















to outline that and work with sites on what that might look like up front, so some of the apps that are coming out might be a app that allows Veterans to air their blood pressure or other vital statistics in which a provider may want to capture over a period of time. Instead of having to call in with that information or go through any other cumbersome processes, these apps really allow Veterans to do that and have their provider see that information, so there can be some care decisions made without the Veteran having to actually go into a facility.

So, that's where that is. That was the end of my presentation. Conor or Cindy, do you guys have anything you want to add or anything I may have skipped over?

*Cindy Wamsley:* Kay, I don't have anything. Are there any specific questions potentially about field test activities related to the sites that participate or any of the other questions? I know questions are coming through the chat window as well.

*Hannah Webster:* Yeah, great. We still see some people typing, but a few questions have come through, and I know, Conor, you were answering some in the chat. For people who may not have been following along in the chat, we're going to go ahead and maybe cover some of those. We have one that says, "I'm developing an app that's part of a VA funded grant. I need some questions answered but don't always know who to call." She has a couple examples there, and I know, Conor, you said that there may be information we need to find and circle back, but I wanted to see, Kay or Cindy, if you had any additional information on that.

*Alan Greilsamer:* Hannah, this is Alan. If you have any questions related to what you need to do for your particular app, they're welcome to contact me, and I can put them in touch with the web and mobile team. There are various people there who have been through the process as project managers or helped business owners through the process. I'll put my email again in the chat window, so everybody has it.

*Hannah Webster:* Okay great, thanks Alan. We have one more that just came in from Nanette. If there is an app that is already developed and in use, can your office facilitate getting the app integrated for clinical use? For example, getting results into CPRS.

*Cindy Wamsley:* Yes, I'm not exactly sure what the ask is. So essentially, when you log into your CPRS account you can see the patient generated data? Like what the patients are entering into the applications or?

*Hannah Webster:* Sure, yes. Can you clarify in the chat please? And we'll wait for that, but we have one more here. It says, "Who are the folks who do the outreach at the field-level generally? The My HealtheVet coordinators or are they usually a separate role."

*Kay Lawyer:* So, the folks who do the outreach, and I'm assuming you mean Veteran outreach, are typically My HealtheVet coordinators. Depending on the app, though, we do a lot of telehealth work. So, there are some telehealth coordinators as well that do a lot of that, and then some of the applications really require that clinician. Using the clinician, really telling the

Veterans about it. It just kind of depends, but we have worked a lot with the My HealtheVet coordinators on various applications.

*Hannah Webster:* Okay, great. Thank you. A couple coming in. So, the next one, "For people in the field like physicians or nurses who would like to get involved, how would they go about that?"

*Kay Lawyer:* Yeah, that's a great question. You can certainly email myself. I can put my email in the chat. Alan, do we have a specific way yet for folks in the field to get involved or to get on a listserv or anything that you guys provide?

*Alan Greilsamer:* I mean, there are a couple ways. I mean, they're more than welcome to contact me or Kay. We have various newsletters that we send out. We also have outreach materials that we develop and have on our Connected Care SharePoint site. You're welcome to use those. We also have some clinical leads within the Office of Connected Care. Dr. Neil Evans, Dr. Jennifer McDonald, Dr. Dane Bent, who have all been very instrumental in getting wider adoption for our application. Again, I'm going to have to say email us, but if you want to email us, we're more than happy to hook you up with some of our clinical needs to get more information or to hook you up with the various business owners who are associated with that.

*Hannah Webster:* Great. Thanks so much, Alan. So, the next question, "How will researchers have access to data on adoption and use of these mobile applications?" And then she asks specifically about, "Where will the mobile transactions for RX Refill be stored so that researchers can merge them with requests initiated through My HealtheVet?" I don't know if that's a question for you all, or something we need to circle back on.

*Alan Greilsamer:* We'll have to get more information on that one from Dr. Spahn.

*Hannah Webster:* Sure, great. Thanks Allen.

*Kay Lawyer:* Then, we'll probably also, Hannah, have to get some more information for Nanette there. I don't think we've ever heard of that application, or at least I haven't, so I'm not sure exactly the answer for your question yet.

*Hannah Webster:* Thanks Kay, we'll circle back on that.

*Kay Lawyer:* Okay, great.

