



Procurement Review Comprehensive Checklist  
 Procurement Services Division  
 This form must accompany all Purchase Order Requisitions

<b>SECTION 1: DESCRIPTION</b>			
<i>General Tracking</i>		<i>Contract Terms</i>	
FILE ID#: 24-1555	RFP, BID, QUOTE OR RENEWAL #:	INITIAL TERM WITH RENEWALS: OTHER	INITIAL TERM TOTAL COST: \$67,000.00
COMMITTEE: ETSB	TARGET COMMITTEE DATE: 06/12/2024	PROMPT FOR RENEWAL: 3 MONTHS	CONTRACT TOTAL COST WITH ALL RENEWALS: \$67,000.00
	CURRENT TERM TOTAL COST: \$67,000.00	MAX LENGTH WITH ALL RENEWALS: TWO YEARS	CURRENT TERM PERIOD: INITIAL TERM
<i>Vendor Information</i>		<i>Department Information</i>	
VENDOR: Lilly Counseling and Consultation	VENDOR #: 37797	DEPT: ETSB	DEPT CONTACT NAME: Eve Kraus
VENDOR CONTACT: Dr. Michelle Lilly	VENDOR CONTACT PHONE: 734-274-0870	DEPT CONTACT PHONE #: 630-550-7743	DEPT CONTACT EMAIL: etsb911@dupagecounty.gov
VENDOR CONTACT EMAIL: lly-consulting.com	VENDOR WEBSITE:	DEPT REQ #: 924017	
<b>Overview</b>			
DESCRIPTION Identify scope of work, item(s) being purchased, total cost and type of procurement (i.e., lowest bid, RFP, renewal, sole source, etc.). Recommendation for Purchase Order 924017 to Lilly Counseling and Consultation for a continuation of training for two (2) years for staff of Addison Consolidated Dispatch Center (ACDC) and DU-COMM PSAPs. The contract will run July 1, 2024 through June 20, 2026. This is for three (3) courses of Peer Support Knowledge and Skills for 9-1-1 training and for five (5) courses of Protect 9-1-1: Training to Reduce Risk for PTSD and Enhance Resilience training, with an option for three (3) additional trainings. The purchase includes travel expenses for the speaker. Total initial amount not to exceed: \$67,000.00.			
JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished ETSB maintains a training budget to offset the costs to the PSAPs. This would be a joint training event involving staff from both PSAPs for up to thirty attendees in each course. The contract is paid directly by ETSB and there will be no reimbursement required from the PSAPs. The PSAPs have requested continuation of this training for all the Telecommunicators including new hires. If the PSAPs request additional dates beyond the five (5) initially contracted for Protect 9-1-1, a change order will be brought forward for approval to encumber the necessary funds.			

<b>SECTION 2: DECISION MEMO REQUIREMENTS</b>	
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	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is required.
OTHER PROFESSIONAL SERVICES (DETAIL SELECTION PROCESS ON DECISION MEMO)	

<b>SECTION 3: DECISION MEMO</b>	
SOURCE SELECTION	Describe method used to select source. This is a continuation of training offered by Dr. Lilly which the PSAP Directors feel has been beneficial to their personnel and would be beneficial for all employees. There are new hires and employees who have not yet completed these trainings.
RECOMMENDATION AND TWO 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). 1. Staff recommends approval of Purchase Order 924017 to allow for the training courses for PSAP personnel. 2. Deny Purchase Order 924017 and not agree to the training proposal.

## SECTION 4: SOLE SOURCE MEMO/JUSTIFICATION

<b>JUSTIFICATION</b>	Select an item from the following dropdown menu to justify why this is a sole source procurement.
<b>NECESSITY AND UNIQUE FEATURES</b>	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.
<b>MARKET TESTING</b>	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.
<b>AVAILABILITY</b>	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.

## SECTION 5: Purchase Requisition Information

<i>Send Purchase Order To:</i>		<i>Send Invoices To:</i>	
Vendor: Lilly Counseling & Consultation	Vendor#: 37797	Dept: ETSB	Division:
Attn: Dr. Michelle Lilly	Email: michelle@lilly-consulting.com	Attn: 9-1-1 Coordinator	Email: etsb911@dupagecounty.gov
Address:	City:	Address: 421 N. County Farm Road	City: Wheaton
State:	Zip:	State: IL	Zip: 60187
Phone:	Fax:	Phone: 630-550-7743	Fax:
<i>Send Payments To:</i>		<i>Ship to:</i>	
Vendor: Lilly Counseling & Consultation	Vendor#: 37797	Dept: ETSB	Division:
Attn: Dr. Michelle Lilly	Email:	Attn:	Email: etsb911@dupagecounty.gov
Address:	City:	Address:	City:
State:	Zip:	State:	Zip:
Phone:	Fax:	Phone:	Fax:
<b>Shipping</b>		<b>Contract Dates</b>	
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): Jul 1, 2024	Contract End Date (PO25): Jun 30, 2026

**Purchase Requisition Line Details**

LN	Qty	UOM	Item Detail (Product #)	Description	FY	Company	AU	Acct Code	Sub-Accts/ Activity Code	Unit Price	Extension
1	3	EA		3 Days of Peer Support Knowledge and Skills for 9-1-1 Training Course FY24-26		4000	5820	53610		9,000.00	27,000.00
2	5	EA		2 Days Protect 9-1-1: Training to Reduce Risk for PTSD and Enhance Resilience Training Course Includes fees & travel expenses for the speaker FY24-26		4000	5820	53610		8,000.00	40,000.00
										<b>Requisition Total \$</b>	<b>67,000.00</b>

*FY is required, ensure the correct FY is selected.*

*Comments*

HEADER COMMENTS	Provide comments for P020 and P025. Contains an option for three (3) additional trainings of Protect 9-1-1.
SPECIAL INSTRUCTIONS	Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO. Do Not Encumber Funds - FY24-26. Please send the PO to ETSB to send to the vendor.
INTERNAL NOTES	Provide comments for department internal use (not for P020 and P025). Comments will not appear on PO. Peer Support courses may be adjusted to 2 days to accommodate the PSAPs' scheduling of personnel.
APPROVALS	Department Head signature approval for procurements under \$15,000. Procurement Officer Approval for ETSB. LMZ /