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Office of Community Care (OCC) Veteran Portal

**Design and Testing Plan**

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# Purpose

The *Office of Community Care Portal Research Plan* is authored by the Human-centered Design (HCD) team to describe the research methods suggested to uncover insights for designing an optimized user experience.

This research plan reviews business needs and defines goals, objectives, research questions, and research activities. This document does not provide insight, but rather, the steps required to create optimal insights within the given time constraints.

# Overview and Background

The VA Office of Community Care (OCC) Portal seeks to provide users with easy access to information and the ability to perform certain self-servicing actions related to community care. The Portal will be internal and external to the VA. While users include Veterans, caregivers, beneficiaries, and VA employees, the HCD team’s goal is to design a seamless Veteran experience while thoughtfully incorporating accommodations for other users.

#### Former research provided the following insights:

* Both Veterans and Staff are looking for improved communication and coordination.
* VA staff and Veterans both want to set expectations for the community care process, so that Veterans know when something is wrong and can reach out accordingly.
* VA staff would like to be able to find the information they need quickly and easily to solve an issue or answer a question.
* Challenges arise when VA staff and Veterans do not have easy access to the right information or contact.

This phase of user testing will uncover new insights related to designing and implementing an OCC Portal that alleviates user pain points uncovered in past research. The HCD team will synthesize findings and develop a research insights report, as well as a clickable prototype to demonstrate Portal features and capabilities.

## Business Case

*This portal will…*

* Give Veterans and beneficiaries a direct contact that knows their consult history to reduce confusion and the need to transfer calls.
* Enable Veterans and beneficiaries to track, add, and release medical history to their community care providers as needed so they can help support when their provider is underinformed.
* Create seamless communications between community providers, VA providers, pharmacists, and Veterans and beneficiaries to triage when challenges arise.
* Allow Veterans and beneficiaries to access their billing history and billing support.

## Project Value

*This portal will…*

* Expose key guideposts in the community care process to enable Veterans and beneficiaries to track the status of their…
  + consults
  + authorizations and referrals
  + status of submitted requests for new referrals
  + scheduled appointments
  + claims status
  + 72-hour notification for emergency care
* Enable Veterans and beneficiaries to find answers to commonly asked questions and notify the appropriate contact when additional questions or concerns arise.
* Connect VA staff to important Veteran and beneficiary information without needing to log on to multiple platforms.
* Create a common reference for VA staff, Veterans and beneficiaries to have helpful conversations on how to access care more seamlessly.

## Project Scope Statement

Improve the Veteran and beneficiary experience accessing care outside of VHA by integrating community care data and related functionality into VA.gov. The research will focus on centralizing available tools and integrating personalized community care information prioritizing scheduling, authorizations, billing, and communication. Research insights will inform the following objectives:

* Understand user expectations for communication and access of community care related tasks and information.
* Determine which self-service capabilities and information are most crucial to implement in the portal in a phased approach.

# Research Approach

HCD best practices will be leveraged throughout user testing. The HCD team will design an assortment of activities described below, with a series of prompts. In lieu of a clickable prototype, the first round of testing will be medium fidelity to ensure iterative improvements can be made prior to designing and testing a high-fidelity solution.

## Research Activities

* **Card Sorting:** A method for collecting the expectations of users and measuring their understanding of topics presented to them. This form of research can be particularly useful when developing and evaluating information architecture or prioritizing information.
* **Co-Design:** A method that invites users to actively participate in the design process by giving them tools to help create a new product or service based on their individual needs. This research effort will provide ready-made modules for users to choose from as they build their ideal portal interface from top to bottom.
* **A/B Testing:** A method that involves creating two different versions of one piece of content with changes to a single variable. Those two versions are shown to users to determine which performs better.

# Goals & Objectives

The research activities direct the research questions, [described on page 6](#_Research_Questions), and further inform requirements for a high-fidelity clickable prototype.

|  |  |  |
| --- | --- | --- |
| **Goals** | **Objectives** | **Research Activities** |
| Understand user expectations for communication and access of community care related tasks and information. | Centralize relevant information so that users have easy access to information that is important to them. | **Co-design** will show what functionalities are most important to users, as well as what formats are most straightforward and appealing when using a portal.   * **Card sorting** will show how users perceive information, and how they organize while navigating a process or trying to complete a task. * **A/B testing** will show two scenarios and determine which designs are the preferred approach. |
| Determine which self-service capabilities and information are most crucial to implement in the portal in a phased approach. | Streamline the number of clicks and guide users through a pre-defined process so that users have the autonomy to coordinate their own care. |

## Portal Pages for Research Activities

The HCD team will work with users to build the following pages and modules:

* **Guided Authorization Process Support**
  + Authorization
  + Appointment scheduling
  + Cancellation
  + Authorization deadlines
  + Remaining appointments
  + Provider location
  + Step-by-step guided process
* **Billing Process**
  + Pay bill
  + Appeal bill
  + Apply for support
  + Get help
* **Financial History** 
  + Billing statements
  + Balance due
  + Payment / financing options
  + Financial support help information

# Design Solution Opportunities

At the conclusion of the Discovery phase, the HCD team identified 16 opportunity areas for VEO and OCC to consider. These opportunity areas have been prioritized based on VEO and OCC feedback to focus on 9, defined below, for the Design phase.