*Hannah Webster:* Then we have one more here: "How can we help initiate development of new apps, especially for clinical research purposes?"

*Alan Greilsamer:* You know, I mean, a big part of this whole development process is VA staff, especially clinical staff, coming up with innovations to help in the mobile area. Again, I'm happy to field those requests and get them into the right hands. There is not a real formal intake process of "I have a great idea and here's what we do." We sort of take these on a case-by-case





basis. In the past, there was the employee innovation competition, where you could do some of this. There is the VA innovators network, where some apps have come through, but again, if you want to email me, I'm more than happy to send you to the folks in web and mobile and make some connections there.

The other point that I wanted to make; I know there was some discussion in the chat window earlier. You know, we've been doing this for a couple years now, and we know that our adoption rates need to be higher. We had a pretty significant event happen on November 7 of the past year when the VA Online Scheduling tool became integrated with My HealtheVet. As one of the participants noted, the numbers went up considerably. I think we went from about 1,700 scheduling actions a month to about 1,700 a week.

There are plans in the works to keep that going, to continue to better integrate our apps with My HealtheVet, and to make the apps available through not only DS logon credentials, but also My HealtheVet credentials. We are aware that there are 2.5 million registered My HealtheVet users with DS logon credentials who are very active in their health care. Our plan moving forward is to continue to join mobile and My HealtheVet and continue to push that. It's been successful in the short time it's been happening, and our leadership all the way up to the Secretary wants that to continue very aggressively.

*Hannah Webster:* Great, thank you Alan. Okay, so I still see a couple people typing. We'll give them just another minute, and if we don't get to your question, I know we're going to circle back. Alright, I see some conversation in the chat, which is great. Oh, here's one, "What is the typical timeline through the stages on the screen as an app goes from idea to national deployment?"

*Kay Lawyer:* Yeah, so let me get back to that slide here really quick. It just kind of depends on how complex the app is. A lot of applications use other services that are within VA, so it's dependent on other teams outside of Connected Care. So, it just kind of depends. Typical timeline? I don't know if there is a typical timeline. I don't know. Cindy, do you know if we have any data on this; on what the general timeline has been? But in the summer, it's a very rapid pace.

*Cindy Wamsley:* Yeah, I think we just go back to it. There really isn't a typical timeline, because it really depends on the integration points of the application. So, if the application has multiple, like it's talking to Vista imaging and Vista, that's a much more complicated app than say an education-only app. Some of those education-only apps go out very quickly, whereas some of the more complex apps take much longer. I don't know if I can give you kind of a one size fits all, unfortunately.

Alan: I think from what I've, and sorry to jump in here, Cindy, but from what I've seen; if we have an education or an informational app, it takes about a year from start to finish, from concept to reality. With some of these, especially some pretty complex ones like VA Online Scheduling, it's a continuous work in progress. It could take easily 18 months to get the first iteration going, but we continue to make enhancements and expand VA Online Scheduling, so



that now it's well into two and a half years of continuous development. I think that that's where we're going with this. The initial launch may happen in a short period of time, 12-15 months, but these applications, really to be successful, have to continue to grow and expand. That's what we're finding with our sort of premier app right now, VA Online Scheduling.

*Cindy Wamsley:* Thanks. I wanted to just jump in really quick. I know there's been a lot of mention of patient generated data and making that available to the clinicians. I know that the PGD workflow is in the works. It is complicated. There's some policy going through the VA IQ right now, and I know My HealthVet is doing some work as well to get these apps, so the clinicians can see any data that's entered by the patient. That's one of those more complex things not only from a policy perspective, but just from a technical perspective. I think we have heard that feedback from the field and it is being worked.

*Hannah Webster:* Okay great, thank you all. So, in the interest of everyone's time, we can go ahead and wrap up. Any last-minute thoughts from you all? Kay, Cindy, Conor?

*Cindy Wamsley:* I don't have anything; thanks everybody for attending.

*Hannah Webster:* Yes, thank you all for participating in today's webinar. Cindy and Conor and Kay, thank you all for the great information about mobile app deployments. To all attendees, let me get down to the survey screen. On the screen you'll see a link to our Survey Monkey, so you can tell us how we're doing, and if there are any other topics you would like us to cover in the future on these webinars. Thank you all so much for attending.

