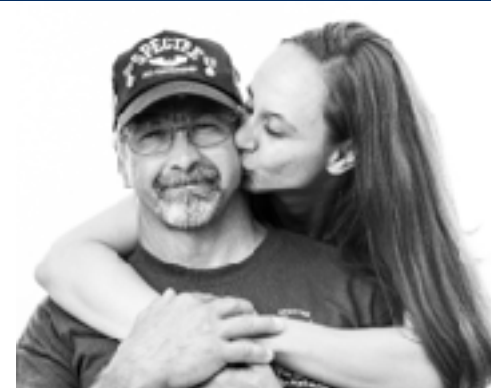


VA Online Scheduling Usability Research



VA | Vets.gov

01.12.2018



What We Did
Who We Talked To
What We Heard
Quotes

What We Did

Objectives | Methods

Objectives

- We went into research with three main objectives:
 - Can users **find** the online scheduling tool from MyHealthVet and **login**?
 - Are users able to **create new** appointments and appointment requests?
 - Can users **cancel** appointments and appointment requests?
- As with everything we do at DSVA, we wanted to design *with* users, not *for* users.

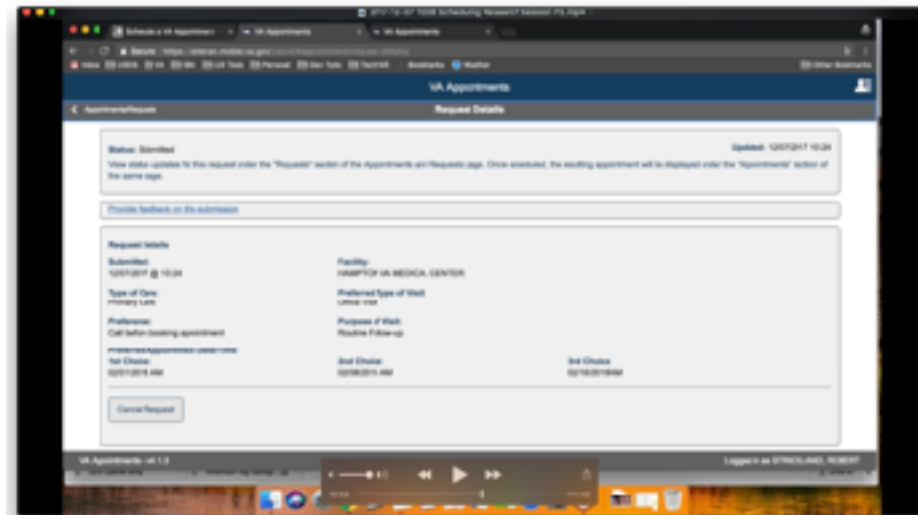
Methods

Over the course of a few weeks, we spoke to 6 Veterans, for 1-hour phone interviews to **learn about their experiences with the VA** and take them through **four online scheduling tasks**, observe users process, identify pain points and find opportunities for improving the usability of the online scheduling tool.

