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VCR LIGHTHOUSE PROJECT ALPHA PACK

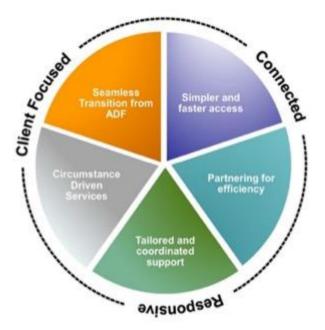
A DVA/DHS digital transformation initiative

28 July – 07 September 2016

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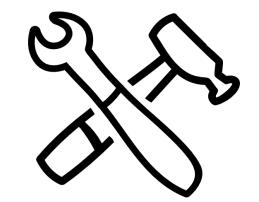
CONTENTS

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- Section 2 User engagement and prototyping
- Section 3 Future state user journeys and service map
- Section 4 Minimum Viable Product, Beta phase and beyond





Section 1 – Background and purpose



Background and purpose

In February 2016 Executives from the Department of Veterans' Affairs and the Department of Human Services announced a joint digital 'Lighthouse Project' to start transforming client focused services as part of Veteran Centric Reform.

The VCR Lighthouse project has been designed to support and inform Veteran Centric Reform (VCR). VCR is a major transformation initiative underway within the Department of Veterans' Affairs (DVA) to modernise the department's service delivery. This transformation will be achieved by redesigning business processes and through underpinning business operations with modern ICT solutions.

The project will test the application of the Digital Service Standard in improving the liability process. The insights and lessons learnt from VCR Lighthouse will inform the Second Pass Business Case being developed for government consideration as part of the 2017-18 budget process.

The VCR Lighthouse project is a 20 week project that will apply the Digital Transformation Agency's (DTA) service design and delivery method. The process has four stages summarised in the table below.

Stage	Snap shot	Output
Discovery	 Map the broad service landscape. Research real needs and problems faced by users. Understand policy intent and technology restraints. 	 A hypothesis defining the target state of the service which will be tested with a number of solutions in Alpha.
Alpha	 Test hypotheses with prototypes. Explore multiple ideas. Do user research. Iterate solutions using learnings. 	 A tested low-fidelity prototype testing the vision of the service. Definition of the MVP to be developed in Beta.
Beta	 Define a minimum viable product. Build an accessible and secure service. Allow public trial. Use feedback to improve the service. Iterate the build of the minimum viable service. 	• The earliest usable product: the simplest working service that meets a real user need.
Live	 Put team and processes in place to operate & improve service. Phase out old services. Consolidate existing non-digital channels. 	A scaled service replacing the legacy service. (Placeholder for pr

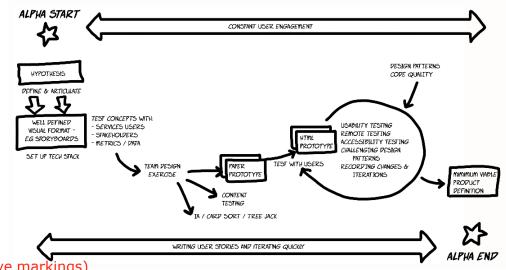
What is Alpha?

Alpha provides the opportunity to test that the right thing is being built before commencing the build of a working service.

In Alpha we will:

- Test the hypothesis from the Discovery phase.
- Build prototypes in code.
- Explore different ways of meeting users' needs.
- Validate ideas through testing with users.

By the end of Alpha a future vision for the service will be established. A Minimum Viable Product (MVP) can then be scoped from this vision. An MVP is the simplest thing that you can build that meets the users' needs. The MVP sets out the scope for what can be built in Beta.



Key insights from Discovery

The insights and client pain points identified in the Discovery stage generated concepts and ideas designed in Alpha.

Our hypothesis:

'HOW MIGHT WE SUPPORT THOSE WHO SERVED TO BE HEALTHY AND PRODUCTIVE'

In Discovery we spent six weeks engaging with clients, exploring current state business processes and the current IT landscape. During this process we identified client pain points, silly things we do, and gained an understanding of the other things that are going on in our clients' lives when they interact with DVA.

High level insights include:

I was warned not to attempt the process on my own.	DVA asks for information they already know	Decisions are not explained to me	I have to send my documents to DVA via Snail mail.
All I want is treatment for my health	I have no idea where my claim is up to.	I feel like I need to prove to DVA that I am not lying	DVA's language is unclear and confusing.

Ideation workshop

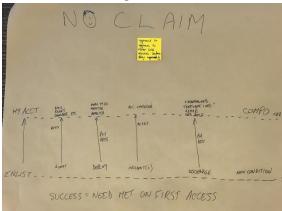
On Thursday 14 July 2016, the VCR Lighthouse project held an ideation workshop to mark the end of Discovery. Various stakeholders from DVA and DHS attended.

During the ideation workshop the participants defined key problems identified in the six week Discovery stage:

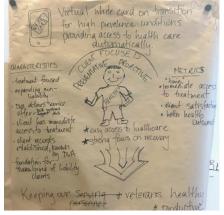
- 1) Ineffective communication
- 2) Gap between DVA and Defence
- 3) DVA policy and culture
- 4) IT systems
- 5) Burden of providing information
- 6) Reliance on third parties

We then brainstormed ways in which DVA might respond to these problems. The four concepts we designed were:

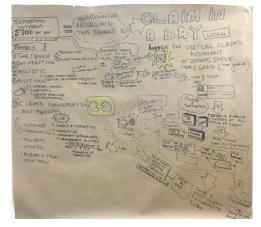
Data sharing to shorten claim times or eliminate the need for a claim all together.



2. The digital White card provided to users during transition process

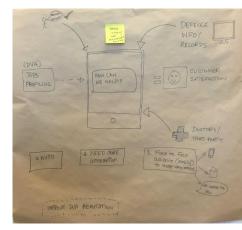


3. DVA guidance and support accessible online for clients completing a claim



Application for user to view and manage data stored by DVA

4.



Two clear opportunities became evident from this workshop.

- 1) Streamlining determinations by leveraging data from Defence (details on page 7)
- 2) Transforming the service experience for users.

Straight Through Processing -(안绝 안 안 안 한 아 안 안 한 아 안

Work has been done to characterise the basic training activities of officer and other rank members of the ADF courses in relation to musculoskeletal conditions.

Our hypothesis:

How might we use Defence data to help streamline the determination for musculoskeletal conditions?

Throughout the Discovery and Alpha phases the project team has worked with users and DVA staff to understand the 'silly things we do'.

At the moment, commonly claimed musculo-skeletal conditions regularly require questionnaires be sent to clients for the purpose of establishing causation between their service and their diagnosed condition.

This is confusing for clients as those conditions can develop when there is a constant physical demand over a period of time.



Our Solution:

Straight through processing will allow us to use the Defence Physical Training regime as a template for better understanding ADF employment requirements, and where possible, remove questionnaires.

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How does it work?

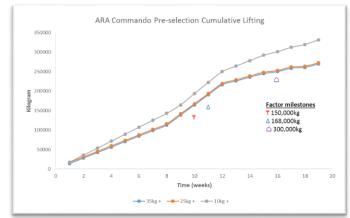
- Obtained training data related to exercises and loads lifted
- Quantify physical training regimes
- Calculate the mean and standard deviation of the training loads
- Generate timeline characteristics of when these conditions would be met

Benefits:

- Improved user experience for clients
- Faster processing times for DVA assessors
- Standardised approaches to satisfying
- SoP factors
- Improved transparency of decision making

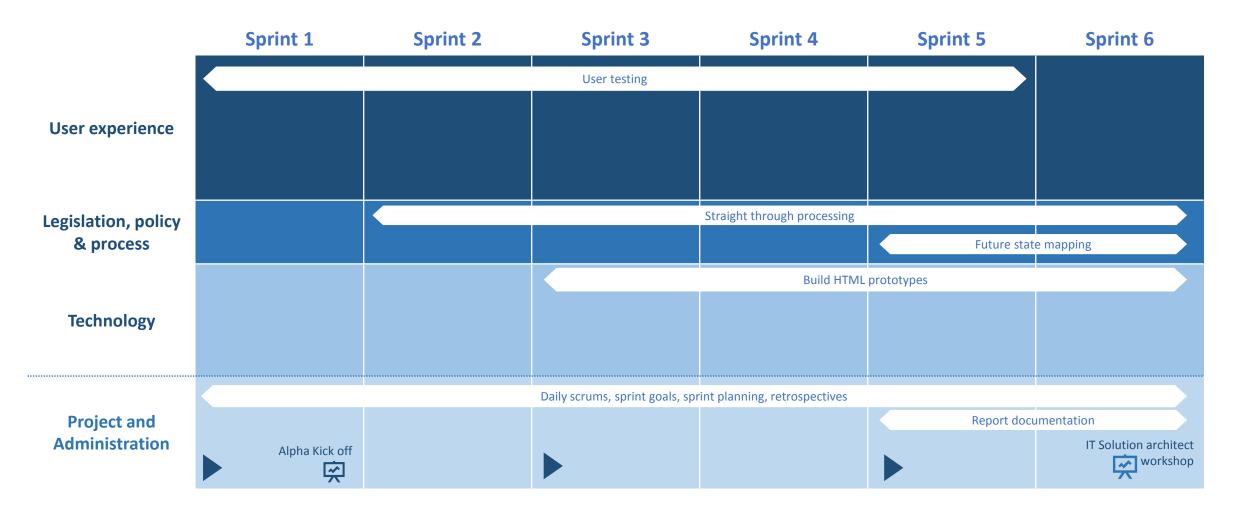
Future State:

- Future iterations of this work will investigate ADF job families providing data in relation to specific jobs
- Provide DVA greater context of ADF employment
- Increase analytical capability to guide research and future policy development



Alpha timeline

Each week the team designed concepts, tested these concepts with users, shared insights and refined ideas. In parallel to concept testing the team continued development of the straight through processing policy outlined on page 7.



