# VA.gov CMS research for the Authoring Experience (AX)

Round 2 Pittsburgh, PA

Prepared by the VA.gov CMS Team

[Research: June 25-27. Presentation: July 16]

### **Outline**

- 1. Intro
- 2. Study goals and research methods
- 3. Context
- 4. Findings
- 5. Next steps

This research examines the effectiveness of the Drupal AX (authoring experience) — in short, how easy it is for VA content authors and editors to use the Drupal CMS.

April 2018

## 1. Intro

### **Executive summary**

- In-person research consisting of mixed methodology (task-based, contextual inquiry, paraphrase testing) with 8 Public Affairs team members at the Heinz campus of Pittsburgh VA Medical Center evaluating the effectiveness and usability of the current Drupal CMS authoring experience for immediate usability and long-term workflow improvements.
- Evaluate and compare the author experience
  - (1) using the current Drupal CMS to find, edit, review and publish content and
  - (2) using an Invision (facility dashboard) prototype as a proof-of-concept. An ancillary goal was to gather feedback from the Public Affairs team on types of CMS-related resources needed to efficiently onboard to Drupal CMS.
- We found that participants felt the new Drupal CMS was more efficient and easier to use, preferred aspects of the Invision prototype noting its clear summary and wayfinding to key content and actions and expressed enthusiasm for a variety of in-CMS help resources.
- Regional and facility content distinctions weren't meaningful to participants and may conflict with established concepts of organization division.

### Background

Research: Drupal CMS product

**Team:** Ryan, Kate, Rachel, Lapedra, Meghana, Jane, (Eric)

### Interviewees:

 8 Public Affairs team members at the Heinz campus of Pittsburgh VA Medical Center

### Methods:

- Task-based usability testing
- Paraphrase testing
- Contextual inquiry

Intro

## What the team learned 💓

Our goal was to empathize with the content editors by allowing them a space to share their current feelings and emotions.

### Biggest content frustration

The current editorial workflow can be a slow process due to the team's workload and technical limitations of current technologies. This creates a bottleneck at various stages and, at the high end, a 2-3-month backlog.

### Top priority

Relatably, the team's top priorities are efficiency and speed, especially in high-pressure or quick-turnaround situations such as adding weather-related alerts (e.g., hurricane in Florida).

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## 2. Study goals and research methods

#### Goals and methods

### Our goals

### For the Authoring experience (this study)

- Evaluate the usability of the editorial workflow (create, review, edit, and publish content) within the Drupal CMS.
- Gather feedback on the types of CMS-related resources the VA team needs to become more comfortable using Drupal.

### For the Veteran facilities webpage experience (readout was on July 12)

- Evaluate perceived utility of wait time and appointment access data for decision making about care.
- Evaluate comprehension of labels and global navigation.
- Gather additional feedback to make our designs more usable.

#### Goals and methods

### Our approach

We wanted to understand the user experience of the external-facing VA.gov (the front stage) and the internal VA-facing CMS (the backstage) from multiple, discrete user perspectives.

This is important because the usability on the backstage directly impacts the quality of the front-stage experience.

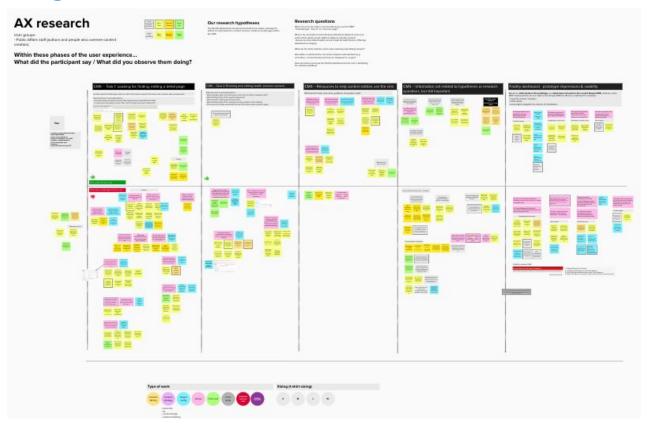
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#### Goals and methods

## Hypotheses

Hypothesis	What we asked or observed	General finding
H1: The editorial workflow needs to be improved so that editors can easily find and edit pages within the CMS.	Activity: Find a page (detail & service) and make an edit to the content using the Drupal CMS and a prototype.  Addressing:  1. usability of searching for and editing a page using the CMS; validating ideas for improvement from the prototype.  2. usability of searching for and editing multiple pages to edit a service description.	Supported
H2: Editors need resources (inline help, training sessions or materials) to use the new CMS comfortably and confidently.	We asked participants what kind of support they would need, and what has worked well for them in the past.	Supported