* There is an opportunity to create a system of support that minimizes questions and issues, reducing the interruptions staff experience in their day-to-day roles.
* There is an opportunity to implement additional means of oversight and education to ensure their values are reflected in the work of every partner administering care and support in the community.
* There is an opportunity to rethink the role of the authorization and how Veterans interact with it to alleviate stress and confusion and still prioritize Veteran health and safety.
* There is an opportunity for Veterans to receive the care and prescriptions they need more seamlessly, while maintaining the agency of both the VA and the community provider.
* There is an opportunity to create a seamless scheduling process that makes the community care network feel like a true extension of the VA and that curbs the issues that arise when the network falls short.
* There is an opportunity for the VA to recognize Veteran and caregiver limitations and intervene with targeted support instead of continuous handholding, as well as redirect Veteran and caregiver energy toward holistic care.
* There is an opportunity to increase community care tool and network reliability and adequacy, ensuring the providers Veterans need are at the VA and in-network.
* There is an opportunity to allow Veterans to pull back the curtain and reveal what it takes to get them the care they need, as well as give them and their providers a space to quickly and easily signal when complications arise.
* There is an opportunity to simplify and clarify communication with Veterans about billing, removing the burden of the unknown coverages and creating financial transparency between them, their community providers, and the VA.

# Design Solution Requirements

The prototype(s) for this project should meet the following criteria to be sustainable and actionable:

* The prototype(s) must be applicable within the OCC landscape and integrate into the various systems that Veterans, beneficiaries, staff, and providers interact with.
* The prototype(s) must provide Veterans, beneficiaries, and VA staff with information they need.
* The prototype(s) must provide updated information that is as accurate as possible.
* The prototype(s) must cultivate communication between Veterans, beneficiaries, community providers and VA.
* The prototype(s) must fit within OCC's larger work towards portal development.
* The prototype(s) must adhere to VA.gov design system.

## Measuring Success

The following are workstream and outcome success measures, or lead and lag measures, to consider throughout the Design phase.

#### Workstream Success Measures (Lead Measures)

* Incorporate feedback from implementation team(s)
* Understand Veteran and beneficiary feature priorities
* Through prototype iteration, demonstrate key features that can be tested virtually and are feasible/implementable
* Address gaps identified by OCC

#### Outcome Success Measures (Lag Measures)

* Customer-defined ease of system location and use
* Customer-defined helpfulness of the proposed prototype
* Customer likelihood of using the proposed prototype
* Customer estimated time savings
* Customer estimated experiential change

# Research Questions

Research activities, coupled with user testing, will answer the following high-level research questions. The research team may answer questions about user perceptions, but these answers will be assumptions and expert judgements. These assumptions can be tested in the user testing phase.

## User Background

#### Time: 10 minutes

The following questions will help the HCD team create a high-fidelity portal prototype that is user directed. This portion of the interview is designed to be a free-flowing conversation. Activities and visual support are not required.

1. What attributes describe OCC portal users?
   1. What are user health goals and current pain points based on past experiences with community care?
2. What do users need from VA in order to feel more empowered when navigating the community care process?
3. How do users leverage technology to complete tasks?
4. What is the current VA OCC user experience?
5. What are the user expectations when communicating with VA OCC?
6. At what points in the process do users need the most support?
7. What areas of the portal can be designed for self-service?

## Card Sort

#### Time: 10 minutes

#### Users will be asked to (1) prioritize portal pages that are most important to their needs and (2) customize the order of modules, per page, based on their needs. This activity will be facilitated in MURAL.

1. What information is most important for users?
2. How do users prioritize the information they are searching for?
3. How are users most likely to navigate the portal?

## A/B Test

#### Time: 15 minutes

#### After designing the information architecture (card sort), users will be presented with two variations of modules, per portal page.

1. What level of complexity is required for users to receive the information they need without feeling overwhelmed?
2. What design elements or best practices stand out for users?

## 

## Co-design

#### Time: 20 minutes

#### Following A/B testing, users will also have the option to make changes to the module piece they selected so that the HCD team can ensure an optimized experience.

1. What tools can VA offer to help users accomplish their community care needs?
2. What defines a "comprehensive and helpful" portal for users? (This question will help the HCD team define acceptance criteria during the Design phase.)

## Closeout

#### Time: 5 minutes

Conclusion questions are designed to inspire users to imagine their ideal portal experience, and ensure users feel heard when expressing their needs and goals.

1. What is the ideal portal experience?
2. How can the OCC Portal help users feel more honored and valued when working with VA to cover community care health needs?
3. Request responses to Likert experience evaluation questions to complement the qualitative data collected with quantitative.

# Synthesis

Qualitative data collected will be coded and anonymized to remove PII to protect participants’ privacy. Online collaboration tools, including Excel and MURAL, will be used to analyze scrubbed data. Based on previous experience, a single interview results in approximately 3-4 hours of synthesis in order to clean, code, and undergo multiple rounds of analysis with the data collected.

The HCD team will analyze data through affinity mapping by grouping data points by theme, sentiment, and aspects of community care experience. These clusters will lead to the development of insights and inform the structure and content of a visual artifact that illustrates insights on an ideal portal experience for VA users.

# Next Steps

Upon approval of this research plan, the project team will work with Perigean Technologies to conduct user outreach.

* Project team members will be identified to lead and support each interaction.
* Materials, as described in this plan, will be developed to support the project.
* All project team members who attend interviews will receive training on what to expect during interviews, best practices to ensure the highest quality data is captured, and actions to take in the event a Veteran is in crisis.

## Notional Timeline

|  |  |
| --- | --- |
| Project kickoff with stakeholders | 2/22/21 |
| Project updates with team of stakeholders | Weekly 3/1 – 6/1 |
| Medium fidelity prototype developed | 3/15/21 |
| User testing of medium fidelity prototype | 4/5/21 |
| High fidelity prototype developed | 4/12/21 |
| User testing of high fidelity prototype | 5/3/21 |
| Finalize prototyping | 5/10/21 |
| Feedback report developed | 5/10/21 |
| Findings shared with stakeholders | 5/17/21 |
| Fact sheet developed | 5/31/21 |
| Final presentation and delivering deliverables | 6/14/21 |