Section 2 – Prototyping and user engagement



Testing with users

We needed to test concepts with users in order to continually validate and refine our ideas in Alpha. Insights from user testing informed iterations of the prototype throughout Alpha and helped us define our Minimum Viable Product (MVP).



- Continually inform and iterate the proposed concepts being progressed from paper wireframes, HTML prototypes and eventually into Beta as the Minimum Viable Product (MVP).
- Determine additional deliverables that may be put forward for funding as the MVP is integrated within the department.



- Seek feedback on the prototypes developed.
- Understand how users feel about their personal and medical data being shared across department.
- Understand how DVA can create a meaningful and trustworthy relationship.



- Serving members / Members in transition
- Members who enlisted after June 2004
- Navy, Army and AirForce



Location

- Canberra
- Kapooka
- Brisbane
- Sydney

Prototypes will be tested with serving members at Defence bases and formers member at various locations.



Questions

- Demographic / background
- Data sharing
- Technology / Digital practices

Users will be given a scenario and asked to interact with the product.

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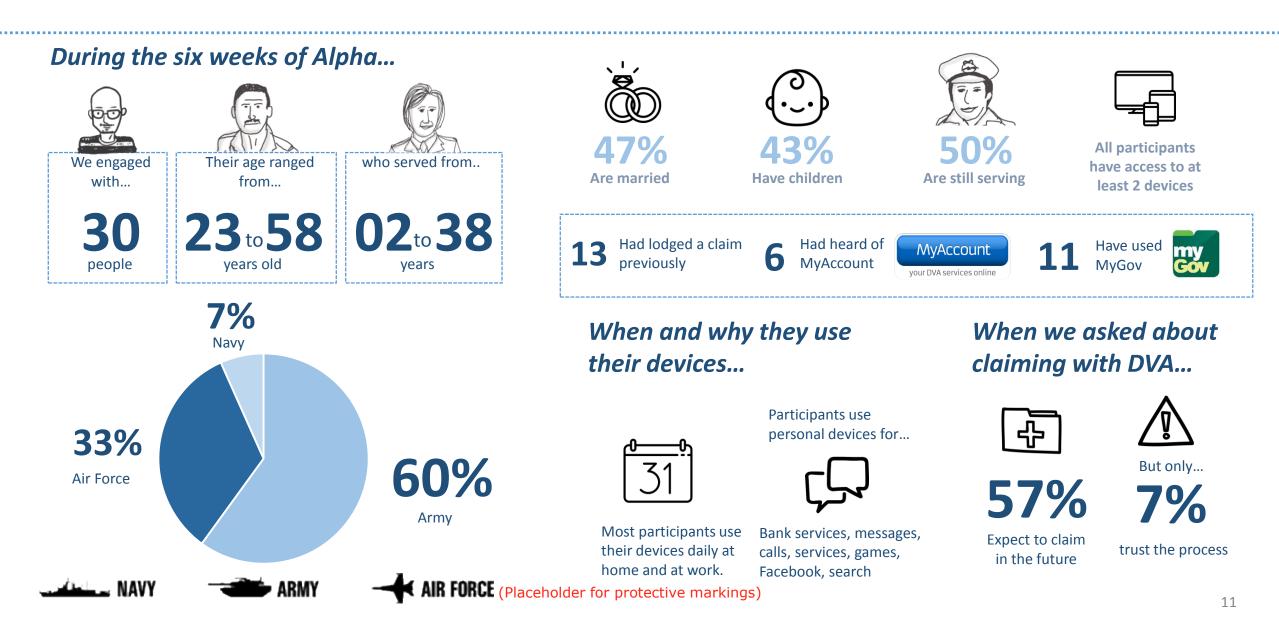


Activities

- Weekly user testing interviews
- Co-creation workshop

Alpha demographics

We tested prototypes with a diverse range of users in order to ensure that the design of the MVP responds to our users' needs.



Sprint 1 of Alpha - testing with Place Place Protective markings)

The aim of user testing in Sprint 1 of Alpha was to test the willingness of users to share data and explore how DVA can interact with users in a way that is meaningful for them.



User testing for sprint 1 of Alpha was centred around three 'how might we' questions:

- 1) How might we contact clients at a time when it is most relevant?
- 2) How might we make this contact meaningful for clients?
- 3) How might we share data with Defence in a way that clients are comfortable with?



Participants were walked through the scenario of Jane who is thinking of leaving Defence and becomes aware of DVA through a meeting with an OBAS officer. Jane wants to tell DVA about an ankle injury.

With the scenario in mind, participants navigated through the service.



Usability Goals

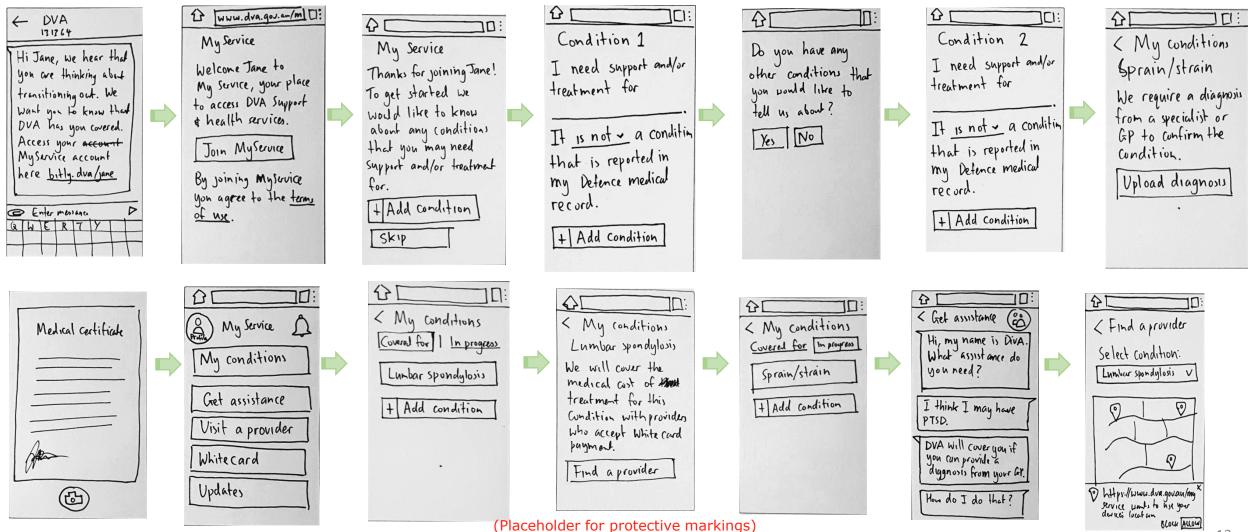
As this was the first round of user testing, we focused on asking ourselves:

- Did the participants understand the concept, features and outcomes?
- Was DVA's role clear and well received?

At this stage we were also looking for general feedback about the concept and potential features.

Sprint 1 of Alpha - prototype testendid With the te

The first concept tested was MyService. The concept aimed to test how users respond to DVA proactively initiating contact when they begin transitioning out of Defence.



Sprint 1 of Alpha – analysis of (1984) det estimations)

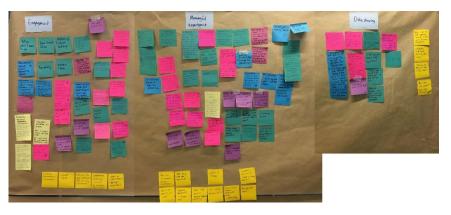
The first prototype was tested with four former members of Defence and one serving member located in Canberra.

Concept	The	mes	Evaluation	Next steps
Text message When DVA receives notification that a serving member is thinking about transitioning, they would send a text message with a link for the user to access 'MyService'.	Pros V • Makes the process seem simple	Cons X Users wanted to initiate contact Impersonal No context given No explanation Concerns about security 	 The text message was too far fetched for users. Users were okay with Defence sharing data with DVA as long as they had visibility of that data and they knew what the benefits were. Users wanted to understand more about what DVA does before interacting with them. 	 Create experiment to test scenarios where users initiate the first contact with DVA. Investigate whether users prefer to understand about DVA services first.
'My conditions' and 'Add condition' page The user will have the option of adding a new condition in order for DVA to determine liability and also view accepted conditions and conditions submitted. The concept aimed to test alternatives to the term 'claim' with users.	Pros V • Simple	 Cons X Some people didn't know the diagnosed term of their condition Negative association with the word conditions Confusion with 'covered for' and 'in progress' 	 Users had different ideas about whether they would type in the diagnosed term or 'back' or 'knee' when adding a new condition. Users interpreted terms quite differently and not everyone responded well to the term 'condition'. 	 Change the term 'condition' back to claim or test an alternative term.
Upload document Once users had submitted a condition to DVA, they needed to provide a picture of the diagnosis.	Pros √ Simple Can be done instantly 	Cons X Issues with security 	 Most users were okay with uploading a photo, however there needs to be another option for user's who are uncomfortable with this. 	 Provide two options for providing medical diagnosis, uploading a photo and scanning a PDF document.
Get assistance The concept of an online chat was tested with users in order to see if users would be comfortable interacting with a virtual assistance service.	 Pros V Instant response Option if they get stuck 	Cons X Not suitable for sensitive issues Wording needs to be appropriate 	• Every user interpreted the meaning of 'get assistance' differently. Need to be clear and straight forward with words. If the service is an online chat then say 'online chat'.	Revise message
Find a provider This page provided the user with the opportunity to view providers near them that accepted the White card.	Pros √ • Useful	Cons X • New users did not know ୯.୮୧୩ ଅନେମ୍ପାର ଜେମ୍ବର୍ମ୍ବର ନେଦ୍	• Overall this concept tested well. tective markings)	• Continue

Sprint 1 of Alpha – analysis of (1984) det destrikes markings)

Prototype 1 was tested with four former members of Defence and one serving member located in Canberra.

