VA | U.S. Department of Veterans Affairs

# Check-in MVP Usability

## Discovery Readout

**Kristen McConnell**
kristen.mcconnell@adhocteam.us

Updated: July 7, 2021

# Background & Goals

# Background

This product is reimagining the ecosystem that allows a Veteran to check-in for a medical appointment. One portion of the ecosystem enables Veterans to utilize their mobile device to check-in (letting the VA know that they have arrived for their appointment) via va.gov.

With this round of research, we are looking to test the usability and design of the proposed check-in MVP.

# Research questions

- Do Veterans understand how to check-in via their mobile device?
- How do Veterans feel about the proposed check-in solution, particularly the multiple modalities utilized (text, then website)?
- What appointment information are Veterans expecting to review, in order to complete check-in?
- Once check-in is complete, do Veterans understand what will happen/what they should do next, or how to get help if they are having trouble checking in?

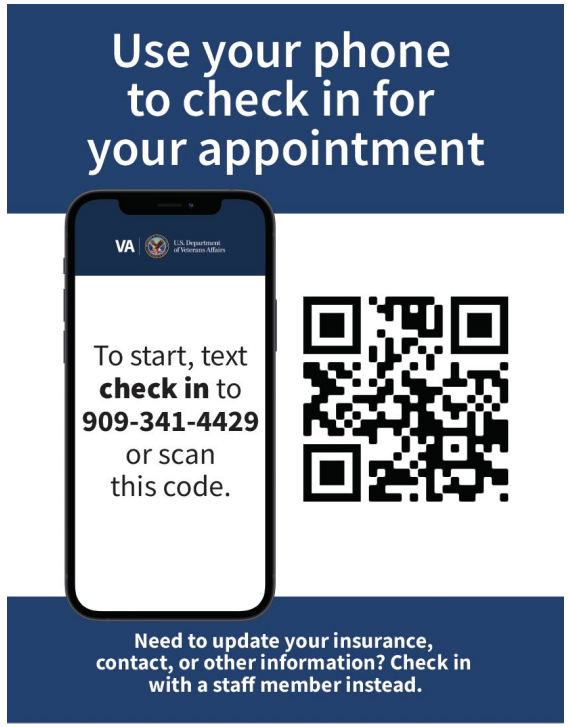
# Hypotheses to be tested

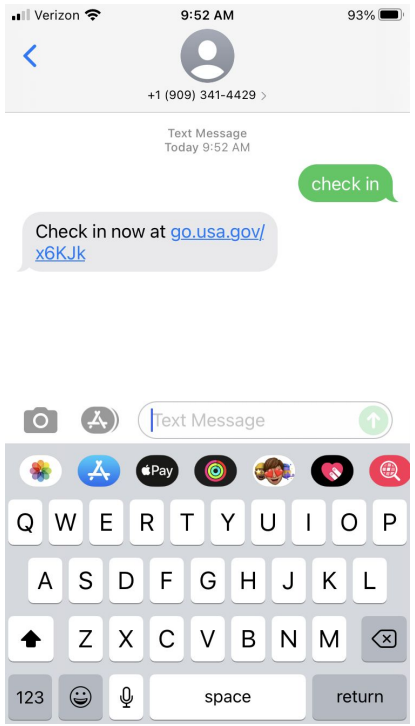
- Veterans will be able to complete check-in on their mobile device.
- Due to our authentication method, Veterans will have no problems jumping from text to website to complete check-in.
- Since Veterans are at the VA facility, they only need a few pieces of appointment information during the check-in process.
- Veterans will have enough information to know what to do next or where to go if they do have questions.