MHV start point

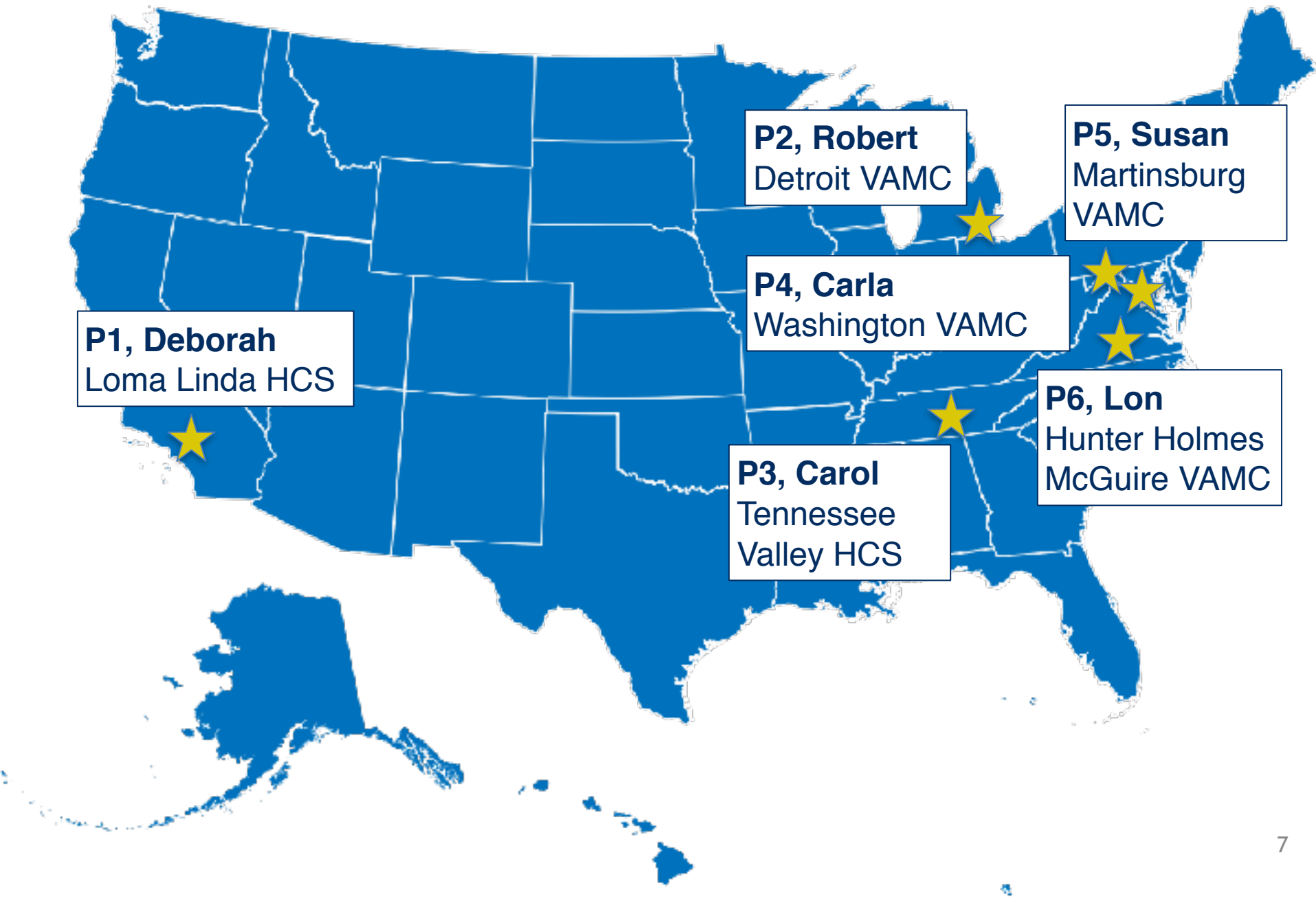


VA Online Scheduling request confirmation



Who We Talked To

Participants



P1, Deborah
Loma Linda HCS

P2, Robert
Detroit VAMC

P4, Carla
Washington VAMC

P3, Carol
Tennessee
Valley HCS

P5, Susan
Martinsburg
VAMC

P6, Lon
Hunter Holmes
McGuire VAMC

What We Heard

Tasks | Findings | Next Steps

Online Scheduling Tasks

Task 1: Find the online scheduling tool

- *“Imagine you want to make a primary care appointment online using your MyHealthVet Premium account. How would you do this?”*

Task 2: Create appointment

- *“Pretend you need to schedule an appointment to see your primary care physician for your annual physical. Make the appointment in February*

Task 3: Request appointment

- *“Imagine you want to request a specialty appointment in February 2018. Please show us how you would do this.”*

Task 4: Cancel appointments & appointment requests

- *“Next, please cancel the appointment and appointment requests you just created.”*

Task Success Rate

Task 1: Navigate from MyHealthVet into the online scheduling tool- **0/6 (0%)**

- Two users were unable to navigate to the online scheduling tool from MHV
- Two users were stopped by the medical information release form
- Two users received ineligibility errors on entering the online scheduling tool

Task 2: Create a new self-scheduled appointment - **3/6 (50%)**

- For two users self-scheduling was not available at their facility
- One user was unable to determine if they had selected the correct clinic