Findings from Sprint 1





"How did you get this information?" – (mobile number)

> "Is this just for claims? What is the link with DVA?"

Meaningful "It reads: Do you have a

condition? Prove it! It could be more personal – we have a range of services, what do you need?..."

> "It's easy to use and understand, but there is a cost to go to a GP, who would pay?"

"Provide information on where we can go for treatment"

Data privacy

"How did you get this information?" – (mobile number) "I trusted because it's the government"



Questions for next the sprint...

- 1. How might we engage with our users?
- 2. What terms better resonate with our clients?
- 3. How might we articulate our service offering?
- 4. How might we create a positive experience of data sharing between Defence and DVA?



Next steps

Broaden our scope by testing:

- different engagement channels
- data sharing from Defence

Sprint 2 of Alpha – testing wither sor protective markings)

We broadened our scope to test different engagement channels and data sharing from Defence.



Objectives for Alpha Sprint 2:

- 1. How might we engage with our users?
- 2. What terms better resonate with our clients?
- 3. How might we articulate our service offering?
- 4. How might we create a positive experience of data sharing between Defence and DVA?



Walk participants through different concepts that explore different approaches and contexts:

- Face to face engagement
- Online engagement
- Data sharing



Usability Goals

In sprint 2 of Alpha we looked for general feedback about the different concepts presented.

Sprint 2 of Alpha – prototypes trasted rowith useries

In Sprint 2 of Alpha, seven high level concepts were tested with users. The prototypes aimed to explore how users prefer to engage with DVA.

Streamlining through data sharing

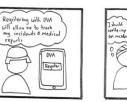
These concepts were based on streamlining claims through data sharing. They are simple online solutions that can be completed independently.

Idea 1 ' Integrated'

Users sign up on enlistment and report incidents/injuries as they go until they need to make a claim

I've uplocedal your medical report with DVA & Detenge









Idea 2: 'Straight through pre-fill'

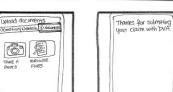
A prefilled claim form that allows documents to be uploaded easily











aded easily

Extra assistance

These concepts were designed to be more personal. They aimed to test if users preferred to complete the claim with peers or required one on one interaction with the claims assessor.

Idea 3: 'Booking appointment'

Users can book an appointment with a claims assessor to discuss claim



DVA offers a range of

Services including.

Port 1 of seminar





Idea 4: 'Practical workshop'

A workshop where users are walked through the claims process at the transition seminar







DVA

MyClaims

Sprint 2 of Alpha – concepts testeder Withertivs Perkings)

Online assistance

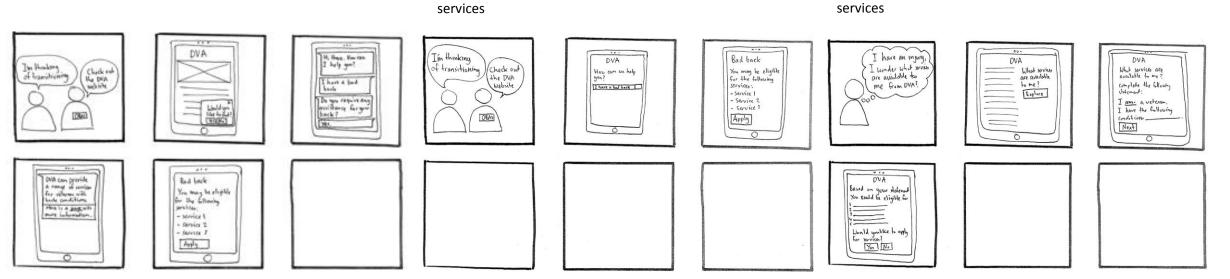
These concepts offer online assistance for users to navigate DVA's services. They aimed to test whether users would prefer to find out more about DVA before finding out about their entitlements.

A search function to help users navigate DVA

Idea 6: 'Search box'

Idea 5: 'Chat service'

Users can seek assistance via an online chat



Idea 7: 'Wizard'

An online wizard that assists users to navigate DVA

Sprint 2 of Alpha – analysis of @sequeres markings)

Prototype 2 was tested in Sydney, with two serving members and two former members, and in Canberra with two former members.

Concept	The	mes	Evaluation	Next steps
1. Integrated Users sign up on enlistment and report incidents/injuries as they occur. It allows a way for users to self manage and keep track of conditions until they need to make a claim.	 Pros V Seamless transition Removes the need to collect documents Ability to include DVA in the process as incidents happen Accurate way to track data Simple to understand 	Cons X • Not all incidents are reported • There needs to be trust that reporting incidents won't affect career	 This concept tested really well. Users like that they had visibility of the data that DVA had access to but also that they were in control of what was reported and could manage this information on their phone. The user was also able to decide when they wanted to claim with DVA. 	 Future designs will keep in mind that users like visibility on data and information known to DVA and also like to have a certain level of control when it comes to managing that data. This concept is not suitable for the 20 week project as it is focused towards serving members who are not yet ready to claim with DVA. Can be an option for wider VCR/DVA.
2. Straight through pre-fill An online claim form that prefills known information and allows documents to be uploaded easily. This concept was designed to test whether users responded well to a more conventional service and to test if users were comfortable completing the claim independently.	 Pros √ Visual element of the avatar Simple to understand Useful 	 Cons X Only ideal for simple claims Difficult to access during deployment Questioned where the role of the advocate would be Face to face interaction would help ensure a beneficial outcome 	 Users responded well to this idea. There is sense that users associate face to face interaction with assurance for their claim outcome. 	 Evolve this concept to test with users. Any service that is designed to be completed independently will be reliant on DVA building trust with users.
3. Practical workshop A workshop where users are walked through the claims process at the transition seminar.	Pros √ • Support of peers	Cons X The transition seminar is too late to begin interacting with DVA (Placeholder for protect) 	 Users responded well to completing the claim with the support of their peers. This method was only suitable for claims with limited sensitivities. Users also thought that they needed to engage with DVA well before the transition seminar. 	 Future designs will test engaging with users before the transition seminar. The importance of peers in supporting and influencing users needs to be kept in mind.

Concept	Ther	n(Blaceholder for protective	e markings) Evaluation	Next steps
4. Booking appointment Users can book an appointment with a claims assessor to discuss their claim. This concept aimed to test whether users prefered face to face contact. This concept assumed back end straight through processing.	 Pros V Ability to have contact with someone 	Cons X • Unsure about going through another organisation	• This concept may be suited for people who need to be able to talk to someone before they get their claim determined. However, users did question the ability to find time for an appointment.	• This concept will suit a particular group of users that require extra support. It is clear that users require channel choice and there needs to be a simple online option for users who are happy to interact with DVA independently.
5. Chat service Users can seek assistance via an online chat	 Pros V It would be helpful if it was integrated into another service Would be used to provide further information and quick clarifications Eliminates time spent researching 	 Cons X Needs to give correct and complete information in order to be useful Need to trust that interaction won't affect claim Impersonal 	 Users thought this would be useful if it was combined with another service like 'straight through prefill'. 	 This concept will continue to be tested as a feature of a broader service. Further testing will explore when users would use this service and what their expectations would be. As this will most likely be out of scope for the 20 weeks, if it continues to test well it will be recommended to wider DVA for future projects or future iterations of Lighthouse. Further testing will explore different ways users prefer to contact DVA when they need assistance.
6. Search box A search function to help users navigate DVA services. This concept aimed to test whether users would use a search bar to find what they needed with DVA.	 Pros V Most users would use this Good to get some insights as to what might be available. Good for specific injuries Straight forward Good as a start to interacting with DVA 	Cons X Dependent on how accurate the results are 	 The search box tested well, most users understood what it was meant for and said they would use it. It was an ideal way for users to find out more information about DVA. 	 This is not within the scope of the project. Should be recommended as part of wider DVA strategy.
7. Wizard The wizard assists users to explore DVA's services. This concept aimed to test whether users preferred to understand DVA's services before determining their liability.	 Pros V The 'wizard' prompt questions helps to eliminate guessing for users 	Cons X • The purpose isn't clear • Users don't find it helpful to find out about services before they knew what (PIECENVICE: IIED FOTECTIVE	 Users prefer to establish what they are eligible for before they look through services. e markings) 	 This is not within the scope of the project and will not be tested further.

