NURA HEALTH

Clinic AI Readiness Checklist

A practical, privacy-aware checklist for medical and dental clinic leaders considering AI-supported workflow improvement.

> **For clinic owners, dentists, physicians, office managers, and healthcare operators**
>
> Use this checklist before introducing AI into patient communication, administrative workflow, recall, follow-up, intake, referrals, documentation support, reporting, or team SOPs.

Positioning: AI should support clinic operations. It should not replace clinical judgment, patient trust, privacy obligations, or human review.

Filled out by

Name	Clinic name	Email

Instructions: fill in the checkboxes and worksheet below, save this PDF, and email it to info@nurahealthconsulting.com if you'd like Nura Health to follow up.

How to Use This Checklist

Score each item as No, In progress, or Yes. A clinic does not need a perfect score before starting, but it should have enough governance, workflow clarity, and privacy discipline to run a safe pilot.

SCORE	INTERPRETATION	RECOMMENDED NEXT STEP
0–12	Low readiness	Start with workflow mapping and privacy review before adding tools.
13–24	Moderate readiness	Choose one low-risk admin workflow pilot with human review.
25–36	Strong readiness	Build SOPs, staff training, dashboards, and monthly optimization.

> **Important boundary**
> This checklist is for operational and administrative AI use. It is not a clinical, legal, privacy, cybersecurity, or regulatory compliance opinion. Clinics should review final workflows with the appropriate internal leaders and licensed professionals.

1. Strategy & Governance

READINESS ITEM	WHAT TO CONFIRM	NO / IN PROGRESS / YES		
Clear business purpose	The clinic has defined why AI is being considered, such as admin efficiency, follow-up consistency, intake support, or reporting clarity.	☐	☐	☐
Owner or leadership sponsor	A clinic owner, physician, dentist, or senior manager is accountable for AI workflow decisions.	☐	☐	☐
Human-review rule	AI outputs are reviewed by staff before being sent, filed, used, or acted upon.	☐	☐	☐
Clinical boundary	The clinic has documented that AI will not diagnose, prescribe, provide treatment advice, or replace licensed clinical judgment.	☐	☐	☐

2. Privacy & Patient Information

READINESS ITEM	WHAT TO CONFIRM	NO / IN PROGRESS / YES		
No patient-identifying data in public AI tools	Staff understand not to enter patient names, contact details, health details, insurance data, images, or records into unapproved tools.	☐	☐	☐
Privacy notice and policy alignment	Website forms, chatboxes, and internal workflows clearly tell users not to submit confidential patient information.	☐	☐	☐

READINESS ITEM	WHAT TO CONFIRM	NO / IN PROGRESS / YES		
Tool and vendor review	The clinic knows where data goes, how it is stored, who can access it, and whether it may be used for model training.	☐	☐	☐
Access controls	Only appropriate team members can use approved AI tools or view workflow outputs.	☐	☐	☐

3. Workflow Opportunity

READINESS ITEM	WHAT TO CONFIRM	NO / IN PROGRESS / YES		
Workflow selected	The clinic has selected one practical workflow to improve first, instead of trying to automate everything.	☐	☐	☐
Current process mapped	The team knows who does the task now, where delays happen, and where handoffs fail.	☐	☐	☐
Risk level understood	The workflow is categorized as low, medium, or high risk based on patient information, clinical sensitivity, and operational impact.	☐	☐	☐
Success metric chosen	The clinic has selected at least one measurable outcome, such as response time, completion rate, admin hours, recall rate, or patient satisfaction.	☐	☐	☐

Recommended First Pilots

LOWER-RISK STARTING POINT	WHY IT WORKS
FAQ and front-desk template support	Reduces repetition without clinical decision-making.
Recall or reactivation workflow	Improves consistency and can be reviewed by staff before outreach.
No-show recovery process	Operationally useful and easy to measure.
Treatment-plan follow-up templates	Useful for dental clinics when reviewed by the treatment coordinator or dentist.
Admin task SOPs	Creates consistency before adding complex automation.

