# Software Requirements Specification (SRS)

# Medical Delegate Application with AI Scribe

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System

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# 1. Introduction

#### 1.1 Purpose

This Software Requirements Specification (SRS) document describes the functional and non-functional requirements for the Medical Delegate Application, a comprehensive hospice care management system with integrated AI-powered clinical documentation assistance.

#### 1.2 Scope

The Medical Delegate Application is designed to streamline hospice care operations by providing: - Patient management and care coordination - Visit scheduling and documentation - AI-powered clinical note transcription and generation - Task management and workflow optimization - HIPAA-compliant data handling and storage - Real-time communication between care team members

# 1.3 Definitions and Acronyms

• AI Scribe: Artificial Intelligence-powered clinical documentation assistant

- HIPAA: Health Insurance Portability and Accountability Act
- PHI: Protected Health Information
- EHR: Electronic Health Record
- API: Application Programming Interface
- MCP: Model Context Protocol
- SRS: Software Requirements Specification

#### 1.4 References

- HIPAA Privacy Rule (45 CFR Part 160 and Part 164)
- HIPAA Security Rule (45 CFR Part 164, Subparts A and C)
- FDA Guidelines for Software as Medical Device (SaMD)
- HL7 FHIR R4 Implementation Guide

# 2. Overall Description

# 2.1 Product Perspective

The Medical Delegate Application is a standalone mobile and web-based system designed specifically for hospice care providers. It integrates with existing healthcare infrastructure while maintaining independence for specialized hospice workflows.

#### 2.2 Product Functions

#### Core Functions:

- Patient Management: Comprehensive patient profiles with medical history, care plans, and family information
- Visit Management: Scheduling, documentation, and assessment tracking
- Task Management: Assignment, tracking, and completion of care-related tasks
- AI Clinical Documentation: Real-time transcription and intelligent note generation
- Communication Hub: Secure messaging and care team coordination
- Reporting and Analytics: Care quality metrics and operational insights

#### 2.3 User Classes and Characteristics

#### **Primary Users:**

- 1. Registered Nurses (RNs)
  - Primary care providers
  - Conduct patient visits and assessments
  - Document care activities and patient status
- 2. Licensed Practical Nurses (LPNs)
  - Assist with patient care

• Document basic assessments and interventions

# 3. Care Coordinators

- Manage patient care plans
- Coordinate between team members
- Oversee visit scheduling

# 4. Administrative Staff

- Manage user accounts and permissions
- Generate reports and analytics
- Maintain system configuration

# **Secondary Users:**

- Physicians: Review patient status and care plans
- Social Workers: Access family support information
- Chaplains: View spiritual care needs and preferences

# 2.4 Operating Environment

- Mobile Platforms: iOS 14+ and Android 10+
- Web Browsers: Chrome 90+, Safari 14+, Firefox 88+, Edge 90+
- Backend Infrastructure: Cloud-based with 99.9% uptime SLA
- Database: Encrypted, HIPAA-compliant cloud storage
- Network: Secure HTTPS connections with end-to-end encryption

# 3. System Features

#### 3.1 Patient Management System

**3.1.1 Description** Comprehensive patient information management with secure access controls and audit trails.

## 3.1.2 Functional Requirements

- FR-PM-001: System shall maintain complete patient profiles including demographics, medical history, and care preferences
- FR-PM-002: System shall support family member information and contact details
- FR-PM-003: System shall track patient location and provide mapping integration
- FR-PM-004: System shall maintain care plan documentation with version control
- FR-PM-005: System shall support patient priority classification (urgent, high, medium, low)

# 3.1.3 Priority High

# 3.2 Visit Management System

**3.2.1 Description** Comprehensive visit scheduling, documentation, and assessment tracking system.

#### 3.2.2 Functional Requirements

- $\bullet$   $\ FR\text{-}VM\text{-}001:$  System shall support visit scheduling with calendar integration
- $\bullet~$  FR-VM-002: System shall provide structured assessment forms for:
  - Vital signs monitoring
  - Pain assessment and management
  - Medication administration
  - Clinical interventions
  - Family support evaluation
  - Visit notes and documentation
- FR-VM-003: System shall track visit completion status and progress
- FR-VM-004: System shall generate visit summaries and care plan updates
- FR-VM-005: System shall support offline data entry with synchronization

# 3.2.3 Priority High

#### 3.3 AI Scribe System

**3.3.1 Description** Intelligent clinical documentation assistant that transcribes speech to text and generates structured clinical notes.

