



Secure Messaging Discovery Sprint

Kickoff

Product

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UX

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Goals for this meeting

- As a group, get alignment on:
 - Our assumptions and scope
 - The outcomes, outputs, and activities planned for discovery
 - How we hope to work together
- Clarify the problem we intend to solve and how we can measure success with the outcome of a shared understanding of why secure message (for mobile and va.gov) is important

Agenda

1. Intros + Quick warm up
2. Alignment on project goals + activities (30 mins)
 - Review assumptions
 - Highlight initial research findings
 - Discovery activities overview
3. Problem Discovery Workshop (40 mins)
4. Next Steps

Team Structure

Team

Sprint Team

- Ashley Matthews, Product
- Jen Ecker, UX/Design

Will be hiring 3 additional engineers + 1 designer

Advisory Team

- Ambika Roos, Product
- Alex Taylor, UX/Design
- Patrick Vinograd, Engineering

VA Stakeholders

- Leanna Miller, Product Owner
- Aryeh Jacobsohn, Product
- Emily Mann, Research
- Meg Peters, IA
- MHV partners TBD

Quick Warm Up

Emoji Movie Challenge

Guess the Movie



Guess the Movie



Guess the Movie



Guess the Movie



Background + Assumptions

Background

- Digital modernization at VA operates on the principle that Veterans should not need to understand the relationships between various VA web properties, and that VA.gov should be a single front door that allow Veterans to easily find the tools and information they need.
- Secure messaging is a highly utilized health tool on MHV. This team wants to understand what opportunities exist to improve the secure messaging experience beyond including the feature in an MVP mobile app release.

Assumptions

- Messaging is a core way Veterans interact with their healthcare and deserves continued investment and improvement.
- Initial research has shown that Veterans are loyal to the MyHealtheVet brand, and are generally happy with the existing secure messaging tool.
- Our team's work will be centered on the Veteran-facing experience, while considering the impact to the provider and administrator portals as much as possible.
- Discovery will center around the Veteran-clinician use case as it currently exists on MHV. Other messaging use cases at VA will inform our technical approach.

How might we modernize secure messaging, improving the UX and technical backend, while still preserving the trust Veterans have in the tool?

Overlap with VA mobile app

We envision productive overlap between this secure messaging team and the flagship app team as they work in parallel:

- Our technical discovery will assist the flagship mobile team to determine whether it is feasible to implement a V1 secure messaging experience for the MVP launch based on the existing APIs built in vets-api
- We will determine the best UX and technical approach to broadly modernize secure messaging. These learnings (in addition to V1 app usage data) will feed back into a V2 secure messaging experience for mobile.

Research Findings

Health Research Initial Findings

Secure Messaging

- Secure Messaging is trusted, preferred, and often the primary method for veterans and caregivers to communicate with their care team other than in-person visits. It is viewed as the best way to get in touch with doctors directly, even though messages will get triaged first.
- Secure Messaging supports other core tasks on MHV, such as prescription refills, scheduling appointments, and ordering medical equipment.
- Secure Messaging was indicated as being beneficial as a record of communication. Particularly for those with memory/cognitive concerns, and for veterans and caregivers co-managing communications. Was also preferable over phone calls for veterans with hearing issues.
- Sense of veteran/caregiver initiated communications that required being proactive.
- Caregivers have their own workflows with Secure Messaging.

Health Research Initial Findings

MHV Brand

- My HealtheVet (MHV) had high name recognition, satisfaction, and trust among participants. Participants called it by name or used variations of “healthvet, healthy vet, ehealth vet” for internet searches as opposed to terms like “VA health care”.

Switching between VA.gov and MHV

- Participants didn’t have strong workflows on VA.gov because they don’t use VA.gov to manage health. MHV lets them complete all their health tasks in one location.
- Veterans and caregivers do not use the secure sign-in partner options on MHV and as a result they experienced issues when they went outside of MHV to do tasks.

Discovery Plans

Technical discovery roadmap

- Secure messaging architecture deep dive (current state)
Identify and map onto architecture decisions:
 - Key constraints (HIPAA, FISMA, Privacy Act, etc)
 - Integration touchpoints (VistA/CPRS, Blue Button, etc)
- Non-health use case shallow dive
 - Identify 3-4 non-health messaging use cases
 - Compare/contrast likely requirements around things like retention, recipient groups, internal interfaces
 - Enough detail to inform an API design that won't paint us into a corner
- Survey of industry messaging APIs (both health and non-health focused)
 - Inform API design/best practices
 - With an eye out for any potential enabling technologies (buy vs. build)