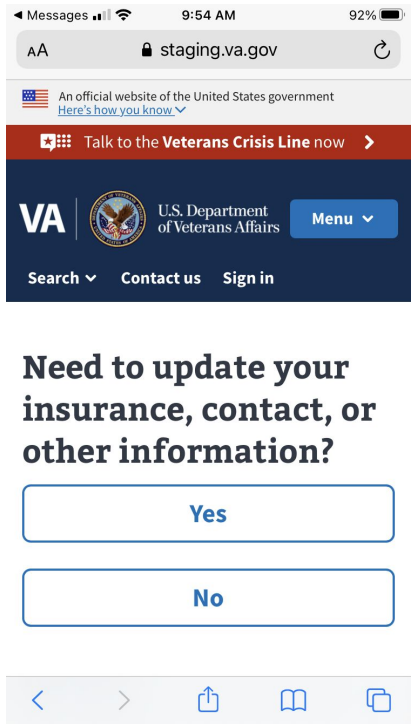
# Methodology

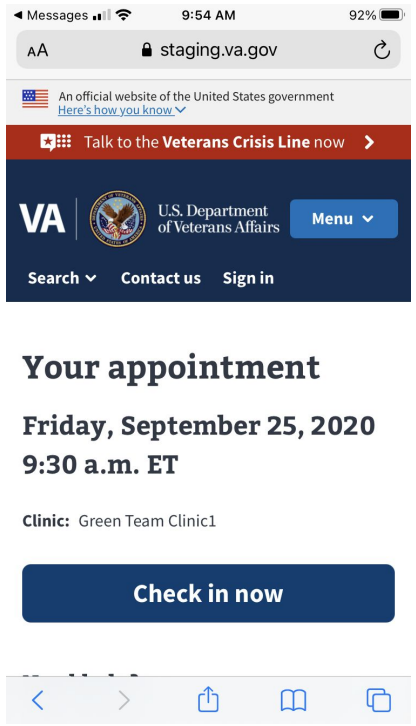
# Method and detailed research questions

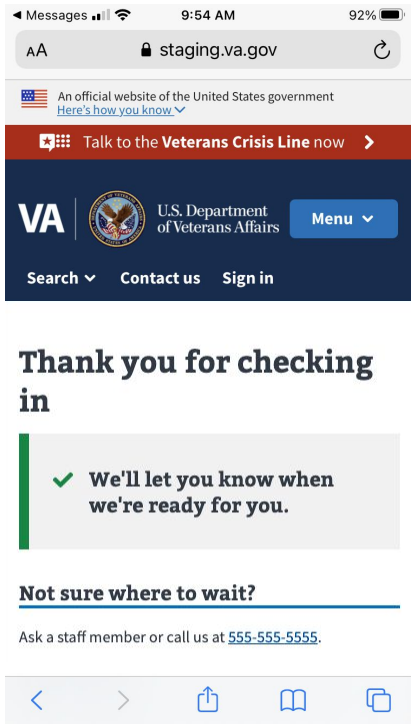
We conducted 10 remote moderated usability tests (using a poster, Twilio, and staging) via Zoom utilizing the Perigean contract. The complete conversation guide with all the detailed research questions asked can be found on the [VA's GitHUB](#).



# Who we spoke with: 10 Veterans

Gender

**Male: 3**

**Female: 7**

Age

**25-34: 1**

**35 - 44: 4**

**45-54: 1**

**55-64: 2**

**65-74: 1**

**Unknown: 1**

Education

**Unknown: 0**

**Some college: 1**

**Associate's: 2**

**Bachelor's: 3**

**Master's: 4**

Mobile device

**iPhone: 8**

**Android: 1**

**Unknown: 1**

Pre-COVID check-in methods

- **Usually check-in with staff members: 7**
- **Utilized kiosks when they were available: 4**

*One participant said they used both staff members and kiosks equally.*

# Research Findings

# Key Findings

1. Current check-in pain points include:
    a. long lines or wait times to complete check-in
    b. being redirected to staff when utilizing a kiosk
    c. thinking you are checked in when you aren't.
2. The proposed MVP simplifies check-in, streamlines the experience, and helps with wait times.
3. Other non-digital check-in solutions still need to exist.
4. Fifty percent (5) of participants are concerned that only their phone number is used for identity verification.
5. Cell reception and WiFi's impact on this product is a concern for Veterans.
6. Participants used both the QR code and text options.

# Key Findings

7. Participants want more clarification on who the text message is coming from.
8. The insurance and contact information question was unexpected after clicking the URL in the text, especially without the ability to actually update them online.
9. The appointment information shown was sufficient for participants to understand what appointment they were checking in for.
10. Participants were confused and wanted more information about what to do next after checking in.
11. Fifty percent (5) of participants assumed they would complete this check-in process at the clinic of their appointment.
12. Participants want travel mileage functionality added to the check-in workflow.
13. Participants used the term “check-in” to describe this online experience.

# Current check-in pain points include:

- long lines or wait times to complete check-in
- being redirected to staff when utilizing a kiosk
- thinking you are checked in when you aren't.

The stories shared and paint points discussed about past check-in experiences support what we heard during initial discovery as well.

# The proposed MVP simplifies check-in, streamlines the experience, and helps with wait times.

What Veterans said about the experience:

- *“It seems pretty simple.”*
- *“Smooth and easy.”*
- *“It’s relatively simple, sometimes these things can get overly complicated, but this doesn’t take more than a 10-year-old to figure it out.”*

- 4 participants think this will help with long lines/wait times.
- Participants had no problem moving from poster to text to va.gov.

# Other non-digital check-in solutions still need to exist.

- After seeing the prototype, 4 participant still prefer other methods, mostly checking in with a staff member.
- Some participants wanted to make sure that non-tech savvy Veterans  would still be able to check-in.

