VA Mobile Discussion Series

VA DoD Veteran Link

Denise Kennedy: Hello everyone. Welcome, and thank you for attending our VA Mobile Health discussion series webinar. My name is Denise Kennedy, and I'm going to run through a few brief reminders before we begin today's discussion about the VA DoD Veteran Link App.

Your phone lines are muted. We will be taking questions through the chat feature. The chat function is available to you at the right of your screen in the middle section. If you're experiencing any difficulties, please use the chat function, and someone will be in touch to offer assistance. To respect everyone's schedules, we're going to keep this moving.

Today, we welcome Dr. John Hixson, clinical lead for VA DoD Veteran Link, and to help us answer questions today, we have joining us Damien Sharp, manager with MBL Technologies. As mentioned before, if you have any questions, please use the chat feature, and we will leave time at the end of the presentation to answer questions. If we don't get to your question, we will try to follow up afterwards.

To that end, to download the presentation, please click the file name below the chat screen. With that, I'll turn it over to you, Dr. Hixson.

Dr. Hixson: Okay, thank you so much. Can you hear me okay?

Denise Kennedy: We can hear you great, thank you.

Dr. Hixson: Okay. Fantastic. Well, first of all, thanks everyone for dialing in to hear this discussion about the VA DoD Veteran Link application. I'm talking to you from San Francisco right now. The San Francisco VA is where I am based. So, our plan today, I don't think this will take even 30 minutes, is to leave enough time for questions. We may even be able to give you some of your day back.

The agenda is listed here. We're going to go through the background of the application for a few slides; then we'll really dig into the functionality of the application; then we'll review some training materials; and then talk about briefly our plans for field testing this particular piece of software.

So, the VA DoD Veteran Link App is essentially a very simple piece of mobile technology that effectively acts as a dedicated social networking application that enables a user to find and communicate with other Veterans and service members. This network includes active duty service members, who have common interests, life, circumstances and health conditions. You can find, create and participate in groups about all kinds of topics. These don't have to be health related. They could be a topic of any interest to you. Then you can build these groups and add to the conversation to help create a community for yourself and fellow Veterans.



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Now, I'll briefly talk about how this idea came about. Obviously, social networking is and has been now, for many years, a very popular mechanism for communication with like-minded people. I would say that there's really two primary reasons that VA DoD Veteran Link was originally conceived. The first is a natural extension of the very popular, publicly available social networking application. We had a desire within the Office of Connected Care to create a more internally-based solution, where there would be some level of scrutiny in terms of who could access the application – we'll show you the requirements for logging into the application later on. Many questions arise related to the fact that Veterans already create social networks outside in very popular applications like Facebook, Twitter, or WhatsApp. So, the question is how does this differentiate itself? We can address that later, but the short answer is that this is a wholly contained VA-based application that requires a DS logon, which automatically creates a bit of a gateway to get users into the interface. And that may have its pros and cons, but that's the reason.

The second bit of background that I would like to give to you is from a research perspective. So here at the San Francisco VA, I primarily see patients who have diagnoses of epilepsy, often related to some type of service injury. For the past five years, we have been conducting research, looking at the use of social networking to help improve Veterans' ability to conduct self-management of their epilepsy. This effectively means using peer support mechanisms to improve the behaviors that a patient uses to take better care of themselves. We've published several studies looking at the benefits of this, so this was a natural extension of that work.

So, these are just screenshots of the cover of the link. The first one is basically just a graphic showing the VA DoD Veteran Link landing page with the logo, Learn, Connect, Share. The second screen grab is what occurs when you try to log in, and shows DS logon Level 2 (Premium) account credentials. And that speaks to what I was mentioning earlier about a gateway for inclusion into the application that provides a bit of, I guess, safety, as it were. Many of the publicly available social networking apps, as you might understand or even experienced, can be very susceptible to entry from other entities that aren't necessarily who they say they are. So, for instance, you could have a company or a group posing as an individual when in reality, there's an ulterior motive or some type of marketing that's occurring here. With this particular feature, we would at least add some level of security in terms of proving who someone was upon entry into the app. Now, a rebuttal would be that there could always be some infiltration with an ulterior motive, but at least this provides some level of protection.

