**Services Taxonomy Conversation Guide**

* **I have started recording.**
  + I'd like to confirm: Are you comfortable if I record my screen the audio as we talk today?" Yes I am.

**Warm-up [5 minutes]**

* **Va experience:** At first it was really bad and I had a very unkind PMC who I don’t think she liked working with veterans. Unless a veteran came in with a missing limb she didn’t think we deserved to be surveyed. I got a new doctor in women’s health and it has been great care, treatment, and compassion ever since. I know I am not necessarily rare in that but more complain than saying they have had good care.
* **Have you ever participated in a VA research study before?** I have done this before. I think it was the va.gov website. I did lots of trying to find different pages.
  + Are you familiar with what a card sort is?

**Usability tasks [~ 40 minutes]**

**Card sort 1**

-Why is this list in this order.

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| **SERVICES** | **PARTICIPANT NOTES** |
| Medical records | Administrative |
| Wheelchair and mobility | That can be under two places again, to get a wheelchair you have to learn how to use it. I got one after knee surgy and that was through physical therapy and that’s specialty care so I guess that’s where I would put it. I could see it being under social programs as well. I wouldn’t get a wheelchair form primary care that’s why I put it under specialty care. |
| Whole health | What do they mean whole health? We will put that under prepare for the visit. It sounds like a read this; this is what we do topic. |
| Women Veteran care | Primary care. |
| Workshops and classes | Social programs as a clearing house spot. |
| Billing and insurance | Administrative. |
| Chaplain service | Social programs. |
| Library services | What do they define library services. Social programs. I thought it might have something to do with medical records. Our va has a library but you don’t check it out you grab and go then return or give it away. |
| Radiology | Specialty care. |
| Advice nurse | Primary care but again mine is women’s care and that falls under specialty care. I would be confused but I would put it under primary care. I have used it in the past. |
| LGBTQ+ Veteran care | Um, can I put it in two places. I would put it in specialty care. Well if I were LGBTQ+ it would be primary care but since I am not it is specialty care. As a women my PMC is women veteran care. Looking at it holistic women’s care would be under specialty care as well.  Moved to primary care. |
| Military sexual trauma care | Mental health |
| Minority Veteran care | Primary care. After thinking of it I wasn’t to move LGBQT to primary care. |
| Social work | Social programs. Social work is helping veterans within society, people who have issues perhaps if they are homeless it is hard to get on a computer but if they have emotion issues, landlord issues. Counseling is a part of social work as well |
| Caregiver support | Social programs. My mother in law just went through this with my father in law but he passed away last year. There was a lot of confusing where to go for support for the caregiver. She tried to be under primary care but it didn’t work. If a program exists it needs to be under focused care. |
| Registry exams | When coming into the va? I would put that under prepare for your visit. It is an introduction to the va process. Its not like you can apply for it directly. You have to apply to the va before you are even allowed to have an exam. You have to go through a different part of the va before getting to this.  I don’t know where else you would put it unless you have a category for incoming veterans. That’s what I would do, have a category for incoming veterans so I would move it there. |
| Returning service member care | As in coming home from combat. I look at it from returning from overseas. I know this is a va thing but it could be rephrases as new veteran. I would put that under prepare for your visit. If you are new to the va you need to know before you get there. If you are new or just returning you aren’t assigned a PMC yet.  Category for incoming veterans so I would move it there. |
| Smoking and tobacco cessation | Specialty care because it’s not just mental health. |
| Substance abuse care | Mental health. |

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| **CATEGORIES** | **PARTICIPANT NOTES** |
| Primary care |  |
| Mental health care |  |
| Specialty care |  |
| Social programs and services |  |
| Prepare for your visit | I think it all makes sense. I think prepare for visit would have more, like directions and a phone list. How to contact people sort of thing. |
| Administrative |  |

I was confused on returning service member care because it really means incoming veterans and processing rather than a service member returning from combat or overseas. I just had to have registry exams explained but now it makes sense.

**Card Sort 2**

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| **SERVICES** | **PARTICIPANT NOTES** |
| Grief and bereavement counseling | Mental health. |
| MOVE! weight management | Specialty care. That’s an exercise and nutrition program to lose weight. |
| My HealtheVet coordinator | Administrative |
| Nutrition, food, and dietary care | Specialty care. |
| Patient advocates | Primary care. Those are the ones you talk to when your doctor is mean. Been there to. |
| Recreation and creative arts therapy | Social programs. |
| Applying for health care | I would put that into prepare for visit. Well if you are trying to find out if you can go to the va, it’s a toss up between that and administrative. I think that prepare for visit makes a little more sense to me. |
| Travel reimbursement | Administrative |
| Veteran connections | I would put that under social programs. |
| Vocational rehabilitation and employment programs | Social programs. I have used that. |
| Employment verification | Administrative, I assume if a veteran is employed and wants to know how much they get paid because certain veterans need to pay for services. |
| Freedom of Information Act requests | Administrative |
| Privacy office | Administrative |
| Make an appointment | Prepare for visit. |

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| **CATEGORIES** | **PARTICIPANT NOTES** |
| Primary care |  |
| Mental health care |  |
| Specialty care |  |
| Social programs and services |  |
| Prepare for your visit |  |
| Administrative |  |

Services: I think the only thing I assume when you click on it an explanation will popup on the website. The only one is employment can be confusing. Lower level disability you have to pay for services if employed but if you are not employed you might not have to pay. I don’t think anything else would need to move. Everything else makes sense. Veteran connections is exactly what I thought it was.

-Been to the facility page for your VA: Yes

Experience: it was very confusing. It was hard to figure out where to go and who to talk to. If I am unsure I call and tell them what I need. The operators at the va are great when I struggle to find it on the site.

Preferred method to talk to PMC: I use secure message on my HealtheVet. I normally get a response the same day, it rarely takes the 3 days it says it should I emailed this morning for a refill and they emailed me back confirming. I can call and leave a message but you don’t know if it get s to them but theres a paper trail if I send a message.

**Closing [5 minutes]**

**Post-research follow-up questions**

* Are there any additional categories you can think of that may be helpful to you? I am very grateful for this process. My husband is an IT processor and his biggest complaint is not getting feedback. I appreciate this because I know you take my opinions to heart. This process is a really great one.
* Could we describe any of these services or categories more clearly?