# Fifty percent (5) of participants are concerned that only their phone number is used for identity verification.

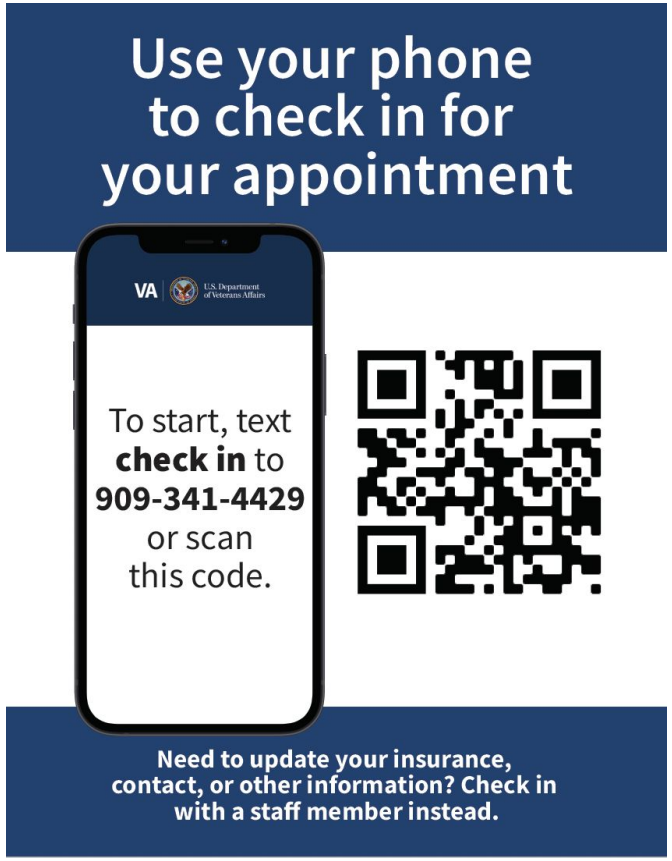
- *“The only thing that I would change out of the entire process is another level of security. I like the check-in, but I would like to be identified by something other than just my phone number like the last 4 of my SSN or something. That makes me a little bit leary otherwise.”*

- 3 participants wanted to also use the last 4 digits of their social security number to verify identity.
- 1 participant mentioned wanting to scan their VHIC card digitally to check-in.

# Cell reception and WiFi's impact on this product is a concern for Veterans.

- 4 participants mentioned concerns with the connectivity at their VA location and it possibly blocking their ability to use this product.

# Participants used both the QR code and text options.

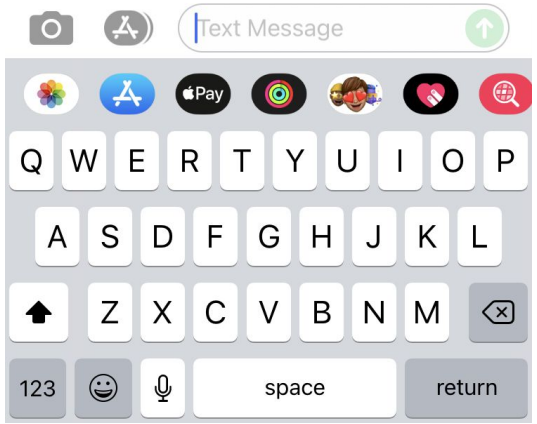



- Participants, who screen shared on their mobile phone, mentioned a preference for:
  - QR code: 4
  - Text: 1
- Participants, who utilized the laptop hugging method, used:
  - QR code: 3
  - Text: 2

**Additional poster changes:**

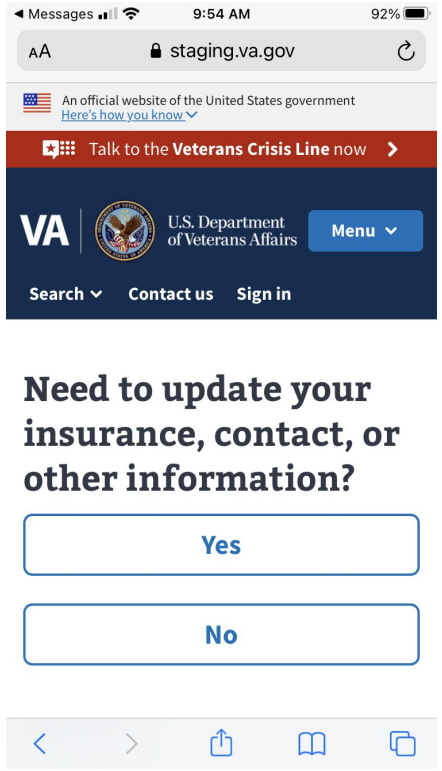
- 1 participant, who works with Veterans, thought we should let everyone know that data charges may apply.
- 1 participant wanted the insurance/contact information wording to be more visible.

