

## Procurement Review Comprehensive Checklist Procurement Services Division

This form must accompany all Purchase Order Requisitions

| SECTION 1: DESCRIPTION   |   |   |   |  |  |
|--|---|---|---|--|--|
| General Tracking   |   | Contract Terms                            |   |  |  |
| FILE ID#:  | RFP, BID, QUOTE OR RENEWAL #:           | INITIAL TERM WITH RENEWALS:<br>OTHER      | INITIAL TERM TOTAL COST:<br>\$55,242.00<br>CONTRACT TOTAL COST WITH ALL<br>RENEWALS:<br>\$55,242.00 |  |  |
| COMMITTEE:<br>HUMAN SERVICES                                       | TARGET COMMITTEE DATE:<br>01/02/2024    | PROMPT FOR RENEWAL:                       |   |  |  |
|  | CURRENT TERM TOTAL COST:<br>\$55,242.00 | MAX LENGTH WITH ALL RENEWALS:<br>ONE YEAR | CURRENT TERM PERIOD:  |  |  |
| Vendor Information   |   | Department Information                    |   |  |  |
| VENDOR:<br>360 Youth Services                                      | VENDOR #:                               | DEPT:<br>Community Services               | DEPT CONTACT NAME: Gina Strafford-Ahmed   |  |  |
| VENDOR CONTACT: VENDOR CONTACT PHONE: Scott Thurman (331) 223-6082 |   | DEPT CONTACT PHONE #: 6444                | DEPT CONTACT EMAIL:<br>gina.strafford@dupagecounty.gov  |  |  |
| VENDOR CONTACT EMAIL:<br>sthurman@360youthservices.org             | VENDOR WEBSITE:<br>360youthservices.org | DEPT REQ #:                               |   |  |  |

## Overview

DESCRIPTION Identify scope of work, item(s) being purchased, total cost and type of procurement (i.e., lowest bid, RFP, renewal, sole source, etc.). 360 Youth Services provides case management, housing, job coaching/preparedness, transportation, educational services and GED coaching to homeless youth in DuPage County via \$55,242 in CSBG grant funds.

JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished

\$55,242 in CSBG funds will assist 60 homeless youth with case management, job coaching/preparedness, transportation and GED coaching.

| SECTION 2: DECISION MEMO REQUIREMENTS                 |  |  |  |  |  |  |
|---|--|--|--|--|--|--|
| DECISION MEMO NOT REQUIRED                            | DECISION MEMO NOT REQUIRED Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is not required.              |  |  |  |  |  |
| DECISION MEMO REQUIRED OTHER PROFESSIONAL SERVICES (I | Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is required.  DETAIL SELECTION PROCESS ON DECISION MEMO) |  |  |  |  |  |

|  | SECTION 3: DECISION MEMO  |  |  |  |  |
|--|---|--|--|--|--|
| STRATEGIC IMPACT                             | Select an item from the following dropdown menu of County's strategic priorities that this action will most impact.  QUALITY OF LIFE  |  |  |  |  |
| SOURCE SELECTION                             | Describe method used to select source.  This is a sub-grant exempt from bidding. They will provide direct services for the County's CSBG program and will maintain all records and financial documents. 360 Youth Services is an established not for profit in DuPage County and has received Human Services Grant Funds and CDBG funding as well. See attached request for funding. In conducting the 2022 DuPage County Department of Community Services' Needs Assessment Service Users, Community Members and Stakeholders were asked, "What is your greatest employment need?" 72.5% of Community Members, 73% of Stakeholders and 41.4% of Service Users identified needing full time employment as the greatest employment need in our community. A vulnerable population struggling with finding and maintaining employment are our homeless youth. 360 Youth Services (Sub-grantee) will assist homeless youth with securing and maintain employment, finding stable housing, education support to achieve higher wages, transportation support, and financial literacy skills, through intensive case management and supportive services. |  |  |  |  |
| RECOMMENDATION<br>AND<br>TWO<br>ALTERNATIVES | Describe staff recommendation and provide justification. Identify at least 2 other options to accomplish this request, including status quo, (i.e., take no action). Fund the program at \$55,242  1) Issue sub grantee agreement with 360 Youth Services for \$55,242. This will allow homeless youth to have a safe place to stay as well as case management and supportive services to help then attain employment.  2) Do not fund the program and run the risk of homeless youth being forced to live in their vehicles, parks and public areas. They would also not be able to access employment skills training and receive other employment supports.   |  |  |  |  |

