

Office of Management and Budget Division of Purchasing



Non-Competitive Contract Request Form

Department	Office for Safe and Healthy Neighbor	Department Contact	Nannette Bertram Dix, MSSW,CSW
Contact Email	nannette.dix@louisvilleky.gov	Contact Phone	502-574-6415

Contract Type: check one	New		Amendment			
		Additional Funds	Time Extension	Scope		
Professional Service						
Sole Source (goods/services)	~					
	Start	End				
Requested Contract Dates (MM/DD/YYYY)	09/30/2021	09/29/2022				

VENDOR INFORMATION

Vendor Legal Name	University of Pittsburgh							
DBA	N/A							
Point of Contact	Jennifer Woodward, PhD			Email	osp@pitt.edu			
Street	300 Murdoch I Building, 3420 Forbes Ave							
Suite/Floor/Apt	Suite 201			Phone	412-	412-624-7400		
City	Pittsburgh			State	PA :		Zip Code	15260
Federal Tax ID#			SSN# (If sole	e propriet	or)	N/A		
Louisville Revenue Commission Account #								
Human Relations Commission Certified Vendors		Certified Minority Owned Business			Certified Woman Owned business		Disabled Owned business	
Select if applicable								

FINANCIAL INFORMATION

Not to Exceed Contract Amount	\$42,898			(including reimbursement expenses, if applicable				plicable)	
Fund Source: General Fund									
Federal Grant	✓ Federal Granting Agency			Substance Abuse and Mental Health Services					
Other		Describe:			Reduce the	impact of s	ubstance abu	ise and me	
Account Code String #	2101	610	6200	700	6140 5229	998			
Downant Pate		per hour			per day		per service		
Payment Rate		per month			Other	Upon rece	eipt of invoice	/svcs	
Decement Francisco	Monthly				Upon Completion / Delivery				
Payment Frequency		Quarterly			Other	Upon rece	eipt of invoice	/svcs	

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CONTRACT SCOPE and PURPOSE (Attach additional documentation if necessary)

Amendments: Describe the circumstances under which a time extension or scope change is needed.

New: Be specific about the work to be performed / product to be purchased including but not limited to: scope of work; description of service; work product created; why the service / product is necessary; and benefit to Louisville Metro Government.

Alternatives for Families: A Cognitive Behavioral Therapy (AF-CBT) is a trauma-informed, evidence-based treatment designed to resolve trauma and improve the relationships between children and caregivers in families who have experienced violence and/or are involved in conflict, physical aggression, child physical abuse, and/or child behavior problems.

The University of Pittsburgh School of Medicine is an approved contractor by the funder, as one of four evidence-based interventions, as a part of the project to help increase the communities' capacity in trauma-informed care, resources, and equity for youth and their families living in West and South Louisville.

JUSTIFICATION FOR NON-COMPETITIVE GOOD/SERVICE (Attach additional documentation if necessary)

Provide justification including but not limited to: a description of the unique features that prohibit competition; research conducted to verify the vendor as the only known source (sole source); why the service (PSC) is not feasible to be provided by LMG staff or expertise does not exist; known compatibility, proprietary and/or timing issues.

The University of Pittsburgh School of Medicine is essential to the Louisville ReCAST/Trauma Resilient (TRC) Project because it is the sole source for training in the Alternatives for Families-Cognitive Behavioral Therapy (AF-CBT) intervention. Certification in this modality is not offered by any other entity.

The grant is funded by the Substance Abuse and Mental Health Services Administration (SAMHSA) whose objective, in part, is to provide families with pertinent tools for managing the effects of trauma and to promote healing. Subsequently, the AF-CBT model aligns with the grant's mission to help families heal, with an emphasis on families who have experienced or display signs of aggression. Unlike other cognitive therapy disciplines, this model offers a unique and integrated family focused method of training that allows clinicians to tailor intervention sessions and materials for families that need to be seen in various settings (e.g., clinics, schools, home and other community settings).

Attachment: Exhibit A and B

AUTHORIZATIONS: Per KRS 45A.380, I have determined that competition is not feasible for the above described good / service and there is a single source within a reasonable geographical area of the good / service to be procured; or the resulting contract is for the services of a licensed professional, technician, artist, or other non-licensed professional service.

Department Director	Monique Williams	Date_	November 11, 2021
•	Signature Monique Williams		
Purchasing Director	Printed Name Docusigned by: Jord Name Signature Signature	Date	12/14/2021
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