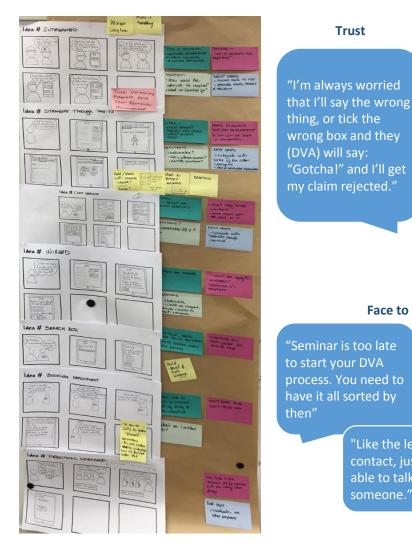
Sprint 2 of Alpha – analysis of (Usedender Estrings)

Face to face

"Like the level of contact, just being able to talk to

Prototype 2 helped us validate the concept of 'data sharing' and identify other features that are of value to users.

Team findings from Sprint 02



Integrated "That's fantastic. "It cuts all the unknown out of the process." "That's what it should be like; Defence housing is

like that; need to be able to email; send me an email; this should be a combination of this and the data share"



Questions for the next sprint...

- 1. How might we create a lean platform that combines data sharing and input from our clients?
- 2. What terms and visuals best resonate with our clients?
- 3. What are the minimum steps we need to lodge a claim?



Next steps

The concept 'integrated' received great feedback, so our next steps is to unpack the details and validate it with clients. We will add some elements from other well received concepts such as 'chat', 'visual elements' and 'wizard'.

Sprint 3 of Alpha – testing wither sor protective markings)

We unpacked the concept 'integrated' tested in Sprint 2 of Alpha that combines data sharing and simple claiming.



Objectives for Sprint 3 of Alpha:

- How might we create a lean platform that combines data sharing and input from our clients?
- 2. What terms and visuals better resonate with our clients?
- 3. What is the minimum steps we need to lodge a claim?



Walk participants through MyService, an integrated service that will integrate data from Defence and allow users to make new claims.

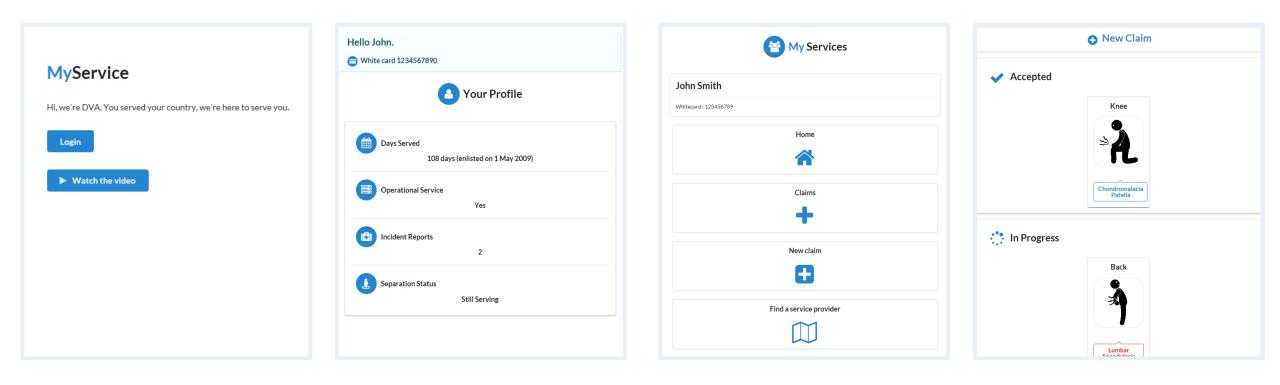


Usability Goals

In Sprint 3 we looked at specific feedback including the use of terms, profile information, visual elements and explored if there are any gaps in the prototype.

Sprint 3 of Alpha – moving from prover to the transmission of ML

The third prototype tested with users was an iteration of MyService. The application allows the user to view information about their service and submit a claim using a simple online form.



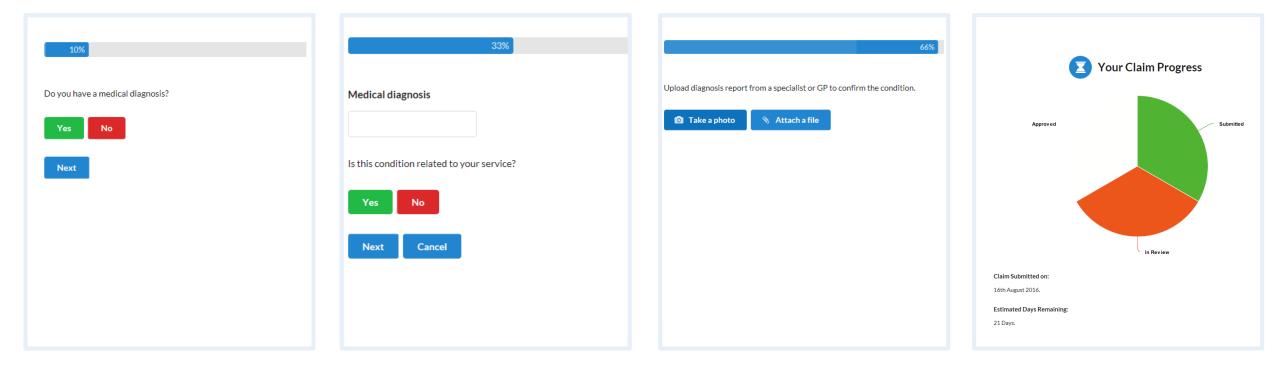
Users are presented with a login screen and the option to watch video.

The first page presents the user with basic information about their profile.

The menu page allows the user to navigate to different features.

When clicking on 'claims', users have the opportunity to view current claims and submit a new one.

Sprint 3 of Alpha – concept tested devit protestive markings)



Users are asked to nominate if they have a medical diagnosis.

... and asked if the condition is related to their service.

The option is then given to take a photo of the medical diagnosis or attach the document as a pdf.

The last page allows the user to view the progress of their claim and the estimated days remaining.

Sprint 3 of Alpha – analysis of (Used dirfosignetive markings)

We tested this prototype with five serving members of the AirForce at HMAS Harman base and three members of the Australian Federation Guard. Testing was conducted in the ACT.

Concept	Th	emes	Evaluation	Next steps
1. Log in page Users were given the option to login or watch a video on DVA. Once logged in, users were taken to a homepage that provided an outline of basic data that DVA had on the client. This includes days of service, incident reports, separation status and whether they had operational service.	Pros V • Transparent • Straight forward • Data was relevant	Cons X The title 'Home page' is confusing This page should include contact details 	 Users responded differently to the video, some would watch it, whereas as others saw it as meaningless. When looking at the home page, users expect to be able to make sure the information is correct and update it if it isn't. 'My profile' was seen as a more appropriate heading for this page. Users did not know what the White Card was. 	 Could test different ways of presenting the video so the user can have some visibility on its content.
2. Claims Users are able to click on 'claims' in order to see what conditions have been accepted and what claims are being progressed by DVA. Users can then go through 'New claims' in order to tell DVA about a new condition.	Pros V Quick and simple 	Cons X Having 'new claims' and 'claim' under two headings is confusing Format is not suitable for many conditions 	 If the client has a lot of conditions, this page may be difficult to navigate. There was suggestion that conditions could be categorised to make the page present clearer. 	 Need to look for alternative ways of presenting 'claims' and 'new claim' option. The images are large and distracting, can be altered for further testing. Design team can look at different ways of presenting this page.
3. Medical diagnosis Users are asked whether they have a medical diagnosis for their condition and if it is related to their service. They are then asked to upload a file or take a picture of the medical record.	Pros √ • Accessible	 Cons X Some users thought taking a picture would be risky if the document was illegible Confusion over what evidence needed to be uploaded Instructions need to be clearer Should be on one page 	 Users need to be given options when uploading evidence (as sometimes it is difficult to get access to a scanner). However, there was uncertainty over the risks of uploading a photo that will need to be considered. 	 If the service is going to include the option to take a photo of the document, we will need to manage the risk of photos being illegible. Questions on medical diagnosis should be on one page.

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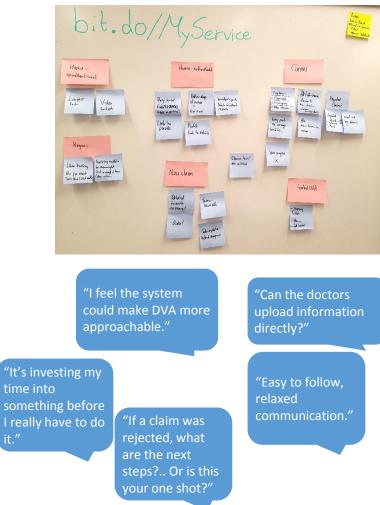
Sprint 3 of Alpha – analysis of (Perelative markings)

Concept	The	emes	Evaluation	Next steps
4. Your claim progress Once users had submitted their claim they could view the progress of the claim. This page gave an estimation of the remaining days.	Pros V • Transparent, explicit tells an estimate number of days towards the next interaction	Cons X • The pie chart was confusing	 Users did not respond well to the pie chart. The visual was interpreted very literally and the logic did not make sense to them. Users liked that they had transparency with the process. If all the information was available and clear, they would not feel the need to contact DVA. If the claim was not progressed by the estimated time provided, users expected an explanation to be given. 	• Test a similar progress page using a more straight forward visual. Test what information users expect to see on this page, in what format and whether they expect to be notified of updates.
5. Online chat There was an option at the bottom of each page to use an online chat service. Users would be able to access a support service for people requiring extra assistance when completing the claim and/or for other services. The purpose was to test if users were comfortable interacting with an online chat service.	 Pros V Support in real time Simple, good for asking quick questions 	 Cons X Confusion over interacting with a computer or real person Only okay if there are measures put in place for users who are experiencing mental health issues (i.e. a safe exit) The conversation used for the prototype 	 The conversation used for the prototype made the purpose of the chat service unclear. Users could not tell whether they were communicating with a person or a computer. Most users preferred it if they were speaking to a person. However, they didn't mind speaking to a computer as long as it was correct. 	 If this concept is to be tested further, the design will need to take into account users who may be experiencing issues with mental health.
6. Find a provider Once users have a claim approved with DVA they can access a locator service to find a provider that accepts the white card.	 Pros √ Useful Familiar Great to know who accepts White Cards 	Cons X Prefer list and map experience (Placeholder for protection)	 Users found this useful. There was a suggestion that the links to providers should also include information on the providers like contact details. ve markings) 	 This concept can be considered for future iterations of the project.