Once you get into the application, this now shows a mobile rendering of the app. These are actually slide outs, which are very common features in mobile app development. On the left side of the screen, you'll see a standard menu for app options. On the right side of the screen, there will be another slide out for the user menu. There's essentially two very basic features in each of these. The user menu gives very standard options for learning more about the application, some options for getting help, and then an automated tour, which essentially launches a separate slide deck that just shows the user how to navigate within the application.



On the other side, you have app options, and we'll go through this in detail. This section allows you to create or edit a profile, which is very standard, and, most importantly, allows you to perform search within the overall universe of participants that are within the application. You can also search for groups and link yourself to a group as well as create a new group. You can also create a personal list that is essentially a saved list of both individuals and groups that you have previously interacted with through the social networking feature of the app. Also, down here, Launch Pad sends you back to the main launchpad for all DOCC mobile application and this logs you out, obviously.

The first time you log into the app, you'll be prompted to set up a profile. You essentially have to create a profile if you want to use the application. Additionally, if you want to edit your profile at a later time, you can go to the Edit My Profile option that I just showed you. We'll go through this in a bit more detail.

As is true for most social networking apps, you need to create a screen name. If the user chooses, this could be their actual name but it certainly could be some type of pseudonym. Then you're asked to enter a variety of personal information elements, which we'll show in the next screen. I'll highlight here that there's a column with Share, so you can select which elements you share and which elements you don't want to share within the application. So, there's a fair degree of user variability there, user choice.

These are the data elements that are requested within the profile or available. Obviously, the more information that a user shares, the easier it will be for other members of the app to connect with you. The screen name is what I just showed you. In addition, your actual first name, last name, date of birth, gender, affiliation status and military rank you can see here. The only one that's actually required for sharing is the screen name. Now, if a user were to do that, any search algorithms would not match them with any groups, per se. However, that doesn't prevent the user from then going in and searching for other groups.

We know from social media research that there are really multiple ways that people consume social media. There are some people that are highly engaged and contribute robustly to the content within any given social media feed. Then there are other people who essentially contribute no content but are still robust users, meaning that they're consuming the content provided by others. So effectively, if you wanted to create a screen name and not add any of the details, you could become that type of user of this application. Obviously, there's a certain degree of critical mass that is necessary for the content to be meaningful. So, you know, we somewhat selfishly hope that people will be contributing content to the application because that's essentially what drives its success. If nobody is adding anything, then there's very little of value within the mobile space/application.

I just saw a quick note here. If a Veteran uses their name as their screen name, other members would be able to see their name, yes. Other users would be able to see their name. The other users won't be able to see any of these other things unless they purposely share it. I would note that there's nothing preventing a Veteran from doing that currently on any publicly available social networking application, either.



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Once you create your profile and you want to go into that search tool, you then come to this page entitled Search. As you can see, you can choose five parameters from the different features that were listed in the profile to create a search algorithm. You can choose what those five will be and then narrow it down even further. Once you tap Search, you'll get a generated list of individuals that meet that certain criteria. After you tap Search, you'll see this list here. Again, it will only display those users that met the criteria. In addition, the only details that will be provided are the ones that were consented and check marked by the user. Then, if you want to tap into the details, you can see all the details that were shared by that particular user. If you're interested in adding them to your personal list, you can do that here.

So, very intuitively, your personal list is a list of your favorite contacts. It allows you to save the people that you contact and interact with most frequently. Again, this is not yet the use of a group feature. We haven't gotten there yet. This does enable one-on-one connections as well, in case that was a misconception to this point.

If you want to, this is how you go through and create the personal list. You may have noticed that in the earlier search screen, there was a little letter, which is a very common icon for email. After you have connected with someone, let's say that you've interacted with them through the app and you've engaged in the back and forth dialogue, you can choose to share an email address. Only if the user has shared their email address and once again, consented to this and selected specifically that they wanted to share it, would this be presented as an option. You can tap the icon, and then a new email draft would automatically be opened in the email account of your choice after tapping that icon.