Schedule – Week 1

Week	Guiding Question	Activities	Output	Outcome
Week 1	<p>What is the existing secure messaging experience like?</p> <p>How should secure messaging be built for V1 mobile?</p>	<ol style="list-style-type: none">1. Kickoff meeting2. Explore MHV test accounts + documentation3. Existing state UX heuristic analysis4. Technical discussions w/ vets.gov secure messaging team and VAOS team5. Continue to test the API endpoints in vets-api in collaboration with MHV team to assess level of effort if repair is needed	<p>Initial problem statement</p> <p>Updated existing state documentation w/ UX analysis</p> <p>Service Blueprint (assuming MHV SME access)</p>	<p>Our team has a foundational understanding of how secure messaging works from a veteran and technical perspective.</p> <p>Recommendations on how secure messaging could be built within the mobile app</p>

Schedule – Week 2

Week	Guiding Question	Activities	Output	Outcome
Week 2	What is the existing secure messaging experience like? (continued)	<ol style="list-style-type: none">1. Collect existing usage data from google analytics + call center data2. Third party/private sector messaging research3. Existing state architecture deep dive	<p>Third Party Research report</p> <p>User data summary</p> <p>Existing state architecture overview</p>	Alignment on the opportunities and challenges in re-imagining secure messaging for Veterans and VA

Schedule – Week 3 + 4

Week	Guiding Question	Activities	Output	Outcome
Week 3 + Week 4	What are the opportunities we improve upon within a new secure messaging experience?	1. User research with Veterans on existing secure messaging tool	Refined problem statement + opportunities User research synthesis	Consensus on the outcomes a new secure messaging experience should achieve would improve and how they would be measured Improved understanding of Veteran pain points with existing MHV

Phase 2

Week(s)	Guiding Question	Activities	Output	Outcome
TBD	What are the core features a new secure messaging experience should have?	<ol style="list-style-type: none">1. User research with Veterans, clinicians and administrators to determine feature desirability2. Feature Brainstorming + Prioritization	User Research Report Feature roadmap	Consensus on the feature set for an updated secure messaging experience
	How should a modern secure messaging system be built?	<ol style="list-style-type: none">1. Existing state architecture deep dive2. Non-health use case shallow dive3. Survey of industry messaging APIs	Technical findings and recommendations	Consensus on the technical approach modernizing secure messaging

Dependencies

What do we need from you?

- Test accounts to view the clinician and administrator views
- Access to MHV stakeholders
 - Architecture overview + deep dive of current SM system from knowledgeable senior MHV architects/engineers
- Access to MHV development environment and code repositories to support development and architecture planning
- Access to MHV analytics
 - And support to run ad hoc database queries against MHV to derive aggregate feature usage data

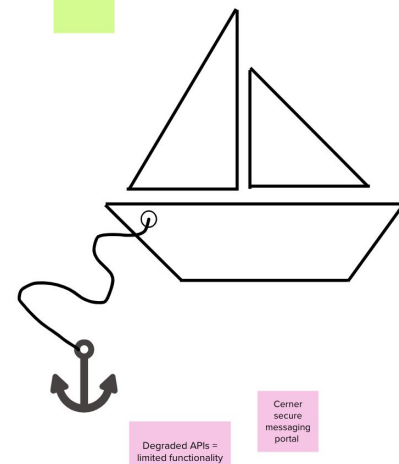
Problem Discovery

Problem Discovery/Framing

[Problem framing workspace - link to Mural](#)

Structure	WHO is experiencing the problem?	WHAT is it about?	WHEN is it happening? (context)	WHY is it important to solve?	OUTCOME anticipated
	Veterans	have to interact with different VA websites	when completing different, but similar tasks	It's annoying and forces Veterans to learn the organizational nuances of VA	More VA able to access
	Veterans	have high trust and usability in MHF secure messaging, and low recognition for secure	because SM on MHF works relatively well	A new secure experience should maintain the things Veterans like about the MHF experience	Increase loyalty satisfaction
	Veterans	sometimes have long wait times	when communicating with their healthcare team via secure messaging	Response times can build/displace trust in the tool	Faster times to reply
	Veterans	have to be consistently proactive	to stay on top of communications and ensure they are getting answers to their questions	Veterans may feel like their needs won't be addressed unless they drive the process	The new solution doesn't have to
	Veterans	aren't clear on who sees their messages once it's sent to the healthcare team	because providers have "finger" issues that hinder routing their messages internally	Lack of transparency may make Veterans hesitant to send messages	Veterans control of their data is going to
VA Organization	has to maintain a complex web of digital services	that makes it difficult to iterate and improve digital services efficiently	Creates friction and complexity in the overall Veteran experience	Increases efficiency	

Opportunities
Positive aspects
propelling us forward



Challenges
Problems holding us back and
potential future threats

Next Steps

Where do we go from here?

- Sprint Cadence
 - Daily standups
- VA Touchpoints
 - Weekly update meetings
 - Who should be apart of these conversations?