Sprint 3 of Alpha – analysis of (1988) defendences of (1988)

Prototype 3 helped us validate 'data sharing' concept and identify other valuable features.

Team findings from Sprint 10





For next sprint...

We have learned:

Winners:

- Simplicity, a platform easy to follow
- Data sharing with Defence is okay as long as the purpose is clear
- Making it easy to find a provider

Iterate:

- Pie chart to capture progress
- Message to represent DVA value proposition

Question for next sprint:

• What is the minimum information required for lodging a claim?

(Placeholder for protective markings)



Next steps

Our next steps are focused on refining our service offer, continuously testing terminology, and communication channels

We determined there are two streams of claims:

- Straight Through Processing (STP) and Non Liability Health Care (NLHC) claims— Clients will need a diagnosis and a minimum service duration to apply without the need to prove causation being related to service
- Non Straight Through Processing (NSTP) Clients will need to submit a diagnosis and details about how the causation is related to service.

Sprint 4 of Alpha – testing wither sor protective markings)

We refined our product and validating what is the minimal information required for straight through processing.



Objectives for Sprint 4 of Alpha was to solve the following challenge:

 What is the minimum information required for lodging a Straight Through Processing (STP) claim?



Walk participants through MyService, an integrated service that will integrate data from Defence, and allow users to make new claims.



Usability Goals

In Sprint 4 of Alpha we are looking to validate latest changes made to the prototype.

Sprint 4 of Alpha – refining the protective markings)

The fourth prototype tested with users was an iteration of 'MyService'. This prototype combined the 'new claim' questions to one screen. In this prototype users were able to view notifications on their claims and had the option to contact DVA.

MyService Hi, we're DVA. You served your country, we're here to serve you.	John Smith Notifications Lumbar Spondylosis Claim Approved. 2 New Macroece Parciad	New claim 1. What is your medical diagnosis? Enter the term provided by your GP or Specialist used to describe the condition you are claiming for (eg. 'Acute meniscal tear of the knee').
Login Artivate your account	2 New Messages Received. Claims 2 Approved.	2. Is the condition you are claiming related to your service? Yes or No
► Watch how to make a claim	 > 1 In Progress. > 1 Rejected. O New Claim 	3. Upload medical document The medical document must state the medical diagnosis and be signed by a GP or Specialist. Upload
	Messages 2 Unread Messages	By clicking on Submit, you accept the terms and conditions of this service and acknowledge that all information you provide is correct and understand that penalties may apply for providing faise or misleading information. Submit Cancel

Users are presented with a login screen and the option to watch video.

The first page presents the user with basic information about their profile.

Clicking on 'New Claim' allows users to submit a new claim. The questions are presented on one page.

Sprint 4 of Alpha – refining the product of protective markings)

 Success! Your claim for Acute meniscal tear of the knee has been submitted. 	<u>«</u> _Claims	Claims
We will review your claim and be in contact with you within 21 working days to complete the process.	Claimed Condition: Acute meniscal tear of the knee Status: In Progress	Approved In Progress
Track progress	Submitted 25th August 2016 Estimated Days Remaining: 21 Days	Rejected Psychological Injury Bipolar disorder New Claim
When the claim has been submitted users receive confirmation and are able to track the progress.	The progress page displays the condition, status and estimated days remaining.	The 'claims' page displays claims that have been approved, rejected and in progress.

Sprint 4 of Alpha – refining the Paper of Protective markings)

<u>≪</u> _Claims		Messages		🚭 Contact DVA
Claimed Condition: Bipolar Disorder Status: Rejected		Subject	Date received	▼ Write to us
		Your claim has been approved	<u>20. Aug. 16</u>	Inquiry Type :
Submitted 10th June 2016	Rejected 15th July 2016	We have good news for you	<u>01. Aug. 16</u>	
Reason for rejection: Claimed condition is unrelated to service.		Your claim has been allocated to our assessor	<u>01. Aug. 16</u>	Message :
Next Steps You can continue to seek assistance through the following options: - Other government services - Appeal this decision - Find an advocate		Show more messages		Send Request a call back

Where claims that have been rejected the user is presented with a list of next possible steps.	From the home page, users can access messages. These messages inform the user of any claim updates.	From the home page, users are also able to contact DVA through an online form or by requesting a call back.
		Dack.

Sprint 4 of Alpha – analysis of (elandro analysis)

This prototype was tested with four serving members from RAAF Base Wagga.

Concept	Ther	nes	Evaluation	Next steps
1. MyService login page	Pros V • Simple • Video	Cons X • The opening line is cheesy • Don't know what MyService does • Won't use this if there is no trust	 Users expected to be able to login using their email. The front page implies the application is simple. Users who had interacted with DVA before found the opening line, 'You served your country, we're here to serve you', cheesy. Users who were new to DVA liked it. 	Brainstorm message.
2. Profile	Pros V Straightforward 	 Cons X Wanted more information under operational service Expected contact details to be there 	 Language was viewed as casual. This was not an issue, however users were more likely to recognise a link to Defence if the language was formal. Users expected to be able to edit information. 	
3. New claim/claim	Pros V Easy to follow 	Cons X Confusion over what to type in diagnosis No role for the advocate 	 Users found this process simple, the questions were straightforward. There is still an issue of trust with DVA, and users questioned where the role of the advocate fit in. 	 Include a question in the form that asks users if they received any assistance from an advocate and if they would like to nominate a representative for DVA to contact.

Sprint 4 of Alpha – Analysis of (Paseboldet @ stores to markings)

Concept	The	mes	Evaluation	Next steps
5. Progress page	Pros V • Simple	 Cons X Want to know how they will be contacted Preferred 'options' over next steps Wanted to see more information 	Users said the term 'rejected' was fine, the meaning was clear. If the claim was rejected they wanted to be given more of an explanation. For the rejected claim, users were interested to see what happened when they clicked on 'appeal' under next steps.	
6. Messages/notifications The home page displays two options for users to view communications from DVA.	Pros √ • Useful	Cons X Preferred notifications at the top of the page 	Users preferred to click 'notifications' at the top of the page.	Remove 'messages' and keep 'notifications'.
7. Contact DVA	Pros √ • Choice • Convenient	Cons X Issue with trust 	It is clear that users have different preferences when it comes to contacting DVA and need to be given channel choice. There were users who mentioned that they would prefer to see a phone number.	Can add a third option to the page so users can choose to call DVA.

Sprint 4 of Alpha – Analysis of (Pasebolie terstoirestinge markings)

Prototype 4 helped us validate 'data sharing' concept and identify other valuable features





"What should I write? Exactly what the doctor wrote? – How do I know if it's correct?"

> If I need to add medical document, I would need to ask our local medical center to provide my documentation."

"I don't have a smartphone, but this is very easy to follow."

"Casual or formal is OK, just pick one and stick to it."

> "What if I was injured during an 'approved' activity, does it mean it's related to my service?"





For next sprint...

 Our Straight Through Processing (STP) prototype is being well received. Users with different tech experience find it easy platform to understand and navigate.



Next steps

Focus on Non Straight Through Processing (NSTP) claims and designing two models to validate initial assumptions about how to request information and easily present steps and why they are important to the process.

Sprint 5 of Alpha - user testing Placeholder for protective markings)

We are refining our product and validating what is the minimal information is required for Non Straight Through Processing (STP).



Objectives for sprint 5 of Alpha was to solve the following challenges:

 How might we create a consistent experience when our clients have different types of claims? (STP, NSTP and NLHC)



Present prototype A & B to our users to explore which prototype users prefer and why.

Users are given a scenario of a Defence member on overseas operational service who had an injury that was medically treated, however no incident report was filed.



Usability Goals

In sprint 5 we are looking for specific feedback of prototype A & B as well as identifying gaps and moments of potential confusion.

Sprint 5 of Alpha – concept te Steedelder for the strengs (strengs)

In Sprint 5 options for NSTP were tested with users. Two prototypes (A and B) were tested. These were tested with five serving members of the Army at RAAF Amberley Base, Brisbane and two former members located in Brisbane.

Prototype A had questions over three pages. This prototype allowed the user to provide more information/evidence including a free text option for users to fill out how their condition was related to their service.

