

## **Suspension of Competition Acquisition Request**



- 1. Fully describe the product(s) and/or service(s) being requested.
  - The Department of Behavioral Health (DBH) is requesting to execute an Agreement with Claremont Graduate University, for the provision of non-clinical and field experiences in County operations for students of the University, effective for a seven-month and two-year term of upon execution through June 30, 2028, with two, one year optional extensions.
- 2. Identify the selected vendor and contact person; include the address, phone number and e-mail address for each.

Claremont Graduate University

150 E. Tenth Street, Claremont, CA 91711

Interim Executive Vice President & Provost

- 3. What is the total cost of the acquisition? If an agreement, state the total cost of the initial term and the amounts for potential renewal terms.
  - The recommended agreement does not provide any compensation between the County and Claremont Graduate University.
- 4. Identify the unique qualities and/or capabilities of the service(s) and/or product(s) that qualify this as a Suspension of Competition acquisition.
  - Claremont Graduate University offers a Doctorate of Public Health program, and there are no Doctorate programs of this kind in the Central Valley. The program allows students to complete their degree remotely, which allows residents of the Central Valley to study with professionals and faculty that would otherwise not be available to them.
  - Additionally, the Department continually receives solicitations to enter into an Agreement for students completing their required internships. The Department is willing to enter into an Agreement with any such university or college.
  - Identify from Administrative Policy #34 what circumstances constitute a Suspension of Competition.

    In an emergency when goods or services are immediately necessary for the preservation of the public health, welfare, or safety, or for the protection of County property.

    When the contract is with a federal, state, or local governmental agency.

    When the department head, with the concurrence of the Purchasing Agent, finds that the cost of preparing and administering a competitive bidding process in a particular case will equal or exceed the estimated contract amount or \$5,000 whichever is more.

    When a contract provides only for payment of per diem and travel expenses and there is to be no payment for services rendered.

    When obtaining the services of expert witnesses for litigation or special counsel to assist the County.

    When in unusual or extraordinary circumstances, the Board of Supervisors or the Purchasing Agent/Purchasing Manager determines that the best interests of the County would be served by not securing competitive bids or issuing a request for proposal.

    Explain why the unique qualities and/or capabilities described above are essential to your department.

This University agrees to enter into a zero-dollar agreement with the County to allow its student interns to receive non-clinical and field experiences that will enhance services for County persons served, strengthen recruitment efforts that are traditionally difficult to fill, and allow for professional development for current Department staff.

- 7. Provide a comprehensive explanation of the research done to verify that the recommended vendor is the only vendor with the unique qualities and/or capabilities stated above. Include a list of all other vendors contacted, what they were asked, and their responses.
  - The Department is willing to contract, through a zero-dollar agreement, with any other college/university that has students with a need for clinical, non-clinical, and/or field experiences through their course of study to obtain licensure or meet graduation requirements. Interested colleges/universities may reach out to the Department at any time to begin drafting an agreement.

| bahoungviengkham 11/13/2025 2:33:01 PM               | Division Manager                 | [ Sign] Double click! |
|--|----------------------------------|-----------------------|
| Requested By:  | Title                            |                       |
| I approve this request to suspend competition for th | e service(s) and/or product(s) i | dentified herein.     |
|  |                                  |                       |

Department Head Signature

Purchasing Manager Signature