Task 3: Create appointment request - **5/6 (83%)**

- One user was unable to select the campus for appointment

Task 4: Cancel the appointments and requests - **6/6 (100%)**

Findings

1. Users are confused by the medical release form.
2. Users need more user-friendly context around these two key topics:
 - Why is self-scheduling available at some facilities/clinics and not others?
 - What is the difference between self scheduling and requesting an appointment?
3. Most users encountered an error message on entry, and many received error messages when accessing facility data.
4. Users do not understand the clinic names, and as a result, are not confident that they are scheduling or requesting appointments at the correct facility or with the right team.

Findings

5. Load times for entering the application and for selecting facility are very long (30-60s).
6. Confirmation messages for key actions—including successful schedule and cancellation—need to be delivered to users more clearly and should include next steps.
7. Users expected to see more appointment types, in particular, their specialists.
8. Several users requested the ability to reschedule an appointment as an alternative to cancelling.
 - Both cancel and “reschedule” should be available from the online scheduling tool homepage

Finding 1 - Medical Release Form

"Well if it worked like that, no, clicking in the form doesn't produce anything useful, then I don't know that I could. Now, it talks about the app, well that's a different matter, so I don't know about the app. But that's what I'm here to find out. " - P1, Deborah

"Ok this is confusing. I just want to make an appointment, not access a mobile app. I already have MHV account, which already gives me access on my phone and comp to MHV. So, this seems redundant to me. Ok, so let me go. See but I already have this. So, if I had to do this first before using the scheduling, I would probably hang up and call." - P5, Susan

"I hit verify. Now it's going back, now it's wonky, and its going back, well it's loading, but on the top it says appointments and appointments request, so that kinda makes me think that there's something wrong. now instead of looking at my medical records, it's listing my appointments that I have. Or have had." - P3, Carol

Design Recommendations:

Finding 1

Users are confused by the medical release form.

1. Remove the medical information release form for MHV users.
2. For all other users, the form should not appear as a fullscreen form. Users thought it was a clickable PDF that they were supposed to fill out.
3. For non-MHV users, provide context to explain that all that is needed from them is their digital signature on a pre-filled form.

Finding 2 - Context for Key Topics

“I don’t know why I couldn’t pick Detroit. Maybe they don’t do this? That part was confusing.” - P2, Robert

“This is a drop down for type of care, so I will put PC, ok, well. Hmmm. Ok I guess I would use schedule myself. I have questions at this point. It says schedule myself, I’m real hesitant to do that, b/c I don’t know if this system, I’m like - do they know the Dr’s vacation schedule, or if the dr for some reason I can’t have my apt, they’ll know to call me, like it’s ok to do this not through the scheduler...” - P3, Carol

“... at first, obviously I wasn’t sure what it was asking. I was considering requesting, I knew there would be some time of communication if I was on the telephone. They would ask is there a time that works for you, and I would have responded... My first attitude was reluctant b/c this is a computer, this is not a person on the other side.” - P6, Lon

"Hmmm. Well that’s interesting. The message the scheduling clerk about this, you still have to make a phone call. No different than if I had tried to call from the beginning. I don’t see anywhere else that I need to click except providing feedback." - P1, Deborah

“This is telling me I can’t schedule at this clinic, so I would have to submit to a VA scheduler to get an appointment. I’m’ wondering if it’s this clinic, or if its Habte. I could submit to a scheduler, and have them make a time, but if I can’t make that then I have to call back and reschedule and I don’t want to do that. So, I’m going to see what the other clinics offer if anything.” - P5, Susan

Design Recommendations:

Finding 2

Users need more user-friendly context around these two key topics:

- **Why is self-scheduling available at some facilities/clinics and not others?**
 - **What is the difference between self scheduling and requesting an appointment?**
-
1. Add content near the facility selection to explain why the facility list may be limited.
 2. Add content near the appointment-type selection to explain why only some appointment types are available, and direct users where to go to book other types of appointments.
 3. Add context to the scheduling method selection explaining the difference between the two.
 4. For self-scheduling, add content to clinic selection, clarifying how to pick a clinic from the list.