#### 3.3.2 Functional Requirements

- FR-AI-001: System shall provide real-time speech-to-text transcription during patient visits
- FR-AI-002: System shall generate structured clinical notes from unstructured voice input
- FR-AI-003: System shall support medical terminology recognition and auto-correction
- FR-AI-004: System shall provide note templates for common hospice care scenarios
- FR-AI-005: System shall allow manual editing and approval of AIgenerated content
- FR-AI-006: System shall maintain audit trails for all AI-assisted documentation
- FR-AI-007: System shall support multiple languages for diverse patient populations
- FR-AI-008: System shall integrate with existing assessment forms and care plans

#### 3.3.3 Priority High

# 3.4 Task Management System

**3.4.1 Description** Workflow management system for care team coordination and task tracking.

#### 3.4.2 Functional Requirements

- FR-TM-001: System shall support task creation, assignment, and tracking
- FR-TM-002: System shall provide priority-based task organization
- $\bullet$  FR-TM-003: System shall send notifications for overdue or urgent tasks
- FR-TM-004: System shall track task completion and time spent
- FR-TM-005: System shall generate task reports and analytics

#### 3.4.3 Priority Medium

#### 3.5 Communication System

**3.5.1 Description** Secure messaging and communication platform for care team coordination.

# 3.5.2 Functional Requirements

- FR-CS-001: System shall provide secure messaging between team members
- FR-CS-002: System shall support patient-specific communication threads
- $\bullet\,$  FR-CS-003: System shall maintain message encryption and audit trails
- FR-CS-004: System shall provide notification management and preferences
- FR-CS-005: System shall support file sharing with security controls

# 3.5.3 Priority Medium

# 4. External Interface Requirements

#### 4.1 User Interfaces

- Responsive Design: Optimized for mobile devices and tablets
- Accessibility: WCAG 2.1 AA compliance for users with disabilities
- Intuitive Navigation: Role-based interface customization
- Dark/Light Mode: User preference support for various lighting conditions

## 4.2 Hardware Interfaces

• Mobile Device Integration: Camera, microphone, GPS, and biometric sensors

- Bluetooth Support: Integration with medical devices and peripherals
- Barcode/QR Code Scanning: Medication and patient identification

#### 4.3 Software Interfaces

- EHR Integration: HL7 FHIR R4 compliant API for data exchange
- Calendar Systems: Integration with Google Calendar, Outlook, and Apple Calendar
- Mapping Services: Google Maps and Apple Maps integration
- Cloud Storage: Secure integration with HIPAA-compliant cloud providers

#### 4.4 Communication Interfaces

- HTTPS Protocol: All data transmission encrypted with TLS 1.3
- RESTful APIs: Standard HTTP methods for system integration
- WebSocket Support: Real-time communication for messaging and notifications
- Push Notifications: iOS and Android native notification support

# 5. Non-Functional Requirements

#### 5.1 Performance Requirements

- Response Time: 95% of user interactions complete within 2 seconds
- Throughput: Support 1000+ concurrent users
- Scalability: Horizontal scaling capability for growing user base
- Offline Capability: Core functions available without internet connectivity

# 5.2 Reliability Requirements

- Uptime: 99.9% system availability (8.76 hours downtime per year maximum)
- Data Integrity: Zero tolerance for data loss or corruption
- Backup and Recovery: Automated daily backups with 4-hour recovery time objective
- Fault Tolerance: Graceful degradation during partial system failures

# 5.3 Usability Requirements

- Learning Curve: New users productive within 2 hours of training
- Error Prevention: Intuitive interface design minimizing user errors
- Help System: Contextual help and documentation available
- Accessibility: Support for users with visual, auditory, and motor impairments

# 5.4 Compatibility Requirements

- Cross-Platform: Consistent functionality across iOS, Android, and web platforms
- Browser Support: Compatible with major browsers (Chrome, Safari, Firefox, Edge)
- Legacy System Integration: API compatibility with existing healthcare systems
- Version Control: Backward compatibility for mobile app updates

# 6. HIPAA Compliance Requirements

# 6.1 Administrative Safeguards

- HC-AS-001: System shall implement role-based access controls with minimum necessary access principles
- HC-AS-002: System shall maintain comprehensive audit logs for all PHI access and modifications
- HC-AS-003: System shall provide user authentication with multi-factor authentication (MFA)
- **HC-AS-004**: System shall support automatic session timeout after 15 minutes of inactivity
- **HC-AS-005**: System shall implement workforce training tracking and compliance monitoring