I'm just going to show you briefly how we create a group. Groups are the next feature. You can find, create, and participate in groups about topics that interest you. To do this, you simply tap on that next option, which is Groups. There's two things that you can do. You can either search and then join an existing group, or you can create your own groups. My groups are join groups, and you can see here in this example, My Groups and Join Groups. My Groups have already been selected. You would click on, say this first one says Army – it shows that there are two comments that have been added to that group – then it would show a string of comments that have been left in that particular conversation.

It's very straight forward, basic functionality from the Groups tab. You tap on the name of the group that you would like to read or submit comments to. Again, as I mentioned earlier, you can either participate and contribute in the overall conversation, or some folks may choose to be passive and only read the comments. This is nothing particularly revolutionary. The comments will be entered. You will be able to see the content, and then it will also show you the date and time they were submitted. If you want to submit a comment, you just hit post, enter your comment and then hit return. Then that would be added.

Now, if you go to the Join Groups tab, you'll see a list of groups that are available for you to join. You can filter this down and search. There's a search box at the top, and then you can search based on the topic. We do have some pre-created groups that are currently available. This includes all of these, and, primarily, these are related to some high profile, chronic medical



U.S. Department of Veterans Affairs

conditions as well as campaign specific groups. These are not meant to be exhaustive, and the purpose of the application is effectively for the user community to create their own robust set of groups. These were mainly generated to kind of produce seedlings, a garden so to speak, where people could interact whenever they began to enter the app.

In addition, you can create a group. I think based on some of the questions, this will be important. To create a group, you just create a unique group name and enter the purpose. This can be anything that you want. You then tap save. The group will be established, and you will automatically become a member.

Obviously here, you want to be as descriptive as possible so that other users can identify what the group is, and then potentially join it. Additionally, if you had met someone that was in your personal list, you could invite them to the group just by telling them what the name was. Let's say you had three or four people from your personal list that all shared a common interest, you could go back to your personal interactions with those individuals and say, "Please go join this group." Then you would all have a group of, say, five people that you would be able to interact with.

VA DoD Veteran Link is currently in development. It's gone through user acceptance testing, and there's an upcoming, planned field test. We are planning to do this by using existing Veteran employees, and I'll talk a little bit more about that. We're going to be using the VA Beta App Store, and this will be available soon, probably in the new year. To be a field tester, you need, as was mentioned earlier, DS logon Level 2 (Premium) account credentials. With this, you're able to sign up.

Now, I think it's important to note that we've used the Beta App store and Veteran employees before to conduct beta testing. This is a little bit different than what we've done in the past with mobile applications. In the past, the testing was intended just to determine if the app worked as intended. It's a one-on-one kind of script that the user can go through to determine what bugs exist. We still want the users to do that, but we also want the users to effectively view this as planting the garden.

From prior research in social media, we know and this is very intuitive, this isn't rocket science, we know that there's a first follower effect. So, if particularly enthusiastic people show up and begin to put content into the site, then that makes it more meaningful for everyone who comes later. If people come who are not particularly invested in posting content, then the value drops precipitously. That's pretty obvious.

So, we're hoping that during the testing phase, not only would people be viewing the app from the perspective of looking for bugs and other pieces that affect the functionality, but that they would also be robustly contributing to the formation of new groups, dialogues and conversations so that people who came into the application later would find immediate value. That's my little plug for that.



Okay. I think that's effectively it. This is not a particularly complicated app. Very simple, actually. I do see we have some questions here. I'm happy to address them.

Denise Kennedy: So, Dr. Hixson, let me tee up some of these questions for you. First, let's start with: can you tell us how this site will be moderated?

Dr. Hixson: So, it won't be. There are not going to be any nurses, doctors or psychologists on the site. Certainly, there will be basic overview through the mobile office, so if something truly calamitous were to be seen, we have access to the application. But, this isn't a medical advice site. When the site is open, it says this is not intended to be used for any type of medical forum. That is made very clear. The Veterans consent that they're entering a site, and this isn't intended to be used in that way.

There's also a feedback mechanism. If someone notices that something is being potentially abused, or if there is someone who has infiltrated the site with mal-intent or an ulterior motive, there is a feedback mechanism that is monitored on a daily basis. We can certainly go in and adjudicate any type of behavior from that perspective.

But, true to social networking, which I'll point out occurs all the time, people are entering this application of their own free will, and they're choosing to enter information based on that.