Finding 3 - Error Messages

When I did, it came up, and I only touched about 2 things, and the thing closed on me, with an orange type screen and it said to the effect of I couldn't log in and it said try some other time. - P6, Lon

Go through all this. It's really big. Ummm. Signed up based on ds logon. This is a paper I have to approve. Verify with sign in. [Gets DOD error.] So, I got an error. So, I'm gonna ... ummm. - P2, Robert

[User encounters error: 'Error: Using Dept of Defense, USER does not have access to option MBAA Scheduling Calendar View.'] Error! Ok." - P1, Deborah

[Error – time out in 3 minutes.] Time out in three minutes. I'll hit continue. - P6, Lon

Design Recommendations:

Finding 3

Most users encountered an error message on entry, and many received error messages when accessing facility data.

1. Review error messages, their frequency, and address false positives. (Specifically: every user encountered the DOD error on entry.)
2. Rename error message with user-friendly names, and provide a next step to users. For instance:
[Self Scheduling Error (Detroit MC) - This facility does not offer online scheduling. You can still submit a request for the appointment directly to a scheduler by selecting "Request an appointment".]
3. Need to look at the error messages, their frequency, and address false positives.
4. All error messages must give the user a next step.

Finding 4 - Clinic Names

“It says RIC/PACT BLUE 8MD, and that’s that – and I can see that’s the doc I’m associated with. I don’t see the clinic that matches” - P6, Lon

“Ok so I’m assuming that these extended appointments are for appointments outside of normal hours. ... I don’t know well the difference between the primary well woman, or what these different numbers, or if they’re for different clinics or different ... this is pc women’s I would pick this one. I mean Habte has 4 different... I’m just going to make the best guess that that’s the one I want.” - P5, Susan

“Ok there it goes. Reason for appointment, I would put um. Well when it says clinic, and again I can’t slide up, there’s no like choices whether you go to Nashville or Murphysboro. That’s an issue there.” - P3, Carol

Design Recommendations:

Finding 4

Users do not understand the clinic names, and as a result, are not confident that they are scheduling or requesting appointments at the correct facility or with the right team.

1. Provide written guidance on how to select a clinic.
2. Change clinic names, so that they include the medical team's name; the specific location (facility, building, room number, days, etc.); and days as applicable. These are the pieces of information that users know.
3. Follow up with facilities to update their patient-friendly clinic names.

Finding 5 - Load Times

"I click on that, it's loading. I'm now waiting. The disc of death going on here. Oh my goodness... Loading." - P4, Carla

"Does this normally take this long with everyone or is it my computer?" - P5, Susan

"I clicked now on new appointment / request. I'm waiting. Now it's loading. For Hunter Holmes McGuire Hospital. BTW my computer is taking a couple of extra seconds today, but I'm on Comcast and that's expected." - P6, Lon

"It depends on what I was doing at the time, but if I was in the middle of something and had other things to do, I would just click away, but waiting to talk to a person, to get through to someone is just as frustrating, so I would say this is better than try to phone someone and make an appointment." - P1, Deborah

Design Recommendations:

Finding 5

Load times for entering the application and for selecting facility are very long (30-60s).

1. Add content to the loading message. For instance:
[We are pulling up your information. This may take 30-60 seconds. Please be patient with us!]

Finding 6 - Confirmation Messages

“View status updates for this request on the request section ok. I’m just reading through the request details now. I’m not sure what they want up here under submitted.” - P6, Lon

“OK as far as i can tell someone will call me to book one of these appointment times. Although I - it didn’t say how long.” - P5, Susan

“It sucks that I may get a response back, I may not. Even though it says hey we’ve received your information, we’ll probably get back to you in a timely manner. Exactly what’s a timely manner? 5 minutes from now 2 hours from now? 24 hours from now?” - P4, Carla

“Well I would hope, b/c it happened with the other one, when we went back, it showed that it was cancelled. This said this is cancelled. I’m going to go here. [clicks to go home] That’s what I was looking for. ” - P1, Deborah

Design Recommendations:

Finding 6

Confirmation messages for key actions—including successful schedule and cancellation—need to be delivered to users more clearly and should include next steps.

