Conversational AI: Separating Hype from Reality

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CONVERSATION

vs

COMMANDS AND Q&A
“Turn left on 16th Street.”
Siri what will the weather be like in San Jose on Monday

Tap to Edit

Nice weather coming up for San Jose, CA on Monday... up to 62°F and sunny:

San Jose
Day After Tomorrow, Mar 11
Sunny
Chance of Rain: 10%

Monday
10% 62 44

High: 62° Low: 44°
HUMAN LIKE CONVERSATION DEPENDS ON:

- Shared Context
- Shared Data
- Shared Memory
- Mutual Understanding
DIRTY SECRET:

When you’ve encountered a Conversational AI interaction that has actually felt natural,

especially if it was over the course of multiple turns,

The odds are high that a human designed that interaction manually.
“IT’S NOT MAGIC. IT’S TALENT AND SWEAT.”

GILFOYLE
SERIES OF QUESTIONS & NEXT POTENTIAL STEPS:

1. Do we know who the patient is by their phone number?
2. If so, are we required to ask authenticating information before answering? What qualifies as secure enough?
3. If not, what do we need to ask to locate the prescription?
4. What do we do if the patient doesn’t have or can’t provide that information correctly?
5. Is the prescription ready?
6. If not, why not and when will it be ready? Is there anything the patient needs to do? Or that the pharmacy can do on behalf of the patient?
7. Could we have predicted their intent and offered to answer the question the moment they called?
8. Are they getting SMS updates? Should we offer it so that they don’t have to call because they’ll be informed as soon as it’s ready?
“I need to refill a prescription.”

“Alright, what’s the Rx number?”

“1234567”

SERIES OF QUESTIONS & NEXT POTENTIAL STEPS:

1. Is that prescription number valid?
2. Is the prescription we found based on that number the one the patient needed?
3. Is it eligible for refill?
4. If it’s NOT eligible for refill, why, and is there anything the pharmacy can offer to do about it, or that the patient needs to do next?
5. If it IS eligible for refill, is this the last refill before the prescriber will need to write a new one? Can the pharmacy offer to reach out?
6. Are we required to offer this patient a flu shot? Do, can or must we offer automatic refill, a 90 day supply or SMS notification enrollment for any of the prescriptions in the basket?
7. Is their basket full, or can we ask if they have more prescriptions to refill (are we able to predictively offer any)?
8. When does the patient want to pick up their prescriptions? Will the pharmacy be open? Will the prescription be ready?
Fundamentally, conversation is a uniquely human tool.

It forges cooperation through building common ground and mutual understanding and establishes deep trust between people.
SO HOW DO WE GET THERE?

Leverage the fact that Enterprises have formalized systems and processes to learn where the work is so that we can automate more of it.
Where what began?
Song came out a year from release date of software.

Auto tune

Ahh that’s a fun fact! I would not have thought it was Cher!

That’s pretty good. Who invented it? Were they a producer?

She didn’t invent it.
haha. A guy from Exxon. A geophysicist.

But first published the song with the technology

NOW I’M INTERESTED. What problem was he trying to solve???

Antares audio technologies invented it

Well he used similar software for his research and realized he could pitch correct with it. Probably heard some crap music too.

How long was the tech around before it was used?
where did autotune begin

Here's a result from the web

Cher's 1998 hit Believe was the first recording to use Auto-Tune in a distinctive way, now known as the "Cher effect." American rapper T-Pain is an early adopter of Auto-Tune and has helped spread its popularity.

The invention that changed music forever - CNN - CNN.com

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My apologies... I don't understand
Where what began?

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The **HYPE** is:
The belief that understanding what people mean is where the work is.

The **REALITY** is:
That it’s all about what we do **AFTER** we know what people mean.