A construction of the sender o		
<pre>La De partier au microal trainguises:</pre>	Get cover	Get cover
2. What is your medical diagnosis? 2. What is your offer data is status to	1. Do you have a medical diagnosis?	Acute meniscal tear of the knee
2. Watking our madical diagons? Image: Base in a provide in your Gass and a statement and and provide in your Security and Provid Your Security and Provide in Your Security	Yes or No	To help you get cover, we need some more information about the condition and how it occurred. Please answer the questions below to the best of your ability
a be condition you are claiming related to your service? v or you have scopy of the medical document? to be condition wat task the medical document? v for a box v	2. What is your medical diagnosis? Enter the term provided by your GP or Specialist used to describe the condition you are claiming for (eg. 'Acute meniscal tear of the knee').	
4. Do you have a copy of the medical document? 4. Do you have a copy of the medical document? The medical document? • Color and you franceice medical irestments of this condition? • Under disconter nutstate the medical document? • Color and you franceice medical irestments of this condition? • Color and you franceice medical irestments of this condition? • Color and you franceice medical irestments • Color and you franceice medical practice on midead information • National consension • and you franceice medical practice on midead information • National consension • and on this conditions of this service and condit	3. Is the condition you are claiming related to your service?	
Image: Image	4. Do you have a copy of the medical document?	
• Uplaad medical document 5. Is the diagnosis in your Defence medical records? The medical document must state the medical diagnosis and be signed by s CP or Specialist. • Yee < No	The medical document must state the medical diagnosis and be signed by a GP or Specialist. Yes or No	
The medical diagnosis and be signed by a GP or Specialist. Yee or No 6. Upload invoice You are entitled to reinbursement for the cost of obtaining a medical diagnosis. V Upload invoice You are entitled to reinbursement for the cost of obtaining a medical diagnosis. V Upload invoice Yee or No Yee or No <td></td> <td>1000 word limit</td>		1000 word limit
Provide the name of your treating medical practitioner/hospital/specialist (optional) Vou are entitled to reinbursement for the cost of obtaining a medical diagnosis. Provide the name of your treating medical practitioner/hospital/specialist (optional) Voluation Provide the name of your treating medical practitioner/hospital/specialist (optional) Voluation Provide the name of your treating medical practitioner/hospital/specialist (optional) Provide the name of your treating medical practitioner/hospital	5. Is the diagnosis in your Defence medical records? The medical document must state the medical diagnosis and be signed by a GP or Specialist. Yes or No	
2. What set vices do you heed for this condition: 2. What set vices do you heed for this condition: 1. Treatment 0 Rehabilitation 0 Attendant care services 0 Attendant care services 0 Household care services 0 Permanent impairment compensation 0 Incapacity payments 0	6. Upload invoice You are entitled to reimbursement for the cost of obtaining a medical diagnosis.	Provide the name of your treating medical practitioner/hospital/specialist (optional)
 Treatment ? Rehabilitation ? By clicking on Submit, you accept the terms and conditions of this service and acknowledge that all information you provide is correct and understand that penalties may apply for providing false or misleading information. Household care services ? Permanent impairment compensation ? Incapacity payments ? 	7. What services do you need for this condition?	
Attendant care services ? Household care services ? Permanent impairment compensation ? Incapacity payments ?	Treatment 3	N Upload
Permanent impairment compensation Incapacity payments	Rehabilitation	penalties may apply for providing false or misleading information.
	Household care services Permanent impairment compensation	← Previous Submit ✓
	Incapacity payments On Tknow, please contact me	

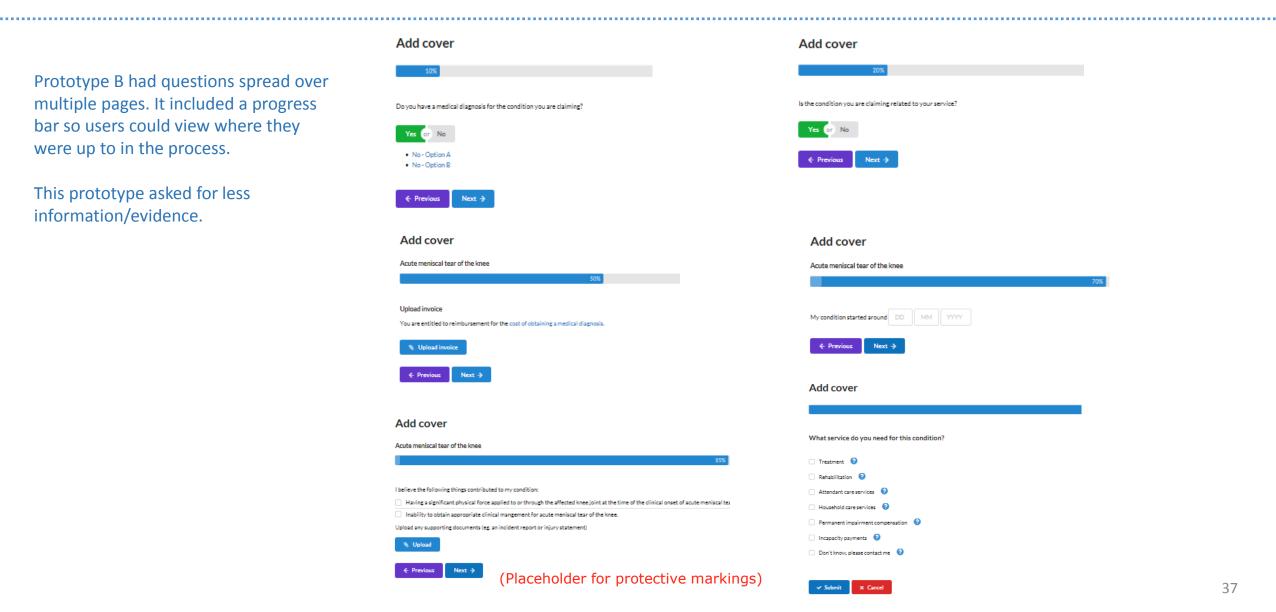


Sprint 5 of Alpha – concept testeetded (Vit Protective markings)

In Sprint 5 options for NSTP were tested with users. Two prototypes (A and B) were tested. These prototypes were tested with 5 serving members of the Army at RAAF Amberley Base, Brisbane and two former members located in Brisbane.

Prototype B had guestions spread over multiple pages. It included a progress bar so users could view where they were up to in the process.

This prototype asked for less information/evidence.



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Sprint 5 of Alpha – analysis of (1984) det estimation markings)

This prototype was tested with five serving members in the Australian Regular Army (ARA) at RAAF Base Amberley, Brisbane and two former members located in Brisbane.

Prototype	Concept	Themes		Evaluation	Next steps	
A & B	MyService login page The login page provides the opportunity for users to log in, activate their account or watch a video on how to make a claim.	Pros V • Simple • Video	Con • Need to mak welcoming for	e it more	All users said that they would view the video expecting to see information on what the process involved and documents/ information required to complete the process. Users felt that the front page could be more welcoming for first time users.	
A & B	What services do you need for this condition? This question was included in both prototypes. It provided the user with a list of services that DVA offers asking them to select which applicable services.	Pros V • Easy to follow	Con • Confusing	ıs X	Some users thought this question was asking them what they were currently receiving/ needed. Others were not sure about what each service meant, only one user checked the definitions provided.	
A	Medical diagnosis There were a series of Yes/No questions related to the diagnosis of the condition. Users are asked to upload their medical diagnosis.	Pros √ • Straightforward	Con • Wanted mor under operat	e information	Users understood the questions and were able to answer them without any issues.	
A	Incident details These questions asked for dates and details about the condition/incident and gave a free text option for the user to state how their condition was related to service.	Pros V • Easy to follow	Con • Prefer more free text • Option for w dates are not	direction for hen exact	Users didn't mind the free text option, however they all provided one sentence including information that had already been provided.	
В	Medical diagnosis Users are asked to provide the diagnosis for their condition and upload the diagnosis.	Pros V Straightforward (Placeholder) 	Not able to a	e information tional service dd contact	Users like the progress bar at the top of the page as it gave them an indication of the time required to complete the process.	

Prototype	Concept	The Meseholder f	or protective marking	^s Evaluation	Next steps
В	Incident details Users are asked basic details about their condition including when it occurred, if it is related to operational service and asked to select options as to how their condition is related to service.	Pros V • Minimal information required	Cons X • Concern that minimal information may effect their claim outcome	One user mentioned that there should be an option at the end to add further information. Users felt that they needed more options when asked how their condition was related to service.	
A & B	Progress summary Once the claim has been submitted, users are able to view the progress on the claim. There are also able to see the estimated days remaining on the claim.	Pros V • Straightforward	Cons X More information Name and contact details of claims assessor not included Questioned where the role of the advocate fits in 	Users expressed that they would still prefer to talk to someone over the phone at some point throughout the process.	

We also found out...



In order to access medical records, serving members need to make an appointment with the Defence doctor 24/48 hours in advance. They either bring their own paper or the doctor will scan a paper copy of their records.



None of the five serving members spoken to had their records stored in Jedi (an electronic system for storing medical documents).



When asked, all users thought that it would be useful to receive a summary of responses to keep as a reference.



One user suggested it would be nice to hear about the service when visiting the Defence doctor...

Others suggested that DVA should utilise the annual mandatory training sessions to tell users about the service.