# Participants want more clarification on who the text message is coming from.

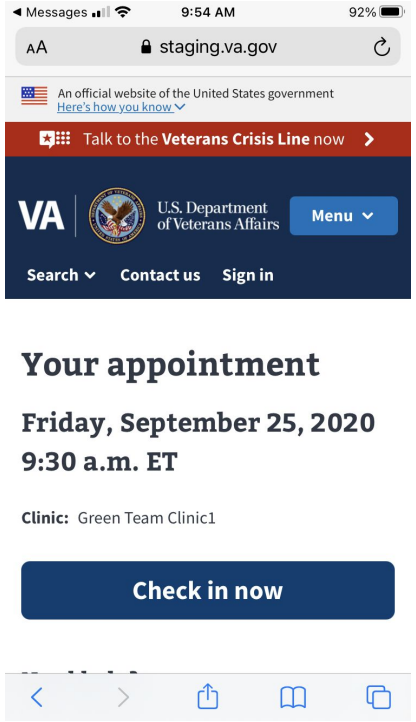

- 2 participants wanted the message to look more like it was coming from the VA.

# The insurance and contact information question was unexpected after clicking the URL in the text, especially without the ability to actually update them online.




- 4 participants weren't expecting to see this page.
  - Some expected to just see appointment information after clicking the URL in the text.
  - However, this unexpectedness didn't impact overall usability; everyone successfully and easily completed check-in.
- 50% of participants want the ability to update contact and insurance information online.

# The appointment information shown was sufficient for participants to understand what appointment they were checking in for.

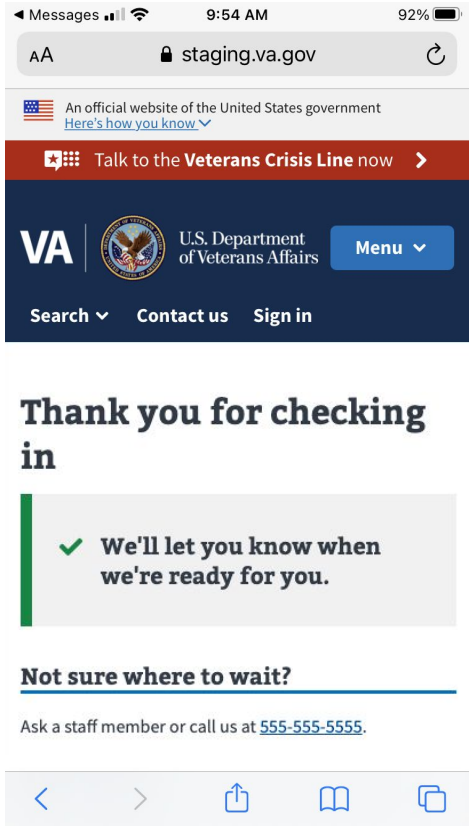



While the information displayed was sufficient, participants suggested content changes:

- Add provider name (2 participants)
- Add medical specialty, such as Primary care (2 participants)
- Clinic name is too small (1 participant with TBI)
- Clinic names need to be understandable (1 participant)

Research Findings

# Participants were confused and wanted more information about what to do next after checking in.




- Fifty percent (5 participants) weren't sure what to do next or assumed they would receive a message when the office was ready.
- Fifty percent would sit in the clinic waiting room and wait for a nurse to call them.
- 4 participants wanted more information on next steps, such as whether the nurse will come to get them or what floor they should go to.
- 3 participants wanted to see wait time information.

# Fifty percent (5) of participants assumed they would complete this check-in process at the clinic of their appointment.

- 3 participants assume you completed check-in in the main lobby of the facility.
- The rest assumed they would complete this outside the facility.

# Participants want travel mileage functionality added to the check-in workflow.

- Without prompting, 3 participants requested that travel mileage be added to this check-in product.

# Participants used the term “check-in” to describe this online experience.

- 8 participants would call this “check-in.”
- *“‘Check-in’ is basic English and it is used almost no matter where you go, especially if it is for an appointment. I don’t know of any other word(s) I would use.”*

# Recommendations and Next Steps

# Recommendations and Next Steps

**Short-term changes for the Healthcare Experience team**

- Test with Android devices, since we only spoke with one Android user.
- Check on the WiFi and cell connectivity at our pilot sites.
- Add information about data charges to the poster.
- Update the poster, so the contact and insurance wording is more visible.
- Make the clinic name more visible on the appointment page.
- Add content to the check-in confirmation screen to help clarify that the nurse will get them from the clinic waiting room.
- Work with change management/facility onboarding group to educate the facilities to hang the posters near the actual clinics and not in the main lobbies (in the larger facilities).

# Recommendations and Next Steps

**Short-term changes for the Integration/VeText team**

- Add content to the text message stating it is from the VA.

**Longer-term recommendations**

- Depending upon adoption rates, we could look into VHIC card scanning capabilities.
- Look into adding:
  - another identification data point.
  - wait time and detailed way-finding information, such as what floor the appointment is on.
  - travel mileage capabilities.