	Pool: StateLocal	
Storage Appliance Status: Connected	Pool: Maine Department of Education	Location: DocuSign

**Signer Events**

Megan Welter  
megan.welter@maine.gov  
Associate Commissioner of Public Education  
Security Level: Email, Account Authentication (None)

**Signature**

DocuSigned by:  
  
48F6FA523BF3479...  
Signature Adoption: Pre-selected Style  
Using IP Address: 99.196.128.47

**Timestamp**

Sent: 10/16/2024 9:36:42 AM  
Viewed: 10/16/2024 9:43:11 PM  
Signed: 10/17/2024 9:24:28 PM

**Electronic Record and Signature Disclosure:**

Accepted: 2/22/2022 8:43:12 AM  
ID: a3f5e052-e68a-4555-b08f-3ab2586f161c

**In Person Signer Events**

**Signature**

**Timestamp**

**Editor Delivery Events**

**Status**

**Timestamp**

**Agent Delivery Events**

**Status**

**Timestamp**

**Intermediary Delivery Events**

**Status**

**Timestamp**

**Certified Delivery Events**

**Status**

**Timestamp**

**Carbon Copy Events**

**Status**

**Timestamp**

**Witness Events**

**Signature**

**Timestamp**

**Notary Events**

**Signature**

**Timestamp**

**Envelope Summary Events**

**Status**

**Timestamps**

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Envelope Updated	Security Checked	10/17/2024 7:00:22 AM
Envelope Updated	Security Checked	10/17/2024 7:00:22 AM
Certified Delivered	Security Checked	10/16/2024 9:43:11 PM
Signing Complete	Security Checked	10/17/2024 9:24:28 PM
Completed	Security Checked	10/17/2024 9:24:28 PM

**Payment Events**

**Status**

**Timestamps**

**Electronic Record and Signature Disclosure**

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If you decide to receive notices and disclosures from us electronically, you may at any time change your mind and tell us that thereafter you want to receive required notices and disclosures only in paper format. How you must inform us of your decision to receive future notices and disclosure in paper format and withdraw your consent to receive notices and disclosures electronically is described below.

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Unless you tell us otherwise in accordance with the procedures described herein, we will provide electronically to you through the DocuSign system all required notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you during the course of our relationship with you. To reduce the chance of you inadvertently not receiving any notice or disclosure, we prefer to provide all of the required notices and disclosures to you by the same method and to the same address that you have given us. Thus, you can receive all the disclosures and notices electronically or in paper format through the paper mail delivery system. If you do not agree with this process, please let us know as described below. Please also see the paragraph immediately above that describes the consequences of your electing not to receive delivery of the notices and disclosures electronically from us.

**How to contact Carahsoft OBO Maine Department of Education:**

You may contact us to let us know of your changes as to how we may contact you electronically, to request paper copies of certain information from us, and to withdraw your prior consent to receive notices and disclosures electronically as follows:

To contact us by email send messages to: [jennifer.l.tarr@maine.gov](mailto:jennifer.l.tarr@maine.gov)

**To advise Carahsoft OBO Maine Department of Education of your new email address**

To let us know of a change in your email address where we should send notices and disclosures electronically to you, you must send an email message to us at [jennifer.l.tarr@maine.gov](mailto:jennifer.l.tarr@maine.gov) and in the body of such request you must state: your previous email address, your new email address. We do not require any other information from you to change your email address.

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- ii. send us an email to [jennifer.l.tarr@maine.gov](mailto:jennifer.l.tarr@maine.gov) and in the body of such request you must state your email, full name, mailing address, and telephone number. We do not need any other information from you to withdraw consent.. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process..

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To confirm to us that you can access this information electronically, which will be similar to other electronic notices and disclosures that we will provide to you, please confirm that you have read this ERSD, and (i) that you are able to print on paper or electronically save this ERSD for your future reference and access; or (ii) that you are able to email this ERSD to an email address where you will be able to print on paper or save it for your future reference and access. Further, if you consent to receiving notices and disclosures exclusively in electronic format as described herein, then select the check-box next to ‘I agree to use electronic records and signatures’ before clicking ‘CONTINUE’ within the DocuSign system.

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