1. Visually differentiate the success and failure message from the appointment details. For instance, add a symbol or visual icon to indicate success or failure or increase text size. See USDWS alerts for examples.
2. Add next steps to the success message for an appointment request, so users know what to expect. For instance:
[VA will contact you in 2-10 days to confirm your appointment request.]

Finding 7 - Appointment Types

“Let me go back up to New appointment request, Martinsburg. Well I don’t to me – it looks like I can only make an appointment for 2 places, with my doctor in primary care or outpatient mental health, so if I was looking for endo or ortho, I would call those clinics directly. Or audiology.” - P5, Susan

“Ok. So now it’s at type of care. So I’m gonna click on the type of care, select the dropdown box, and it says primary care and mental health . It’s a little bit scary, there should be more options than just those 2.” - P4, Carla

“No , well, I have questions, it only offered me 2 types of care – primary and psych. You know I see a bunch of other specialists, but it didn’t offer that in the dropdown. Is this because it’s a test? Or it didn’t pick up on all the specialists I see?” - P3, Carol

Design Recommendations:

Finding 7

Users expected to see more appointment types, in particular, their specialists.

1. Provide content near the appointment type selection to inform users which appointment types are available. (See also: Design Recommendations for Finding 2).
2. Provide information on any planned additions to the available appointment types.
3. Direct users looking for other appointment types to secure messenger or the facility locator to schedule by phone.

Finding 8 - Cancel / Reschedule

“Click on that. Cancel request. Yes. Status cancelled. Ok that was pretty easy.” - P5, Susan

“And I think also the assumption I would have b/c we were in screen for VA appointments. I would recognize schedule an appointment would be the same place I would go to cancel. I would be looking on the home page for canceling an appointment.” - P6, Lon

“How do I do that? From here? from this screen? Cancel request. Yes, I want to cancel it. Will you do it, that’s another thing?” - P1, Deborah

“Um. Clearer where it’s on the appointment and it has two buttons, where one is to cancel and the other to reschedule real obvious. That’s my suggestion.” - P3, Carol

Design Recommendations:

Finding 8

Several users requested the ability to reschedule an appointment as an alternative to cancelling.

1. Add “cancel” and “reschedule” features to each appointment listed on the homepage.
2. “Reschedule” feature should pull up the appointment / request with the same details pre-populated and the date / time fields defaulted to blank. Submission should automatically cancel the rescheduled appointment / request.

Additional Quotes

“When you do stuff like this where you can request apt online, it’s a big step toward a positive improvement where younger or more middle aged people will be inclined to do stuff online because it shows caring for the veteran.” - P3, Carol

“The following errors were found. [No time selected] I thought I did that. [scrolls down to date time] Ok. That seems weird b/c there was only one in there. [sigh]. Ok, so I’m not sure how I’m supposed to select this. That time seems fine for me. That’s the only time that shows up. Date/time field is required, where is that?” - P5, Susan

“Surprising only in the ease and efficiency” - P1, Deborah

Additional Design Recommendations

Other design notes on appointment scheduling form:

- On the desktop version, the appointment type and PACT team appear to the right of the other fields. Align all to the left column, under each other.
- When a user selects a date in self-scheduling, and only one time is available, it is not visually apparent that the user needs to take an action to select the time. Revisit the time display and add helper text to instruct .
- When the calendar opens on desktop, the screen does not adjust position, often the calendar extends below the screen frame. Adjust the scroll position when opening the calendar.

Next Steps

1. Several findings from this study are problems caused by factors outside of the online scheduling tool technical team's direct control. (For example: Finding 4). Conduct additional analysis using the available metrics to determine which might be a priority.
2. This study provided insight into several large drops previously observed in the Google Analytics funnel analysis for the self-schedule and request forms. See Google Analytics funnel analysis for more details.
3. Many users attempting to self-schedule naturally ended with an appointment request due to clinic and appointment type availability. This warrants further discussion about the near-term uses of the this tool.
4. Future updates to VA Online Scheduling's user experience should focus on the design recommendations mentioned in deck.



DIGITAL SERVICE at VA

Thank you