### How we got here

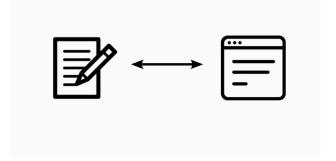


## 3. Context

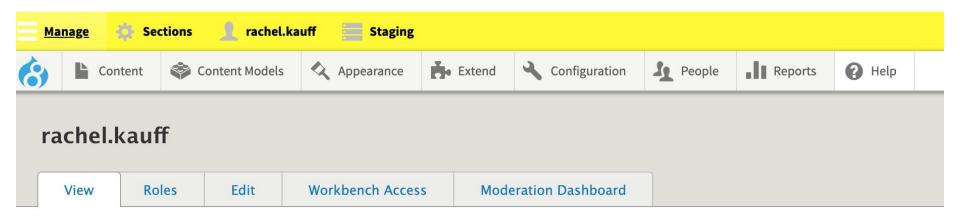
### Current CMS structure

Maps in a more or less 1:1 relationship with front end: there is a field on the back end for every page that appears on the front end.

#### **Teamsite**



### Navigation in the Drupal CMS (Manage menu)



Home

Member for 4 months 1 week

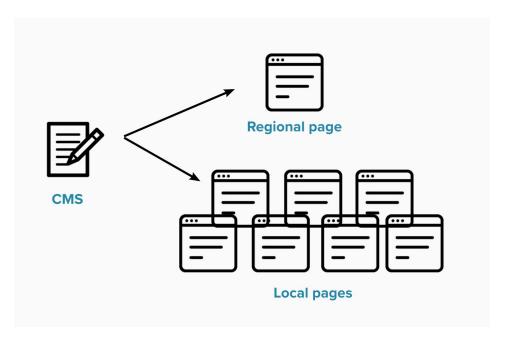
### Navigation in the prototype (Sections menu)



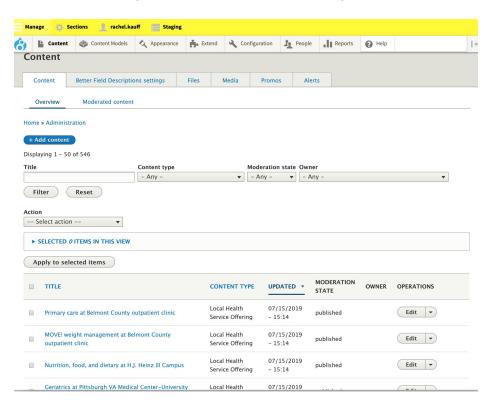
### New CMS structure

An edit to a single piece of structured content in a CMS field, such as a regional health service offering, appears on multiple pages in the front end.

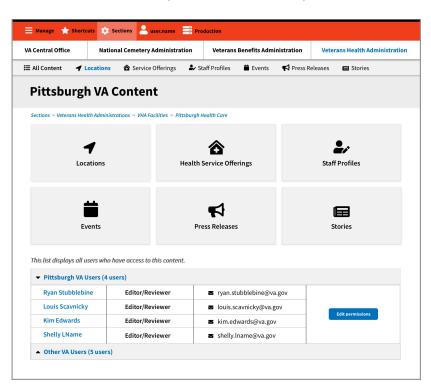
### Drupal CMS



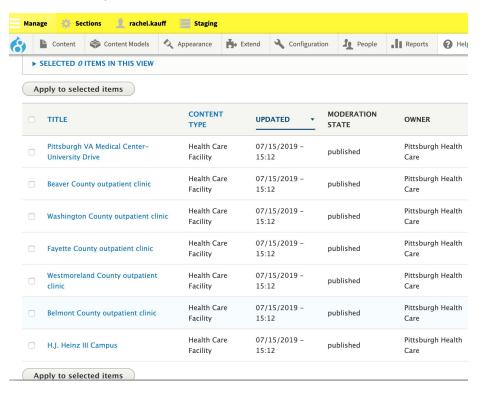
### Drupal CMS landing page



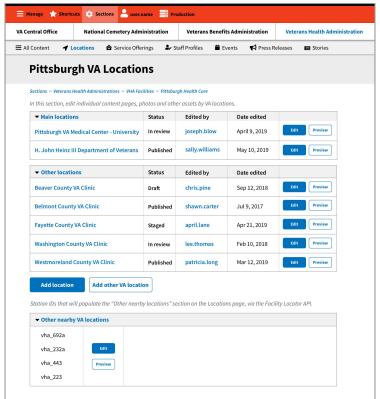
### Prototype landing page



### Drupal CMS locations (filtered)



### Prototype locations page



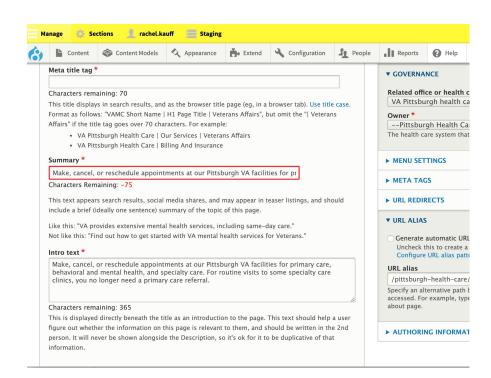
## 4. Findings

### Findings - CMS

Content editors were afraid to make any changes fearing that they might "mess things up."