# 6.2 Physical Safeguards

- HC-PS-001: System shall encrypt all data at rest using AES-256 encryption
- **HC-PS-002**: System shall implement secure data center hosting with 24/7 monitoring
- HC-PS-003: System shall provide device management and remote wipe capabilities
- HC-PS-004: System shall maintain physical access controls for server infrastructure

# 6.3 Technical Safeguards

- $\bullet$  HC-TS-001: System shall encrypt all data in transit using TLS 1.3 or higher
- HC-TS-002: System shall implement end-to-end encryption for sensitive communications
- HC-TS-003: System shall provide data backup and recovery with encryption
- HC-TS-004: System shall implement intrusion detection and prevention systems

• HC-TS-005: System shall support secure API authentication using OAuth 2.0 with PKCE

# 6.4 Business Associate Agreements

- **HC-BA-001**: All third-party integrations must have signed Business Associate Agreements
- HC-BA-002: AI processing services must comply with HIPAA requirements
- **HC-BA-003**: Cloud hosting providers must maintain HIPAA compliance certifications

# 7. AI Scribe Specifications

# 7.1 Speech Recognition Engine

- AI-SR-001: System shall support real-time speech-to-text with 95%+ accuracy
- AI-SR-002: System shall recognize medical terminology and abbreviations
- AI-SR-003: System shall support noise cancellation and audio enhancement
- AI-SR-004: System shall process multiple speakers and conversation flows
- AI-SR-005: System shall support offline speech recognition for sensitive environments

# 7.2 Natural Language Processing

- AI-NLP-001: System shall extract clinical entities (symptoms, medications, procedures)
- AI-NLP-002: System shall generate structured SOAP notes from unstructured input
- AI-NLP-003: System shall maintain context awareness throughout documentation sessions
- AI-NLP-004: System shall support clinical decision support and alerts
- AI-NLP-005: System shall provide confidence scores for AI-generated content

#### 7.3 Clinical Documentation

- AI-CD-001: System shall generate hospice-specific documentation templates
- AI-CD-002: System shall support care plan updates based on visit notes
- AI-CD-003: System shall maintain version control for AI-assisted documentation
- AI-CD-004: System shall provide human review and approval workflows

• AI-CD-005: System shall integrate with existing assessment forms and protocols

# 7.4 Privacy and Security for AI

- AI-PS-001: All AI processing shall occur in HIPAA-compliant environments
- AI-PS-002: Patient data shall not be used for AI model training without explicit consent
- AI-PS-003: AI models shall be regularly audited for bias and accuracy
- AI-PS-004: System shall provide opt-out mechanisms for AI assistance
- AI-PS-005: AI-generated content shall be clearly marked and attributed

# 8. Data Requirements

# 8.1 Data Types

#### Patient Data:

- Demographics and contact information
- Medical history and diagnoses
- Medication lists and allergies
- Care preferences and advance directives
- Family and emergency contacts

#### Clinical Data:

- Vital signs and assessments
- Pain scores and symptom tracking
- Medication administration records
- Nursing interventions and outcomes
- Visit notes and care plan updates

#### Operational Data:

- User accounts and permissions
- Audit logs and system events
- Task assignments and completion
- Communication records
- System configuration settings

#### 8.2 Data Storage

- Encryption: AES-256 encryption for data at rest
- Backup: Automated daily backups with geographic redundancy
- Retention: 7-year retention policy for clinical data
- Archival: Secure long-term storage for compliance requirements

# 8.3 Data Integration

- Import/Export: Support for standard healthcare data formats (HL7, FHIR)
- API Access: RESTful APIs for third-party integrations
- Data Validation: Real-time validation and error checking
- Synchronization: Conflict resolution for offline/online data sync

# 9. Security Requirements

## 9.1 Authentication and Authorization

- SEC-AA-001: Multi-factor authentication required for all users
- SEC-AA-002: Role-based access control with principle of least privilege
- SEC-AA-003: Password complexity requirements and regular rotation
- SEC-AA-004: Account lockout after failed authentication attempts
- SEC-AA-005: Single sign-on (SSO) integration support