4. Patient Communication

READINESS ITEM	WHAT TO CONFIRM	NO / IN PROGRESS / YES		
Approved message templates	Patient-facing messages are reviewed for accuracy, tone, clarity, and scope before use.	☐	☐	☐
Escalation rules	Staff know when a message must be escalated to a provider, manager, or licensed professional.	☐	☐	☐
No automated clinical advice	AI is not sending diagnosis, treatment recommendations, test interpretation, or urgent-care instructions.	☐	☐	☐

READINESS ITEM	WHAT TO CONFIRM	NO / IN PROGRESS / YES		
Tone and patient experience	Templates sound calm, human, and professional, not robotic or sales-driven.	☐	☐	☐

5. Team Training & SOPs

READINESS ITEM	WHAT TO CONFIRM	NO / IN PROGRESS / YES		
Staff training completed	Team members know what AI can do, what it must not do, and when to ask for help.	☐	☐	☐
SOP documented	The AI-supported workflow has written steps, roles, approvals, and quality checks.	☐	☐	☐
Prompt/template library	The clinic uses approved prompts or templates instead of random staff-created instructions.	☐	☐	☐
Accountability assigned	A team member owns monitoring, feedback, and updates for the workflow.	☐	☐	☐

6. Technology, Data & Security

READINESS ITEM	WHAT TO CONFIRM	NO / IN PROGRESS / YES		
Approved tool list	The clinic has a defined list of approved AI tools and use cases.	☐	☐	☐
Data minimization	The team uses the minimum information needed to complete an administrative task.	☐	☐	☐
Audit trail or review record	The clinic can show who reviewed or approved key AI-supported outputs.	☐	☐	☐
Incident response plan	The clinic knows what to do if confidential information is entered into the wrong tool or sent to the wrong person.	☐	☐	☐

7. Measurement & Optimization

READINESS ITEM	WHAT TO CONFIRM	NO / IN PROGRESS / YES		
Baseline captured	The clinic knows the current performance before launching the AI-supported workflow.	☐	☐	☐
KPI dashboard identified	The clinic has a simple reporting rhythm to review adoption and results.	☐	☐	☐
Quality review cadence	Someone checks accuracy, tone, completion, staff feedback, and patient experience on a regular schedule.	☐	☐	☐

READINESS ITEM	WHAT TO CONFIRM	NO / IN PROGRESS / YES		
Improvement plan	The workflow can be adjusted based on team feedback, patient needs, and measurable results.	☐	☐	☐

Suggested KPIs

Admin time saved, follow-up completion rate, overdue recall outreach, no-show recovery, treatment-plan follow-up completion, patient response time, patient satisfaction, review requests sent, staff adoption, and owner visibility.

8. 30/60/90 Pilot Plan

TIMELINE	FOCUS	OUTPUT
First 30 days	Map workflow, assess privacy risk, choose one pilot, define success metrics.	Workflow map + AI readiness scorecard
Days 31–60	Build SOPs, approved templates, staff guide, and review process.	Pilot playbook + training guide
Days 61–90	Run pilot, review KPIs, gather staff feedback, refine process.	Optimization report + next-step roadmap

Readiness Summary Worksheet

Use this page to turn the checklist into a clear next step.

What workflow should we improve first?	
What is the current business or patient-experience problem?	
What information will the workflow touch?	
Who must review or approve the process?	
What result should improve in 90 days?	

Next step: Book a Clinic Workflow Review

Nura Health can help your clinic map the current workflow, identify safe AI-supported opportunities, create a 30/60/90 roadmap, and build staff-ready SOPs, templates, and measurement tools.

Reference Frameworks Used to Shape This Checklist

- BC Personal Information Protection Act (PIPA): governs collection, use, and disclosure of personal information by organizations in BC.
- Office of the Information and Privacy Commissioner for BC: guidance for private organizations under PIPA.
- Office of the Privacy Commissioner of Canada: principles for responsible, trustworthy, and privacy-protective generative AI.
- Health Canada: Pan-Canadian AI for Health Guiding Principles for responsible and ethical AI adoption across health systems.
- College of Physicians and Surgeons of BC: public communication and advertising expectations for accurate, non-misleading claims.
- BC College of Oral Health Professionals: Standards for the Oral Health Team for safe, ethical, patient-centred care.

Disclaimer: This resource is educational and operational. It is not legal, privacy, cybersecurity, clinical, medical, or dental advice. Clinics should confirm requirements with appropriate advisors, regulators, and internal leadership.