

Idaho Streamlines Contracting Process

Through a quality improvement process, the Idaho Division of Public Health streamlined and accelerated its contracting process with local health departments. The QI process resulted in the state developing more efficient tools that have ensured consistency in the language used, ensuring those reviewing the contract that the language was legal, easy to find, and non-contradictory across agency contracts. Depending on the contract, use of these tools reduced the amount of time the contracting process took by an average of 2 weeks.

The Idaho Division of Public Health (IDoPH) within the state Department of Health and Welfare contracts with seven local public health districts (PHDs) to provide services to the public, including clinical, health promotion, epidemiology, and preparedness activities. IDoPH has more than 200 contracts with local PHDs. Prior to the quality improvement efforts described in this story, terms were negotiated in a highly decentralized process by four different bureaus in the division. As a result, IDoPH's contracts did not contain standard language or structure. Moreover, a routine federal audit of the health preparedness program found that IDoPH needed to develop more rigorous and standardized fiscal monitoring practices for its contracts.

Using a quality improvement (QI) initiative, the team created standardized tools, increasing efficiency, accelerating the process, and ensuring contracts included adequate oversight and monitoring requirements.

- A non-standardized contracting process within the Idaho Division of Public Health was creating challenges for its work.
- Through a QI initiative, the division created a standardized contract template for all programs.
- Contracts now have standard language and formatting, resulting in a faster, more efficient process.

Assessment:

- Recommendations from the federal audit of the health preparedness program prompted IDoPH to initiate a comprehensive review of all current contracts. IDoPH focused this review on identifying inconsistencies between contracts, including inconsistent reporting and monitoring requirements.
- Within each bureau, contracts used similar language and formatting, however, IDoPH's performance improvement manager (PIM) found that there was great variance in contracts developed across the Division. Inconsistencies in language and formatting negatively impacted the contracting timeline by delaying the execution process.
- The PIM established two teams staffed with cross-departmental representation to address these problems. One team was charged with developing a standardized template. The second reviewed the process and workflow of contract development.
- After a thorough review of the current practices and policies used to develop a contract, the teams identified the primary complication: program staff were developing new contracts by building off incorrect prior year contracts. This practice led to significant variations in contract language and increased potential for legal errors. The process of reviewing every contract and correcting these errors was burdensome to the Contract and Procurement Services Unit (CAPSU) and resulted in longer contract processing times, as well as strained relationships between

IDoPH and CAPSU. The extra individual review also increased the potential for inconsistent language and content errors.

- The two teams agreed that the best way to resolve the problems was to standardize the contracting process by creating a contract template and developing a work flowchart of the contracting process. Implementing these measures would ensure that the contract language was consistent across programs and that all staff members understood the contracting processes and were utilizing the same policies and procedures.

QI Project #1: Standard Contract Template

- To create the template, the team reviewed language requirements that would meet each of the four bureaus' specifications. The team worked with contracting staff and auditors to ensure that the language was correct and referenced Office of Management and Budget circulars to ensure that the monitoring and reporting requirements were comprehensively outlined.
- The team created a standardized contract with consistent formatting. The standardized format ensured the language around expectations and monitoring and reporting requirements was clear and consistently in the same place in the contract. The consistency eased the approval process for CAPSU and ensured that PHDs receiving the contract would recognize the formatting, language, and requirements.
- The new template required that sub-recipients prepare an operating detail report and a personnel detail report:
 1. The operating detail report required recipients to detail the budget and how the funds were spent. It was designed to be pulled directly from PHDs' financial systems.
 2. The personnel detail report requirements were based on a process that the preparedness team required for reporting. This proved to be very cumbersome for grantees and led to an additional small quality improvement project. The team met with the fiscal officers, discussed the minimum reporting required, and revised the process together. The result is that while less information is gathered up front, and site visits are required for further information for some grants, the process is manageable for the sub recipients.

QI Project #2: Contract Execution Process

- The PIM met with staff from different bureaus to flowchart and update their contracting process and activities.
- During these meetings, the PIM learned that CAPSU had a boilerplate cover letter that was sent with all department contracts. The letter outlined the basic terms for the contractor and was used across the entire department, with the exception of IDoPH. The existing IDoPH process required the letter to be written by program staff and signed by the IDoPH administrator, which added an additional routing step for CAPSU prior to a public health contract being finalized.
- The most significant changes to the contracting process included the requirement that all program staff:
 1. Create any new contracts using a standard agency-wide template.
 2. Involve the CAPSU staff during initial contract negotiation conversations.
 3. Use the boilerplate cover letter for each contract.



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Results:

- As part of the new workflow, programs send draft contracts to CAPSU for review during the negotiation process, rather than after. This has improved relationships with both the contractors and the contracting unit, and has been estimated to reduce the contracting process by an average of two weeks. Using the CAPSU boilerplate letter was an immediate success, reducing the final processing time by 2 days, from 7 days to 5.
- The process has led to more integrated work between CAPSU and IDoPH. Training on the new process is done jointly between CAPSU and IDoPH, which creates a unified voice.
- The contract template is located on a SharePoint site accessible to all staff. Updates and revisions are done as needed, and staff are notified when a change has been made.

Lessons Learned:

- It's important to invest the time to develop a common understanding of operational definitions. Within the Idaho Division of Public Health, different legal terms and operational definitions were being used across bureaus. With the newly created policies and procedures, the team created a list of working definitions of terms to ensure consistency.
- Agency-wide templates can reduce the likelihood of unnecessary variation in contract language and reduce time needed to review contracts for avoidable mistakes and errors, resulting in a more efficient process.

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