#### So what?

Interfaces that are harder for new users to learn could lead to errors that negatively impact user experience for Veterans on the front end.



A section of the Edit page

Findings - CMS

"I found it difficult that the WYSIWYG section had a dual function: I could rearrange the sections, which I feel like I would do by accident, I could also make edits." - Public Affairs (writer/editor)

"The text is hard... It all seems to all run together. The headers are not distinct" - Public Affairs (writer/editor)

### We recommend

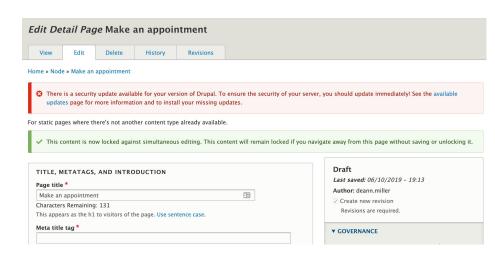
- Making design changes to forms to improve information hierarchy.
- Moving key task buttons like "preview" to a places where editors expect to find them.
- Using Drupal-editor-friendly language in addition to plain language within labels.
- Applying commonly used colors to global UI elements (e.g., alerts).

### Findings - CMS

Content editors were able to find and edit pages using the current CMS, but had difficulty locating that content quickly and with confidence.

#### So what?

Confusing or tedious navigation takes time away from content editors' work in other areas.



A section of the Edit detail page

Findings - CMS

"I can filter in a million ways -- I'm not sure [where to find it]." - Public Affairs (writer/editor)

"My last resort is to use the search feature. There should be another way to do it." - Public Affairs (writer/editor)

### We recommend

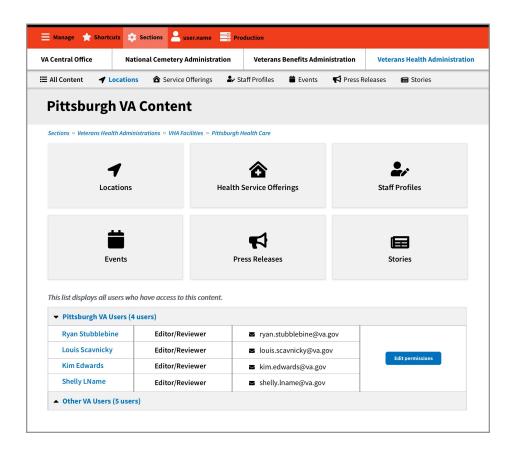
- Reducing the effort required to navigate to facilities content from the top menu.
- Presenting content in categorized way rather than unordered lists on content landing page.
- Implementing changes proposed in the facility dashboard prototype. (Findings in next slide)

### Findings - dashboard prototype

Content editors preferred the prototype's layout and design, especially the additional of color which helps differentiate between design components.

#### So what?

Improving hierarchy and adding color to buttons improves wayfinding and increases efficiency when finding and editing pages.



### Findings - Facility Dashboard prototype

"Once you're here, and familiar with it, [it is] well laid out" - Public Affairs (writer/editor)

"The page was not as busy as the other (Drupal CMS) page." - Public Affairs

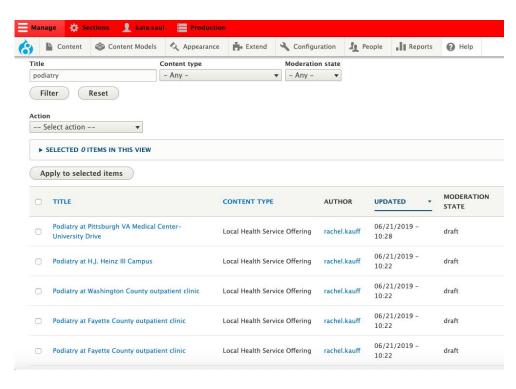
### We recommend

- Apply color to links and buttons in the CMS.
- Integrate better content hierarchy within the edit page and color to differentiate between other design elements.
- Filter and organize content in a meaningful way (e.g., grouping similar content types together).

Regional and facility content distinctions aren't meaningful to users and may conflict with established concepts of organizational division.

#### So what?

This confusion could result in the creation and entry of inaccurate content, negatively impacting the front-stage experience.



