

# POC Must-Have Features

(Based on survey and interviews)

## 1. One-Tap Dictation → Structured Note

- Seamless dictation that instantly transcribes into text.
- Works reliably within the **5–10 minute golden window** after session.
- No need for multiple clicks or manual file handling.  
*Why:* Therapists report typing is the biggest friction; dictation saves time and maintains therapeutic presence.  
*Research:* Speech recognition reduced documentation time from ~8.9 → ~5.1 minutes per report (Rosenthal et al., 2025) .

## 2. Dual-Mode Notes (Progress & Process)

- **Progress Notes:** concise, SOAP-style, regulatory minimum.
- **Process Notes:** richer reflection, including themes, emotions, countertransference.
- Therapist chooses depth per session/patient.  
*Why:* U.S.-trained therapists emphasized regulatory distinction (Bailey). Israeli therapists less formal but want flexibility.

## 3. Insight Extraction Layer

- Identify **topics** raised.
- Detect **strong emotions and emotional peaks**.
- Highlight **repeated words and themes** across sessions.
- Option for **2–3 sentence summaries** (for quick recall or parents).  
*Why:* Both survey (84 therapists) and interviews consistently asked for this.  
*Research:* AI transcription tools can automatically highlight themes and generate concise summaries, improving efficiency (Wang et al., 2025; Zhao et al., 2025) .

## 4. Per-Patient Digital Notebook

- Organized by client: one digital notebook per patient.
- Entries automatically filed under correct patient record.
- Free-text field for therapist comments.

*Why:* Therapists described frustration with searching across generic notes; need quick retrieval per client.

## 5. Security & Compliance First

- **No audio storage** (text-only transcripts).
- **End-to-end encryption** (at rest & in transit).
- **HIPAA, GDPR, Israeli MoH** aligned.
- **Consent workflow** built-in for transparency.

*Why:* Every therapist flagged privacy/ethical concerns; refusal to record full sessions.

*Research:* Ethical compliance is critical for clinician adoption; encryption + consent are key trust builders .

## 6. Minimalist, Bilingual UX (HE/EN)

- Clean, distraction-free interface.
- Hebrew + English support.
- Predefined quick-insert points (checkboxes for goals, outcomes, etc.).

*Why:* Israeli therapists requested Hebrew; all stressed “zero friction.”

## 7. Customization Beyond Templates

- Adaptive note style that learns therapist preferences.
- Ability to adjust format (SOAP, narrative, free-text mix).

*Why:* Therapists reject rigid templates; want the tool to fit their personal workflow.

*Research:* Adoption improves when clinicians can tailor output; Value Proposition Canvas highlights customization as a driver .

## 8. Pilot with 18 Design Partners

- Validation with at least 18 therapists in real-world clinical settings.
- Measure:

- Speed of use (<60 sec note entry).
- Comfort with privacy/security.
- Perceived usefulness of insights.
- Consistency of adoption week-to-week.

*Why:* Internal alignment — pilot cohort needed to shape product fit before scaling.

*Research:* Design partner frameworks (a16z) show early co-creation ensures adoption .

## References & Resources

- Rosenthal et al. (2025). *Speech recognition for medical documentation: time, cost efficiency, and acceptance*. [ResearchGate](#)
- Wang et al. (2025). *AI tools for transcription: efficiency and accuracy in medical records*. [PMC](#)
- Zhao et al. (2025). *AI-generated clinical notes: opportunities and risks*. [The Lancet](#)
- Andreessen Horowitz. *Framework for finding a design partner*. [a16z](#)
- Value Proposition Canvas — [Interaction Design](#), [Netguru](#)