#### 9.2 Data Protection

- SEC-DP-001: End-to-end encryption for all sensitive data transmission
- SEC-DP-002: Data loss prevention (DLP) monitoring and alerts
- SEC-DP-003: Secure key management and rotation
- SEC-DP-004: Data anonymization for analytics and reporting
- SEC-DP-005: Secure data disposal and deletion procedures

#### 9.3 Network Security

- SEC-NS-001: Web Application Firewall (WAF) protection
- SEC-NS-002: Intrusion detection and prevention systems
- SEC-NS-003: DDoS protection and mitigation
- SEC-NS-004: Network segmentation and access controls
- SEC-NS-005: Regular security scanning and vulnerability assessments

#### 9.4 Incident Response

- SEC-IR-001: 24/7 security monitoring and alerting
- SEC-IR-002: Incident response plan with defined procedures
- SEC-IR-003: Breach notification within 72 hours of discovery
- SEC-IR-004: Forensic capabilities for security investigations
- SEC-IR-005: Regular security training and awareness programs

# 10. Performance Requirements

# 10.1 Response Time Requirements

- Page Load Time: < 3 seconds for 95% of page loads
- API Response Time: < 500ms for 95% of API calls
- Search Functionality: < 2 seconds for patient and data searches
- AI Transcription: Real-time processing with < 1 second delay
- Offline Sync: < 30 seconds for data synchronization

# 10.2 Throughput Requirements

- Concurrent Users: Support 1000+ simultaneous active users
- Data Processing: Handle 10,000+ transactions per hour
- File Uploads: Support multiple concurrent file uploads
- Message Delivery: Process 1000+ messages per minute
- Report Generation: Generate complex reports within 60 seconds

# 10.3 Scalability Requirements

- Horizontal Scaling: Auto-scaling based on demand
- Database Performance: Optimized queries and indexing
- CDN Integration: Global content delivery for improved performance
- Load Balancing: Distributed traffic management
- Resource Optimization: Efficient memory and CPU utilization

# 11. Quality Assurance

#### 11.1 Testing Requirements

- Unit Testing: 90%+ code coverage for all modules
- Integration Testing: End-to-end workflow validation
- Performance Testing: Load testing under peak conditions
- Security Testing: Penetration testing and vulnerability scanning
- Usability Testing: User acceptance testing with healthcare professionals

## 11.2 Validation and Verification

- Clinical Validation: Healthcare professional review of AI-generated content
- Regulatory Compliance: Validation against HIPAA and healthcare standards
- Data Accuracy: Verification of data integrity and consistency
- Workflow Validation: Confirmation of clinical workflow support
- Accessibility Testing: Compliance with WCAG 2.1 AA standards

# 11.3 Continuous Monitoring

- System Health: Real-time monitoring of system performance
- User Experience: Analytics and feedback collection
- Security Monitoring: Continuous threat detection and response
- Compliance Auditing: Regular compliance assessments and reporting
- AI Model Performance: Ongoing evaluation of AI accuracy and bias

# 12. Appendices

# Appendix A: Glossary of Terms

- Care Plan: Comprehensive document outlining patient care goals and interventions
- SOAP Notes: Subjective, Objective, Assessment, Plan documentation format
- Hospice Care: Specialized medical care focused on comfort and quality of life
- Protected Health Information (PHI): Individually identifiable health information
- Business Associate: Third-party entity that handles PHI on behalf of covered entities

# Appendix B: Regulatory References

- 45 CFR Part 160 General Administrative Requirements (HIPAA)
- 45 CFR Part 164 Security and Privacy (HIPAA)
- 21 CFR Part 820 Quality System Regulation (FDA)
- ISO 27001 Information Security Management
- SOC 2 Type II Security, Availability, and Confidentiality

# Appendix C: Technical Standards

- HL7 FHIR R4 Healthcare data exchange standard
- OAuth 2.0 with PKCE Secure API authentication
- TLS 1.3 Transport layer security protocol
- AES-256 Advanced encryption standard
- WCAG 2.1 AA Web content accessibility guidelines

# Appendix D: Risk Assessment Matrix

Risk Category	Probability	Impact	Mitigation Strategy
Data Breach	Low	High	Multi-layered security, encryption, monitoring

Risk Category	Probability	Impact	Mitigation Strategy
System Downtime	Medium	High	Redundancy, backup systems, SLA monitoring
AI Accuracy	Medium	Medium	Human oversight, continuous training, validation
Regulatory Non-compliance	Low	High	Regular audits, compliance monitoring, training
User Adoption	Medium	Medium	Training programs, user feedback, iterative design

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