Services at various VA facilities (filtered - podiatry)

"'Related healthcare office or region...' — that seems a little confusing." - Public Affairs participant

"I feel like that "regional" word is going to trip a lot of people up. VBA offices, their Pittsburgh office is a regional office." - Public Affairs participant

### We recommend

- Finding terminology for regional and facility labels that more accurately reflects VA's organizational structure.
- Providing an annotated diagram of health services content in the CMS for additional guidance.

Establishing consistency of language between the front stage and the back stage is important. Content authors felt that the word "offering" didn't map to how they think about health services.

So what?

Using consistent language can create clarity for authors, ultimately resulting in a better front-stage experience for Veterans.

Current label used by CMS team to describe content structure	Relationship to VA Organizational structure
National health service offering	Standardized health service names established by <b>VHA</b>
Regional health service offering	Health service available at a <b>health care system</b>
Local health service offering	Health service available at a specific <b>facility</b>

"If we call it *services* on the website, we should call it that on the CMS." - Content editor

"Offering sounds religious." - Content editor

"Health services offerings seems a little vague as a category." - Public Affairs participant (webmaster)

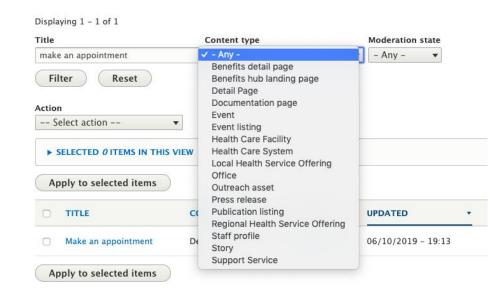
### We recommend

- Changing the content type label from "Offering" to "Service" to promote greater consistency between the backstage and the front stage.
- Comparing terminology on the front end to see how it compares to that on the back end and finding areas of overlap/ways to reflect front-end language in the authoring experience.

Participants weren't immediately comfortable using the content types to locate content in the CMS.

#### So what?

Discomfort using the content types drop-down could result in inefficiency, mitigating the positive effects of an updated editorial workflow.



Filter component on landing page

"There should be another way to do it [find content by type]." - Content editor

"So, I think I'd go to...(user hesitates). I don't know." -Public Affairs (outreach specialist)

### We recommend

- Exploring the option of offering categorized lists of content on the content landing page. These lists could reflect how content is broken down on the prototype landing page (health services, locations, and so on).
- Providing instruction on how to search for pages in Drupal using URL snippets.

For initial CMS training,
participants prefer in-person
instruction to written or online
instruction.

#### So what?

Participants emphasized that hands-on training could help them learn the CMS more quickly and more effectively retain knowledge, helping them get up and running faster.

"I learn [best] by poking around and getting hands on [experience]." - Public affairs participant (webmaster)

"[It's] better to be shown than to get a booklet that says 'This is how you do it.'" - Writer/editor

### We recommend

 Offering interactive, in-person training to help content authors/editors and Public Affairs staff become comfortable using the CMS.

Participants expressed enthusiasm for continued CMS training and help options, including in-CMS support and points of contact to answer questions.

#### So what?

Providing authors and editors with resources they need to develop their CMS knowledge (and quickly get their questions answered) will help authors maintain strong velocity and increase their comfort with the authoring experience.

#### Intro text \*

Make, cancel, or reschedule appointments at our Pittsburgh VA facilities for primary care, behavioral and mental health, and specialty care. For routine visits to some specialty care clinics, you no longer need a primary care referral.

#### Characters remaining: 365

This is displayed directly beneath the title as an introduction to the page. This text should help a user figure out whether the information on this page is relevant to them, and should be written in the 2nd person. It will never be shown alongside the Description, so it's ok for it to be duplicative of that information.

#### Help text on the Edit page

### We recommend

- Reviewing the current in-CMS help text and editing it to make it as clear as possible.
- Assessing whether/where to add more help text (possibly based on additional rounds of research).
- Providing an annotated diagram of health services content in the CMS for additional guidance.
- Providing a consistent place on every page that has contact information for people who can answer CMS-related questions in real time.

Valuable insights in addition to ones related to our hypotheses

- Writers, editors, and Public Affairs officials at VA voiced enthusiasm for a streamlined editorial review and approval process.
- Overall, research participants felt the new CMS was more efficient and easier to use than the current system.
- For longer-term success (and to account for inherent personnel churn), the CMS needs to be usable for both infrequent/less familiar users and power users alike.
- As we continue to refine the authoring experience, we need to apply the same accessibility standards to the backstage as we do to the front end.

## 5. Next steps

### What we're doing next

- Working with Product Owners to establish design and development work
- Socialize this research with DSVA

## Thank you!

Contact with questions:
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