AI Implementation Readiness Canvas

Map one repeated workflow. Define the boundary, owner, and handoffs before selecting an AI-assisted step.

SAFE USE

Planning use only. Never enter patient-identifiable or confidential data. AI must not make direct-care decisions. Organizational approval still applies.

01 DEFINE THE CURRENT WORKFLOW

WORKFLOW OR TASK

Name one repeated, bounded piece of work. Keep the scope specific.

TRIGGER

What starts this work?

CURRENT HANDOFF

Who gives what to whom today?

ALLOWED INPUTS

List only the information approved for this pilot.

PROHIBITED OR SENSITIVE INPUTS

No patient-identifiable, confidential, credential, or regulated data.

02 DESIGN THE ASSISTED WORKFLOW

APPROVED TOOL

Name the approved tool and workspace.

AI-ASSIST STEP

What may AI draft, summarize, sort, or transform?

NAMED HUMAN REVIEWER / OWNER

Who checks output and owns the final decision?

OUTPUT

What exact artifact or action should this produce?

NEXT HANDOFF

Who receives the reviewed output, in what format?

SAFEGUARD

What check, access limit, or escalation protects it?

AI Implementation Readiness Canvas

Turn the workflow into a small, reversible pilot. Decide what evidence matters and what will stop the test.

SAFE USE

Keep the pilot bounded and reversible. Privacy, security, clinical governance, professional duties, and organizational approval still apply.

03 PLAN THE PILOT AND DECISION

OUTCOME + MEASURE

What should improve, and what observable measure will show whether it did?

EVIDENCE

What evidence will you collect - time, rework, quality, feedback?

TEST GROUP

Who will test, how many people, and for how long?

REVIEW CADENCE

When will the owner review outputs, incidents, and evidence?

STOP CONDITIONS

What privacy, safety, quality, security, or workflow issue pauses the pilot?

DECISION DATE

When is the decision?

NEXT DECISION

Continue, revise, expand, pause, or stop - and who has authority?

04 RUN, REVIEW, AND DOCUMENT

- [ ] Workflow is non-clinical; AI makes no direct-care decisions.
- [ ] No patient-identifiable, confidential, credential, or regulated data enters the tool.
- [ ] Tool and data use follow policy and approved settings.
- [ ] A named reviewer checks every output before use or sharing.
- [ ] The team knows the stop conditions and escalation path.
- [ ] Evidence and the final decision are documented.

NOTES + APPROVALS

Questions, approvals, owner, or next follow-up