Denise Kennedy: Excellent, thank you for that. We had a comment followed up by a question from early on in your presentation. Veterans won't necessarily know their diagnosis. They will write things like high blood pressure or addict. I guess the question is: how will you sort on these idiosyncratic profile items?

Dr. Hixson: Yeah, great question. I would say that the quick answer is we sort based upon whatever they type in, and it will be messy. If they put in the word addict, that will become a searchable term, and if someone wants to create a group entitled addiction or addict, then that will be a great. Once again, this is the real work experiment of social media; this is already happening. If we have concerns about this, we should be having a conversation about the fact that this is happening on its own there in the community and has been for ten years.

Now, the second thing I'll say that is part of our initial, as I said, gardening or tending, is that we create pre-existing groups going forward that will nudge people in that direction. If a person sees that there's already an addiction group that's been created by someone else who came in early, they may not need to create a brand-new group, right? The same thing would go for hypertension.

But if someone has a special name or wants to use a very unusual name for something and create a unique group, there's nothing preventing that from happening. We don't step in to force them to change it.

Denise Kennedy: Excellent. Switching gears a little bit. We have a question here. I'm going to try to shorten it a bit. With regard to driving content on the site, is there any thought about



U.S. Department of Veterans Affairs

integration with My HealtheVet, understanding that the DS Logon is the same across My HealtheVet and this app? The comment, having VA DoD Veteran Link visible from My HealtheVet would be a good opportunity to capture your target audience or additionally, integration with My HealtheVet might lend itself to leveraging existing DHA and FTEE programs to support VA DoD Veteran Link. Have there been any conversations about the cross-linking of those two sites, the app and My HealtheVet?

Dr. Hixson: There's been a long history, really, for me and My HealtheVet. I've been talking about the need for a social networking solution just like this one, for probably five years. However, that's largely been on a one-on-one basis and from a programmatic perspective, there's no current plan to merge these. However, I do think it's a great idea. Software development is a finicky thing. Even though we all say, "Let's not build something in a silo," the reality is when it comes to developing applications like that, that's almost our only choice. But I do think going forward that's a very reasonable conversation, and I would love to have this application planted there to increase its visibility. I think, I agree, it would a very intuitive place to put it.

Denise Kennedy: Excellent, thanks Dr. Hixson. I think Alan Greilsamer has joined us and has something he wants to add in here. Alan?

Alan Greilsamer: Yeah, just over the past six or seven weeks now, we have been integrating our first mobile app, VA Online Scheduling, into My HealtheVet, and the results have been the app adoption rate has gone up significantly. There are plans throughout Connected Care to slowly start moving some of our connected apps in the My HealtheVet environment. So, while there are no plans for this app just yet, I'm sure that something like that will be happening down the line.

Dr. Hixson: Awesome. Thanks, Alan.

Denise Kennedy: Excellent. Thank you for that. So, a follow up around the moderation conversation: are there any cues or anything in the system for someone who might be suicidal? Obviously, there's concern for the individual, but also the public perception of VA around something along those lines. Has that been considered in your development process?

Dr. Hixson: So, I was going to come to it if you didn't. We employ the same, the exact same, approach that any of the mobile applications do, which is essentially a message that says, "If you're actively suicidal, call the Suicide Helpline." This is not medical advice. Other applications, perhaps, I don't want to say, do more, but it depends.

There are applications that we have within the Connected Care suite that directly involve putting in health related content, right? That includes vital signs, but that also includes free text, which theoretically could be a patient saying that they feel suicidal. Secure messaging can contain a message like that. I mean, any of it. So, I guess my response would be that we approached this with the same methodology that all the other applications have. Can we say



U.S. Department of Veterans Affairs

that there's zero chance that a Veteran isn't going to put that kind of message on here? No. But that already exists. I mean, that happens with virtually every piece of informatics that we have within the VA, including a telephone system, I might add.

So, we've done that. That's the first thing I'll say. The second thing I would say is that, once again, this already happens in the social media space outside of the VA, right? I guess the question is, how far are we willing to go? Where does our domain end in terms of what we do for Veterans? There may be a Veteran who is completely getting his or her care from the VA who says something on Facebook. Do we then have to extend our arm into that level of that person's life? So, I mean, we have to weigh that versus the benefit this could offer to many patients and put up the appropriate level of safeguards, which I think we're doing. That may not be a satisfying response, but, I mean, that's what we've done for the application.

