REPORT: Residency Portal User Interviews from RPS 2019

Executive Summary

Eleven Residency Directors and Coordinators were interviewed at PDW/RPS 2019. Interviews were 1:1. Each person was asked 3 warm-up questions followed by a series of questions about their use of AAFP resources and the management of memberships. In these interviews several themes appeared.

Firstly, it was discovered that while people like the idea of being able to edit the residency census data and residency program data, nobody could think of a reason why they would use either of these tools more than once a year. In the case of residency program updates the tool would only be used about once every five years.

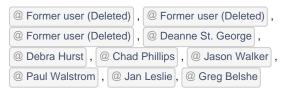
Secondly, this study found that there are opportunities to help programs as well. Most programs go through a very manual process of ordering residency and teaching certificates once a year. The process for making new residents members of the AAFP is very manual for almost all residencies even though a new digital process is available. Mostly, the thing that coordinators are managing is registrations for events and invoices for various purchases.

Finally, the best opportunity to help residencies, as discovered in these interviews, is to provide education about the services available to members. Coordinators are not members and as such do not have access to all of the same resources as members. Many coordinators requested access to member resources. Whether we can provide them access or not we need to do a better job of letting these people know about the value of membership and the tools offered to members of the AAFP.

Based on these findings I do not recommend creating a residency portal in the way that it is currently conceived. Our efforts would be better used in improving communications with coordinators, providing member level access to coordinators, and creating a tool to order certificates online.

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Report Author	@ Nick Mosher
Request	Residency Portal User Research at PDW /RPS 2019
Application	Residency Portal
Participants (N)	11

Prepared for:



Questions

Questions or comments about this report and it's findings can be made in the comments section below or to <a> Nick Mosher

Methodology

Participants Group Name Alexandra Smith Coordinator Laura Lamb Coordinator Summer Jamison Coordinator Beverly Hilburn Coordinator Melissa Covington Coordinator Tina Ellis Coordinator Jenn Rickmar Coordinator Leinaala Zettlemoyer Coordinator Suhail Shaikh Director Michelle Harris Director Roger Musa Director

What Participants Did

Participants were asked a series of questions (listed below) about their interactions with the AAFP and how we can improve our services that we offer them online.

What Data We Collected

- 1. Audio recordings
- 2. Audio transcripts
- 3. Notes

Major Findings and Recommendations

Major Themes

- No need to edit the census: Not very many residencies need to edit the census data.
 They are happy with just updating it once or twice a year.
- 2. No need to update residency information: Participants all thought that it was a good idea to allow them to update their residency information online however, there were no substantial reasons listed when asked why they would want to update that information. People just have an assumption that it should be able to be updated online.
- Members Only Content: Coordinators would like to have the same access to content on the website as full members in order to aid with assigning education and showing the value of membership. At the very least they need to know what is available to members.
- 4. Creating Members: Coordinators are mostly unaware that they have the ability to create memberships straight out of the census tool. Instead they use pdfs or physical paper to collect the membership applications.
- Certificates: Coordinators would love to be able to order certificates online. This is a purely manual process and should be easy to automate.
- Bulk activities: Coordinators frequently are the people who need to do administrative work for residents and would love to have the ability to do bulk registrations, bulk memberships, and order bulk certificates online.
- Invoices: Almost everyone needs the ability to create invoices that are paid by a different department. This apply to registrations, memberships, CME products, and certificates.
- Remediation Help: There is an opportunity to help residents who are in remediation by providing steps, education, and a reporting to their Residency staff as to their progress along the journey to remediation.
- 9. **PDW/RPS is Long:** All participants all wanted it to be shorter.

Detailed Findings and Recommendations

What follows are general impressions and important quotes from the research.

Warm-Up Questions

1. Can you tell me a little about where you work and your role there?

"I help my residents graduate" - Coordinator

2. What brings you to RPS this year?

Education is the primary purpose for attendance. Some programs a just getting started while others like to fill in the gaps in their knowledge.

3. How frequently do you come to PDW/RPS?

Most people have come between 1-5 times. One attendee has been every year.

General Questions

4. What are the main ways in which you find yourself interacting with the AAFP on behalf of your residents?

- 1. Managing AAFP membership
- 2. Registering for events
- 3. Managing educational materials like journals, quizzes, and assigned articles.

5. How many times do you need to update your resident's information throughout the year?

1-2 times a year. Most programs only need to update information once a year. A few programs have off-cycle graduates but they are rare.

6. Would you be more or less likely to update your resident's data if you did not have to contact the AAFP to do it?

Most said they would update residents' data. However, very few participants could think of an occasion where it would be necessary. The only occasions discovered were to cover situations where a resident leaves a program or graduates off-cycle. These do not appear very frequently.

7. What are the main ways in which you find yourself interacting with the AAFP on behalf of your program?

Almost all occasions have to do with billing/invoices.

8. Would you be more or less likely to update your program's data if you did not have to contact the AAFP to do it?

Again, most programs would be interested in the ability to update their data but the information in their program changes about once in 5 years.

9. Currently we ask your program to fill out the residency census once a year. Would you be more or less likely to edit the information throughout the year if you had the capability?

See question 5 (above)

10. How do you handle resident membership status today?

Almost every program prints out our PDF membership form, asks residents to fill it out and turn it in, scans them all, then emails them to us. At which point we can bill them for the memberships. One program asks the residents to sign up for an account themselves and has them turn in the invoices for reimbursement. This is interesting since there is now a way for residencies to sign people up right out of the census.

11. How do you handle conference registrations for your residents? Yourself?

Almost every program interviewed sends residents or staff to AAFP conferences. Nearly all programs ask the attending person to register and then submit the invoice for reimbursement. A couple of program coordinators do the registrations for the residents. They would like a way to register in bulk.

12. How do you handle resident and teaching certificates today?

Most programs have a manual process where they export the list of graduating members, ask staff or the resident verify the spelling of their names, and email the request to AAFP. Some coordinators rely on a reminder from the AAFP in order to get that process started. One program has several different specialties. This program handles their own certificates because they want them all to look alike.

13. Would you be more or less likely to order resident and teaching certificates if you could order and pay online?

Everyone would like this to be an easy process and although it is done once a year we would likely see an increase in sales.

14. What AAFP resources do you need easy access to? Tell me more.

Top resources mentioned include:

- 1. Events
- 2. Deadlines
- 3. Educational materials
- 4. AFP Journal
- 5. Med School and Residency section

15. What areas/pages of the AAFP website do you currently access or use most often?

See question 14 (above)

16. How could we improve the way that you interact with the AAFP?

Many of the attendees like going to AAFP events and would like to get a notice when registration is open so they can get their spots reserved right away. This wasn't just about the Chief Resident's conference but also PDW/RPS and National Conference for Students and Residents.

17. What AAFP programs, products or services do you wish you knew more about?

Many coordinators would like to have a better idea of what the AAFP has to offer. They are asked to support our members but they don't have access to the same tools as our members. Residency Directors and staff assign articles and resources from the members only resources but coordinators must borrow a login to get them to residents.

18. What more could we do for you?

- · 2 participants referenced this research project saying: "More of this."
- Access to member resources was mentioned a lot on this question. This is a really big pain point for coordinators.
- Several people mentioned needing help with remediation processes. There is an opportunity here to help residency programs through a remediation process, particularly on the subject of professionalism.

Next Steps

Using these findings, the teams should review the requirements for the Residency Portal and prioritize items according to business need and user needs. The ROI for allowing the editing resident data and residency program data is likely going to be very low because these tasks are done very infrequently. The biggest issues discovered in this research are with marketing and communication of what is available to members of the AAFP.