Three users liked the term 'cover'. They related it to health insurance and assuring future coverage for their health. One user was indifferent to the term and three users found 'cover' confusing.

IT solution architect workshop^(Placeholder for protective markings)

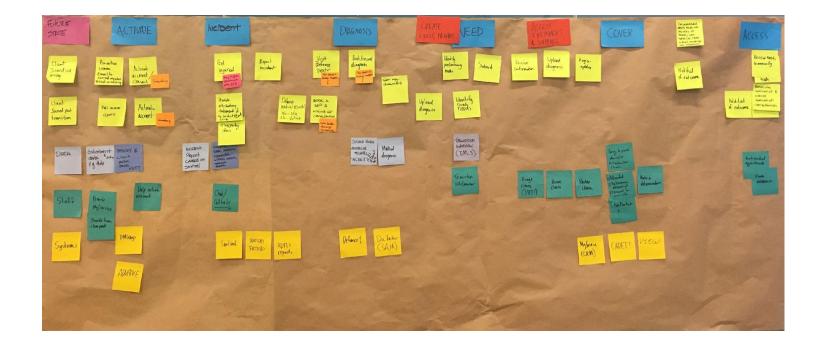
Tuesday 6 September 2016

On 6 September 2016 the Lighthouse team organised an IT solution architect workshop. The purpose of this workshop was to engage with IT and business stakeholders to explore possible solutions, opportunities, issues and risks. The workshop focused on technology, platforms and infrastructure, authentication and back-end integration. The findings of this workshop will inform the minimal viable product as well as future iterations. 16 participants attended from DVA and DHS.

	Opportunities	Solutions	Risks	Issues
1. Technology, platforms and infrastructure	• ASD compliant	Store only minimal data set required	 Consistency of determinations 	 Performance Instability of current systems Legacy platforms not available 24/7 Wrong condition accepted may mean double work in back-end systems Required resources for integration
2. Authentication	 Use existing technology/processes (e.g. MyAccount, myGov, DTA, DHS, OBAS) Use existing Defence authentication. SSL certificates Fingerprint authentication using google/apple id Double factor authentication RSA token 			
3. Back-end integration	 Faster access to Defence data Integration with IPS project Business to Business service gateway Content Management System 	 Creating a client profile through TRIM using ISH PDF document stored in TRIM Email generated to staff mailbox Build basic staff facing screens to view claims Event based triggers (e.g. claim received, claim assigned etc) Staff member who creates client profile cannot issue determination 	Siloed process.	 Qualifying service data requested from Defence is business hours only File number will need to be generated in order to issue white/gold card Managing clients with multiple claims

40

Section 3 – Future state user journeys and service map



Our client personas

From the initial 23 clients interviewed we developed five user personas. These personas help us understand our clients' characteristics, motivations, drivers and goals. This knowledge allows the team to make better design decisions based on user needs. Full information can be found in our Discovery pack.



George

Age	52yrs
Gender	Male
Service history	Officer, Army
Occupation status	Full-time
Family	Married, 1 child
Other	Lives off base in a regional area

George served in the Army for 20 years. As he is thinking about transitioning, he attends a transition seminar and learns that he needs to get his claims in order to prepare for retirement.

George has several claims to lodge with DVA. He does some research on his own and gathers documents from Defence but is also recommended an advocate who goes over his claim.



Helen

Age	38yrs
Gender	Female
Service history	Officer, Airforce
Occupation status	Part-time
Family	Married, 2 children
Other	Lives off base

Helen has served for 20 years in the Air Force. Her priority in her career in Defence has recently shifted: she is currently working in Reserves. She has put in claims relating to mental health.

Helen is currently receiving treatment from Defence and has support from family members.



William

Age	36yrs
Gender	Male
Service history	Other ranks, Navy
Occupation status	Unemployed
Family	Married, 1 child
Age	36yrs

William has had a long intense career with the Navy, being deployed multiple times to Iraq and Afghanistan, suffering from physical injuries and PTSD.

He is currently managing severe issues with his physical and mental health. He has waited over a year to receive a determination of several claims with DVA, which has made him and his family feel stuck. This has created a negative influence over his transition to civilian life.





Paul

Age	30yrs
Gender	Male
Service history	Other ranks, Army
Occupation status	Unemployed
Family	Single, no children
Other	Medically discharged, former member

Paul has served with the army for 10 years. He was medically discharged one year ago due to a shoulder injury. Paul grieves leaving the army and is on the path to create a stable life which sometimes depends on Centrelink support.

Paul is coming back to DVA to discuss less urgent needs. He has a positive relationship with his case manager who is supportive.



Jane

Age	40yrs
Gender	Female
Service history	Officer, Army
Occupation status	Full-time
Family	Married, no children
Age	40yrs

Jane is a current full-time officer. She has been in the Army for over 20 years. She has had a claim with DVA early in her career but has been holding off putting in her current claims with DVA as she is worried about how this might affect her career.

Straight Through Journey summary George – Preparing for retirement

(Placeholder for protective markings)

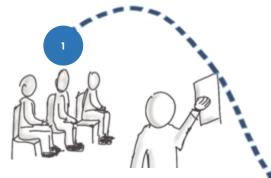
5. Determination

George receives a notification that all his claims have been finalised and DVA has accepted liability. He receives information about DVA services he could be entitled to and what the next steps are for receiving treatment. He receives a digital copy of white card that is ready to use when he leaves.

Delights

✓ George is happy that the process has been finalised.





1. Incident

is eligible to claim for.

George is a Commissioned Officer in the Army,

he has served for 20 years. He has had several physical injuries over the years that he

2. Discovery

As George is starting to think about retiring he attends a transition seminar. At the seminar he finds out about MyService and decides to get his claims in order before he leaves.

He goes to MyService to find out more information about the process. He is pleasantly surprised at how simple it looks and gathers the required medical records from the Defence doctor and incident reports.

Delights

- ✓ His medical records for his 20 years of service are provided to him on a disc.
- He is able to begin the process earlier than he had anticipated.



3. Lodgement

Delights

George starts the form and uploads the required documents. He submits them all independently but takes a summary of his responses to an advocate to make sure he had submitted everything required. He does this for extra assurance as he has submitted a few conditions.

 ✓ George hears about a good advocate through friends. He finds him very helpful.
 ✓ He is able to submit the conditions in one go.

4. Assessment

George receives a call from his claims assessor asking him if he has an incident report for one of his conditions. George is able to upload this report to MyService and receives instant confirmation that it is received.

Delights

- ✓ George is happy he is able to provide the document electronically.
- ✓ He appreciates receiving a call from his claims assessor.

6. To be continued...

George continues to keep in touch with DVA to provide updates to his conditions.

Delights

✓ George is happy that he has assurance for his conditions.





Australian Government

Department of Veterans' Affairs Department of Human Services

Journey summary Helen – Still serving but needs support

1. Incident

Prior to Helen's incident, Helen was serving full-time in the Air Force. Helen experienced a traumatic event that impacted on her mental health. Helen left full time service and tried to work in a civilian job, due to her mental health issues she couldn't perform at her best in the job. Helen decides to go part-time with the Air Force (Reserves) and lodges a number of claims with DVA including treatment for her mental health issue and claims for past physical injuries.

Pain points

 Helen finds the transition into civilian work difficult due to her mental health issues.

Delights

 Helen is continuing to be supported by the Air Force as a Reservist.

1

2. Discovery

Helen is made aware of DVA through the transition officer on her base when making the transition from full-time to part-time. The OBAS officer tells her about MyService and creates her an account. She decides to put in claims with DVA.

Delights

 The OBAS officer is helpful and provides enough information for Helen to start the claims process with the help of an advocate.

(Placeholder for protective markings)

3. Lodgement

now been submitted.

finds it useful.

Pain points

Delights

Helen decides to lodge her claims online. Once she

doctor. Helen finds this to be challenging due to the

She is then able to get digital copies of the relevant

Obtaining the medical report from Defence is a difficult process and takes time.

Helen likes that she doesn't need to provide a

detailed narrative about her mental health issues.

Helen appreciates the option to lodge online and

process and time it takes to get access to the reports.

Helen believes that there may have been a filing error.

records that she uploads to MyService. Her claims have

realises she needs medical documents to complete the claim she makes an appointment with the Defence

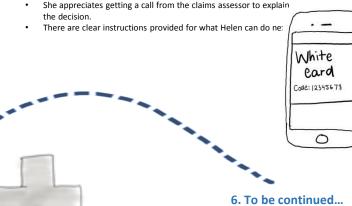
5. Determination

Helen finds the claims process for her mental health issue to be very fast as she is issued a White card very quickly. Helen is notified through MyService that one of her other claims has been rejected due to it not relating to service. She reads up on the information provided for the next steps. While contemplating what to do next, she receives a call from her claims assessor who explains the reason for her determination and what her options are.

Pain points

· Frustrated by having a claim rejected

Delights



Helen plans to appeal the claim. She receives confirmation that her other claims have been accepted and begins receiving treatment for these conditions.

4. Assessment

Once her claims have been submitted, Helen receives regular updates on her phone. Her claims assessor changes during the process, Helen is notified straight away.

Delights

• The change in claims assessor does not affect the time taken to process.





Australian Government

Department of Veterans' Affairs Department of Human Services

Journey summary William – Left in limbo

(Placeholder for protective markings)

1. Incident

William has served in the Navy for over 10 years. Whilst serving in Afghanistan he injured his back and he needed to be operated on in Afghanistan. Since this time he has experienced multiple incidents that have impacted on his mental and physical health. In 2012 William started receiving treatment for PTSD.