Damien Sharp: Dr. Hixson, this is Damien, as you know, as you had said in regards to the user manual, in the user menu, I should say, there is emergency contact info as far as dialing 911. There's a Veteran crisis line, and we also have a disclaimer to that effect as you had mentioned, Dr. Hixson. So that information is in the user manual under the help section.

Denise Kennedy: Excellent. Thank you for that. Yes, and I think there's some commentary here around some of that. I want to go back for a second and see if you can revisit the sharing of personal information. Someone asked, "Will employees feel safe sharing personal information on a VA social media site?" I think that you had kind of shared what can be done. What is shared and what is kind of controlled by the user, but maybe you could revisit that for us.

Dr. Hixson: Sure, let me go back down. It's rendering. There we go. Okay, so these are the fields that are available for a profile. These absolutely contain personal information. Now, first thing I'll say is nobody's forcing anybody to use the application at all. So, the Veteran or DoD active service member is choosing to enter the application. That's the first thing I'll say.

Secondly, when they go to this screen, they choose how much content they want to enter. If they want to enter only a screen name with no personally identifiable information associated with it, then that is all that will be seen by anyone, anywhere, at any time. Again, that's their choice. They can even enter all this information in there, and then click on the box to share it. In fact, the default is that it won't be shared. See that here, right? So, they can enter it and it would be stored in the system, but if they don't click share, then once again, no one will see it.

The final thing I'll say is they can enter these things and then just select certain things to share. They don't have to select all of them. So, the bottom line is, there's a high degree of user choice here, and, ultimately, the user's only sharing the information that they individually choose to share.

Denise Kennedy: To that end, I think that that question, now that I'm seeing the follow up here, was around testing it with VA employees as part of that Beta App store test. Are you concerned about that sort of testing and the sharing of content across the VA network? And can you speak to that a little bit?



U.S. Department of Veterans Affairs

Dr. Hixson: Oh, okay. No, I hadn't thought about it. That was a great question. Yeah, that's a very good question. The way I'm interpreting this is that you were listening to me, which is great. So yes, our plan is that in the beta testing, this would be content that would then remain within the application. So, if a tester is answering personally identifiable information including in the group function of the conversations, then as it stands today, that would continue to be publicly available, yes.

Denise Kennedy: Excellent. And I think we've gotten to all the questions. Dr. Hixson, I don't know if you have anything else to add, or Damien if you had anything else that you wanted to add. I know you've been following along in the chat as well.

Damien Sharp: No, I just thank everyone for their participation.

Denise Kennedy: Excellent, and how about you, Dr. Hixson? Any last words?

Dr. Hixson: Yeah, thank you. They were great questions. I guess two big things. I know that this isn't my first rodeo with the whole social networking space. I'll freely admit, I have my own personal opinions about it. That comes from five years of experience with this, but I appreciate and acknowledge all of the various perspectives. I think that it is, indeed, a bit of an uncomfortable space. I think that we also have to consider the high value that this could provide to our Veterans. As we all know, a lot of Veterans come to the VA because of the community. For Veterans who live, say, in rural areas, who can't travel, we've learned through our research that there's a lot of value from this type of technology. That's the first thing I'll say.

The second thing, you know, if you're eligible, interested, or know someone who wants to participate in the field test, please, please, please, please sign up. That's what we really need. If we don't get a critical mass of people participating, this is not going to fly. But I fully acknowledge the comments, I think Amy brought up, which I must admit, I did not consider before. So that is a great contribution, and it may actually be something that we incorporate into our messaging and instructions for the field testing. Thank you very much for that.

Denise Kennedy: Excellent. Thank you so much, and I want to thank everyone for joining us today. There is a link on your screen if you would like to provide some feedback to us. Let us know how we're doing and any additional topics that we might need to cover. With that, we'll give everyone some time back in their day. A special thanks to you, Dr. Hixson, and to you, Damien, for taking the time out. I hope everyone has a great rest of your week and a great holiday. With that, we'll call it a wrap. Thank you so much.

Dr. Hixson: Thanks, everyone.



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