Appendix A

Survey Instrument

Please answer the following questions.

General Questions

1. How many vehicles do you own?
   1. 0
   2. 1
   3. 2
   4. More than 2

2. Do you have a current valid driver’s license?
   1. Yes
   2. No

3. Do you own a telephone?
   1. Yes
   2. No

4. Do you own a computer?
   1. Yes
   2. No

5. Do you have an Internet connection?
   1. Yes
   2. No

6. Do you have a chronic, or recurring, illness?
   1. Yes
   2. No

7. Do you have a disability?
   1. Yes
   2. No

8. What is your age? _________

9. What is your gender?
   1. Male
   2. Female
10. What is your ethnicity?
   1. African-American
   2. Asian or Pacific Islander
   3. Native American
   4. Hispanic/Latino
   5. White
   Other____________________________

Please answer the following questions related to your experiences and opinions traveling to the VA and using technology to access health services.

11. How many miles do you travel one way to arrive at the nearest VA hospital or clinic? ______

12. On a scale between 1 and 7 (with 1 being “very easy” and 7 being “very difficult”), how difficult is it for you to travel to the nearest VA hospital/clinic?
   
   1  2  3  4  5  6  7
   Very Easy                          Very Difficult

13. For the majority of your health care appointments, what mode of transportation do you use?
   1. I drive my own car
   2. I get a ride from a friend or family member in their car
   3. I use a public transit service (e.g., bus, train)
   4. I take a taxi
   5. Other___________________________________________

14. When preparing to travel to your health appointment, do you ever use a computer and Internet to: (select all that apply)
   1. Check on road and weather conditions.
   2. Get directions.
   3. Check on transit (bus and train) schedules and/or availability.
   4. Arrange for dial-a-ride or other transit services.
   5. Other___________________________________________
15. On a scale between 1 and 7 (with 1 being “low impact” and 7 being “high impact”), how much does the travel required impact your decision to go to:

<table>
<thead>
<tr>
<th>Event</th>
<th>Impact Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>A routine doctor’s appointment at a VA hospital/clinic</td>
<td>1 2 3 4 5 6 7</td>
</tr>
<tr>
<td>A routine doctor’s appointment at a non-VA hospital/clinic?</td>
<td>1 2 3 4 5 6 7</td>
</tr>
<tr>
<td>A prescription refill appointment at a VA hospital/clinic?</td>
<td>1 2 3 4 5 6 7</td>
</tr>
<tr>
<td>A prescription refill appointment at a non-VA hospital/clinic?</td>
<td>1 2 3 4 5 6 7</td>
</tr>
<tr>
<td>A treatment for a chronic health problem at a VA hospital/clinic?</td>
<td>1 2 3 4 5 6 7</td>
</tr>
<tr>
<td>A treatment for a chronic health problem at a non-VA hospital/clinic</td>
<td>1 2 3 4 5 6 7</td>
</tr>
<tr>
<td>A surgery at a VA hospital/clinic?</td>
<td>1 2 3 4 5 6 7</td>
</tr>
<tr>
<td>A surgery at a non-VA hospital/clinic?</td>
<td>1 2 3 4 5 6 7</td>
</tr>
</tbody>
</table>

16. How likely are you to use the telephone to find information about a health issue you are experiencing?
   1 2 3 4 5 6 7
   Not at all Very likely

17. How likely are you to use a telephone to consult with a doctor or other health care professional about a health issue you are experiencing?
   1 2 3 4 5 6 7
   Not at all Very likely

18. How likely are you to use a computer and Internet (including e-mail) to find information about a health issue you are experiencing?
   1 2 3 4 5 6 7
   Not at all Very likely
19. How likely are you to use a computer and Internet to consult with a doctor or other health care professional about a health issue you are experiencing?
   1 2 3 4 5 6 7  
   Not at all Very likely

20. How interested are you to use a computer and Internet to help manage your health care (make appointments, find health information, consult with your doctor)?
   1 2 3 4 5 6 7  
   Not at all Very Interested

21. To what extent are you interested in using an online (Internet) system for the purpose of:

<table>
<thead>
<tr>
<th>Activity</th>
<th>1 = not interested 7 = very interested</th>
</tr>
</thead>
<tbody>
<tr>
<td>Looking at your personal health information such as lab test results, x-rays, diagnoses, history of prescriptions, vaccinations, etc.?</td>
<td>1 2 3 4 5 6 7</td>
</tr>
<tr>
<td>Searching and finding health care information, such as a disease or treatment options?</td>
<td>1 2 3 4 5 6 7</td>
</tr>
<tr>
<td>Communicating with your doctors and nurses about your health care?</td>
<td>1 2 3 4 5 6 7</td>
</tr>
<tr>
<td>Making health care appointments?</td>
<td>1 2 3 4 5 6 7</td>
</tr>
<tr>
<td>Refilling your prescriptions?</td>
<td>1 2 3 4 5 6 7</td>
</tr>
<tr>
<td>Other__(fill in) ____________________</td>
<td>1 2 3 4 5 6 7</td>
</tr>
</tbody>
</table>

22. Do you use the online electronic personal health record system called “My HealthE Vet” that is provided by the Veterans Administration?
   1. Yes
   2. No

23. If you answered YES to question 22 above, for what purpose have you used “My HealthE Vet”?
   1. Enter/keep track of personal information (My Caregivers, etc.)
2. Enter/keep track of personal health care information (blood pressure, blood sugar, etc.)
3. Look up information about a medication
4. Request a prescription refill
5. Access prescription history from my VA medical record
6. Find a VA health care facility
7. Research a health condition
8. Find information about VA benefits
9. Other, please specify___________________________________________

24. If you do NOT use “My HealtheVet,” why not? (Circle all that apply)
   1. I am not aware of My HealtheVet.
   2. I do not have access to a computer or Internet connection.
   3. I prefer NOT to use computers and the Internet to manage my health care.
   4. I am concerned about the privacy of my health information.
   5. “My HealtheVet” is not useful to me.
   6. Other ______________________________________________________

25. What is your opinion about Internet services such as My HealtheVet, which are used to help manage an individual’s health care? Please explain.

________________________________________________________________________

26. Please provide any other comments about your ability to access the health services you need either in terms of transportation or technology.

________________________________________________________________________