|                                  | SECTION 4: SOLE SOURCE MEMO/JUSTIFICATION   |
|----------------------------------|---|
| JUSTIFICATION                    | Select an item from the following dropdown menu to justify why this is a sole source procurement.   |
| NECESSITY AND<br>UNIQUE FEATURES | Describe the product or services that are not available from other vendors. Explain necessary and unique features or services. Attach letters from manufacturer, letters from distributor, warranties, licenses, or patents as needed. Be specific. |
| MARKET TESTING                   | List and describe the last time the market has been tested on the applicability of the sole source. If it has not been tested over the last 12 months, explain why not.   |
| AVAILABILITY                     | Describe steps taken to verify that these features are not available elsewhere. Included a detailed list of all products or services by brand/manufacturer examined and include names, phone numbers, and emails of people contacted.               |

| Send                                | Purchase Order To:                     | Send Invoices To:                          |   |  |  |  |
|-------------------------------------|--|--|---|--|--|--|
| Vendor:<br>360 Youth Services       | Vendor#:                               | Dept:<br>Community Services                | Division:<br>Intake and Referral          |  |  |  |
| Attn:<br>Valerie Tawrel             | Email:<br>vtawrel@360youthservices.org | Attn:<br>Gina Strafford-Ahmed              | Email:<br>gina.strafford@dupagecounty.gov |  |  |  |
| Address:<br>1305 W. Oswego Road     | City:<br>Naperville                    | Address:<br>421 N. County Farm Road        | City:<br>Wheaton                          |  |  |  |
| State:<br>Illinois                  | Zip:<br>60540                          | State:<br>Illinois                         | Zip:<br>60187                             |  |  |  |
| Phone:<br>(331) 280-2245            | Fax:                                   | Phone: 6444                                | Fax:                                      |  |  |  |
| Se                                  | nd Payments To:                        | Ship to:                                   |   |  |  |  |
| Vendor:<br>SAA                      | Vendor#:                               | Dept:<br>SAA                               | Division:                                 |  |  |  |
| Attn:                               | Email:                                 | Attn:                                      | Email:                                    |  |  |  |
| Address:                            | City:                                  | Address:                                   | City:                                     |  |  |  |
| State:                              | Zip:                                   | State: Zip:                                |   |  |  |  |
| Phone:                              | Fax:                                   | Phone:                                     | Fax:                                      |  |  |  |
| <br>Shipping                        |  | Contract Dates                             |   |  |  |  |
| Payment Terms:<br>PER 50 ILCS 505/1 | FOB:<br>Destination                    | Contract Start Date (PO25):<br>Jan 1, 2024 | Contract End Date (PO25):<br>Dec 31, 2024 |  |  |  |

|     | Purchase Requisition Line Details   |     |                            |                   |              |         |      |           |                             |            |           |
|-----|---|-----|----------------------------|-------------------|--------------|---------|------|-----------|-----------------------------|------------|-----------|
| LN  | Qty   | UOM | Item Detail<br>(Product #) | Description       | FY           | Company | AU   | Acct Code | Sub-Accts/<br>Activity Code | Unit Price | Extension |
| 1   | 1   | EA  |                            | Contract Services | FY24         | 5000    | 1650 | 53820     | 24-231028                   | 55,242.00  | 55,242.00 |
| FYi | FY is required, assure the correct FY is selected.  Requisition Total \$ 55 |     |                            |                   | \$ 55,242.00 |         |      |           |                             |            |           |

| Comments             |  |  |  |  |
|----------------------|--|--|--|--|
| HEADER COMMENTS      | Provide comments for P020 and P025.  |  |  |  |
| SPECIAL INSTRUCTIONS | Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO.            |  |  |  |
| INTERNAL NOTES       | Provide comments for department internal use (not for P020 and P025). Comments will not appear on PO.      |  |  |  |
| APPROVALS            | Department Head signature approval for procurements under \$15,000. Procurement Officer Approval for ETSB. |  |  |  |

The following documents have been attached:  $\checkmark$  W-9  $\checkmark$  Vendor Ethics Disclosure Statement