Pain points

 Some conditions don't get reported as it's embedded in the culture of Defence.

3. Lodgement

Once his claims are lodged, William receives updates as to the progress of his claims on his phone. He wants to know more about his claim so he requests a call back from DVA. The claims assessor calls William back and provides him with a detailed explanation about where his claims are at.

Pain points

× William prefers speaking to a person for extra assurance.

Delights

- ✓ William does not have to repeat his story, the claims assessor has the required information.
- ✓ He gets a call back within 48 hours.

5. Determination

Within the 21 days, William receives notification that 6 out of his 7 claims have been accepted. One claim has been delayed and an explanation is given in MyService. William's claims assessor contacts him to explain why this is the case.

Delights

- ✓ William appreciates getting a call from his claims assessor
- He is not concerned about the last claim as he is told it will be finalised in 2 weeks.

6. To be continued...

After a needs assessment William applies for permanent impairment and incapacity payments. As his claims have been accepted, he is able to discharge and begin settling in to civilian life with his family.

Pain points

 He has a white card but never uses it as he finds the medical system intimidating.

2. Discovery

William finds out he is going to be medically discharged. An OBAS officer tells him that he can sort out his claims using MyService. She helps him sign up and helps him submit his claim. There is one condition that William does not have a diagnosis for. The OBAS officer advises him that it will be quicker to get a diagnosis before submitting the claim.

Delights

✓ The process was quick and simple.

✓ He appreciated the support from the OBAS officer.

Pain points

- William felt that he was being discharged too early and this was a disadvantage to him.
- The Navy is a like a family for William, after discharge he felt like he was lacking that 'family' support from the Navy.



4. Assessment

William has to visit the Defence doctor for a diagnosis. He asks for a copy and uploads this to MyService. He receives confirmation of this, and now all his claims are in MyService. He knows it is going to take an estimated time of 21 days for each claim.

Pain points

 It takes some time to get an appointment with the Defence doctor.

Delights

✓ He is glad he Is able to get a diagnosis in one appointment.





Australian Government

Department of Veterans' Affairs Department of Human Services

Journey summary Paul - Starting anew

1. Incident Paul injures his shoulder playing Navy rugby. He receives medical treatment from the Regimental Aid Post (doctor) and fills in an incident report. Pain points Unless it's an obvious injury, Paul feels that people are looked down upon for going to the doctor. Delights Paul does not need treatment outside of Defence. Image: Claim with DVA make OOOO

2. Discovery

After speaking to his colleague he finds out that he should put in a claim with DVA. He talks to some of his peers to find out more about the process. He speaks to the OBAS officer who tells him to visit an advocate at the RSL. At this stage Paul finds out that he is also able to claim for malaria he caught the year before.

Pain points

➤ Paul would have preferred to have known he could claim for Malaria earlier.

Delights

 The mandatory training session was very helpful for Paul to find out more about DVA.

(Placeholder for protective markings)

3. Lodgement

Paul knows that there is an option to see an advocate, however he decides to try on his own first. He creates a logon for MyService and submits two conditions, one for his shoulder and one for Malaria. He uploads pictures of his medical records and submits these conditions. He then waits to hear back from DVA.

Delights

- ✓ As Paul was serving he found accessing documents quite easy.
- \checkmark Paul is happy he is able to fill the form in from his phone



0

5. Determination

Paul receives a notification that DVA has accepted his conditions.

Delights

- ✓ The time taken to process wasn't an issue as he was receiving support from Defence.
- ✓ It's feels good for him to know that he has support for these conditions.



6. To be continued...

While waiting for surgery for his shoulder, Paul aggravates the shoulder injury during Unit training. He puts in another claim with DVA. He receives notice that he is being medically discharged and begins the discharge process. DVA sends him information on what he could be entitled to now that he is discharging.

Pain points

- ➤ Paul thought Defence was going to be his career. He did not want to leave this soon.
- * He thought more could have been done to help him stay in Defence.

Delights

 Easily accessible information allows him to find out about support for future study.





Australian Government

Department of Veterans'Affairs Department of Human Services

(Placeholder for protective markings)

4. Assessment

Delights

place.

Paul receives confirmation from MyService that

notifications regularly and checks the progress

✓ Paul can find out information he needs in one

his claims have been received. He receives

page to find out more information.

Journey summary Jane – Still serving but holding off

1. Incident



Jane is a current full time Officer in the Army with over 20 years of service. She has made one claim with DVA early in her career due to an eye injury. She has since had a number of other incidents that have resulted in injury but has not submitted any new claims.

Pain points

Jane's initial injury impacted on Jane's study.
 She had to delay her study due to the injury.

1 AUJTRALIA

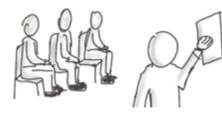
2. Discovery

For her first claim Jane's Commanding Officer (CO) helped her fill in the claim to submit to DVA. At the time Jane had no idea about DVA. Jane is now familiar with the claims process but thinks she would not have made the claim if not for her CO.

Delights

✓ Jane's CO triggering her to make a claim was something Jane looks upon fondly. To her it reinforces the notion that whilst you are in the Army they will look after you.

(Placeholder for protective markings)



3. Awareness

Jane's previous experience with DVA has made her hesitant to submit her current conditions. She has not yet seen a defence doctor as she is worried about how the claim might affect her career. She has started to hear positive experiences from her peers about their dealings with DVA. This is encouraging, however she is still not convinced.

Pain points

 Jane is hesitant to lodge any new claims as she thinks this will adversely impact her career progression.



During the annual mandatory training sessions, Jane is told about MyService. They briefly go through the application and it looks straightforward to use. She goes to the OBAS officer to activate her account. She is still not ready to submit her conditions to DVA.

Claim with DVA

mate

Delights

✓ Jane is glad that the process seems straightforward.



Encouraged by what she has heard she books an appointment with the Defence doctor to begin getting the diagnoses she knows she requires.

Delights

✓ Jane believes that she is confident enough to submit her conditions unassisted.





Australian Government

Department of Veterans' Affairs Department of Human Services

Section 1 – Minimum Viable Product, Beta phase and beyond

Beta Kick off workshop and next steps

A Beta kick off workshop was held on Thursday 8 September attended by members of the core team.

VCR Lighthouse held a Beta Kick off workshop to define the MVP, discuss the Beta pilot plan and draft user stories'

We looked at some of the problems identified in Discovery and how we planned to address this. We then came up with our core service offer:

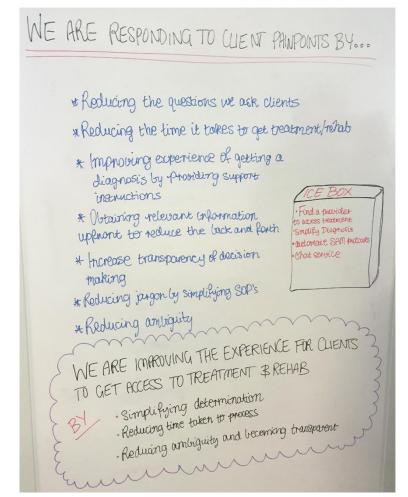
WE ARE IMPROVING THE EXPERIENCE FOR CLIENTS TO GET ACCESS TO TREATMENT AND REHABILITATION BY:

- 1) Simplifying determination
- 2) Reducing time taken to process
- 3) Reducing ambiguity and becoming more transparent

We began by listing the functions included the in MyService Alpha prototype. We then used a matrix to mark these features against the value for the client and their feasibility. With the core service offer in mind, these features were assessed as a high, medium or low priority. The features marked as a high priority became the core features of the MVP.

The team then created user stories and acceptance criteria for each story.

NEXT STEPS \rightarrow During Beta the VCR Lighthouse team will build the core screens for the MVP. The MVP will be tested as a private Beta pilot with selected clients in a supported environment.



Output from Beta kick off workshop.

VCR Lighthouse MVP and opperended of the state of the sta

The final MVP is designed to alleviate some of the user pain points identified in Discovery. The features included in the MVP are related to our core service offer.

VCR Lighthouse MVP:

The service will allow users to register an account, login, tell DVA about new conditions and upload evidence.

There are three streams included in the service:

- Straight Through Processing (STP) where diagnosis, branch of service and length of service is the minimum amount of data required to process a claim
- Non Straight Through Processing (NSTP) which will determine commonly claimed Statement of Principles to assist clients make a causal link between their condition and their service.
- Non Liability Health Care (NLHC) which will provide clients quicker access to treatment through the White Card

Initial questions regarding the clients diagnosis will determine the relevant stream.

The service will be delivered using Java/DB2 technology platform as a new service.

Future iterations of the service will also look at expanding the service to a broader user group, integrating the experience with existing DVA services and expanding the service offer.

Opportunities for the MVP:	Opportunities for future iterations:
 Reduce the time taken for users to access services. Reduce the questions we ask users Supply an accessible way for users to upload information Increase transparency by displaying Statement of Principles to users in easy to understand language Reduce ambiguity by including clear and simple directions Improve the experience for users getting a diagnosis by providing support instructions Obtain relevant information upfront to reduce unnecessary effort later on 	 Look at changing diagnosis protocols Assist users in finding a provider that accepts the White Card Automate SAM protocols Online chat service Involve third parties