

AI Governance in Community Health

A Practical Roadmap from CHAI

New York Health Center Controlled Network

July 2026

About CHAI

Mission: To advance the safe, effective, and equitable use of AI in health care by providing practical guidance, tools, and frameworks for health care organizations.

Practitioner-Led

CHAI brings together clinical informaticists, compliance officers, IT leaders, ethicists, and frontline clinicians.

Free & Open Access

All CHAI frameworks, playbooks, and tools are freely available to any health care organization.

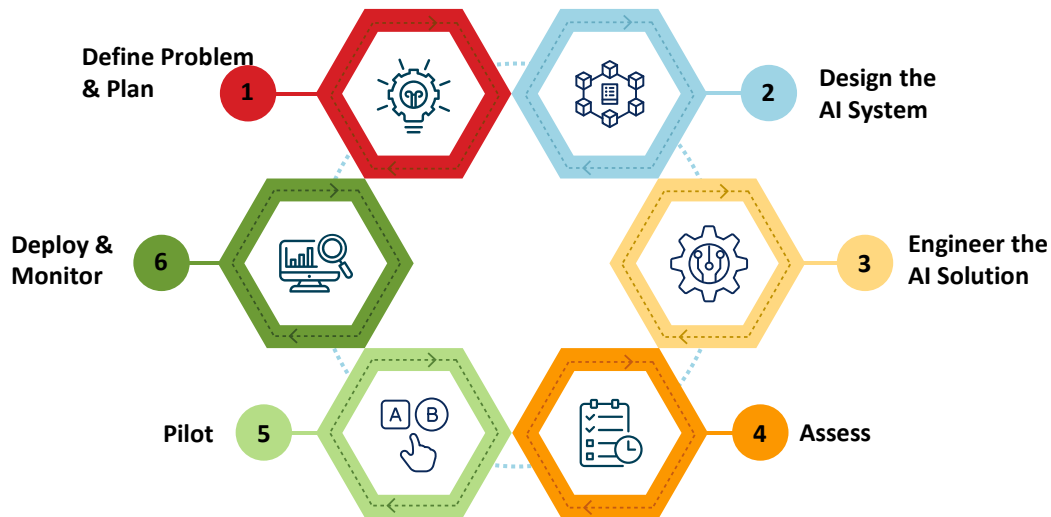
Community-Focused

Designed to work for organizations at all scales — from large health systems to small community health centers.

THE AI LIFECYCLE

The AI lifecycle is central to understanding and implementing CHAI's Responsible AI Guidance in healthcare. The six-step lifecycle outlines the essential stages and processes involved in developing, deploying, and maintaining AI systems.

By systematically addressing each phase of the lifecycle, the framework ensures that AI systems adhere to the highest standards of safety, efficacy, fairness, transparency, and security. This structured approach supports risk mitigation, managing model inconsistencies, and promotes accountability and trustworthiness in AI applications.



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|---|---|--|--|---|--|
| <p>1</p> <ul style="list-style-type: none"> Engage stakeholders to define the problem & perform root-cause analysis Identify solution & plan future state Gather business requirements Assess feasibility, potential potential for impact, & prioritization Make procure/build/partner decision | <p>2</p> <ul style="list-style-type: none"> Select/understand model task & architecture Capture design & technical requirements or determine best solution to meet business requirements Design solution application & application & system workflow according to human-centered design principles Design deployment strategy and users Design risk management, monitoring & reporting plan | <p>3</p> <ul style="list-style-type: none"> Access data Prepare data Develop data management management plan Train & tune model | <p>4</p> <ul style="list-style-type: none"> Conduct installation qualification (when applicable) Validate local system performance (when applicable) Execute prospective, silent evaluation Establish risk management management plan Train end users Test usefulness Ensure compliance with applicable healthcare regulations & standards | <p>5</p> <ul style="list-style-type: none"> Implement small-scale pilot to assess real-world impact Execute and update risk management plan Educate & train users on AI application reporting Assess usefulness and adoption | <p>6</p> <ul style="list-style-type: none"> Deploy at a larger scale on a general population Audit AI system to inform whether to maintain, refine or sunset Conduct ongoing risk management |
|---|---|--|--|---|--|

Executive Summary of the Responsible AI Guide

RESPONSIBLE AI PRINCIPLES

At its core, governance is to help define, document, and execute processes to ensure that these principles are being upheld at every stage of the AI lifecycle.

Usefulness,
Usability, &
Efficacy

Fairness

Transparency

Security &
Privacy

Safety

Why AI Governance Can't Wait

72%

of health systems are already
using or piloting AI tools

<30%

have formal AI governance
frameworks in place

\$4.5B+

in AI health care market
spending in 2025

Without governance, organizations face:

- Patient safety risks from unvalidated or biased AI outputs
- Regulatory exposure under evolving federal and state AI rules
- Equity harms when AI perpetuates disparities in underserved populations
- Vendor lock-in and unvetted third-party data practices
- Staff distrust and low adoption when AI is deployed without clear accountability

The CHC Reality

Unique CHC Challenges

- Limited IT and data infrastructure
- Small or stretched compliance teams
- Vendor contracts with limited negotiating power
- Diverse, underserved populations at higher risk of AI bias
- High regulatory burden (UDS, HRSA, Medicaid, etc.)
- Staff turnover complicates training continuity

How CHAI Helps CHCs

Right-sized guidance

Templates and tools scale to small organizations

Plain-language frameworks

Free, immediately usable

Worksheets, registers, and checklists ready to use/adapt

Built for equity

Frameworks center fairness and community impact

Peer-reviewed by CHC leaders

Developed with input from similar organizations

CHAI AI Governance Playbook

8 Domains • May 2026

1

AI Policy

2

Organizational
Structures

3

Organizational
Resources

4

Responsible AI Lifecycle

5

Risk & Impact
Assessments

6

Responsible Data
Management

7

Third Party
Management

8

Education, Training &
Feedback

AI Policy

Domain 1

WHAT IT COVERS

- Developing & maintaining AI use policies
- Defining acceptable use and prohibitions
- Version control & change management
- Staff acknowledgment and attestation
- Policy review cycle and accountability

GETTING STARTED

- 1 Inventory current AI tools in use
- 2 Draft a tiered acceptable-use policy
- 3 Identify a policy owner (CAIO or equivalent)
- 4 Establish annual review cadence

TOOLS & RESOURCES

- [CHAI AI Policy Worksheet](#)
- [Examples of How Policies Evolve Across Maturity](#)
- [Example Policy](#)
- [Common AI definitions](#)

Other tools and resources in Domain 1: Policy Playbook

Organizational Structures

Domain 2

WHAT IT COVERS

- Roles & responsibilities for AI oversight
- AI governance committee structure
- Escalation paths and decision rights
- Centralized vs. federated models
- Intake & assessment processes

GETTING STARTED

- 1 Assign an AI Governance lead or CAIO
- 2 Form a cross-functional AI committee
- 3 Create a formal AI intake process
- 4 Define escalation and override paths

TOOLS & RESOURCES

- [CHAI Roles & Responsibilities Table](#)
- [CHAI Draft Common Intake Questionnaire](#)
- [Workbook to help design your organizational governance structure](#)
- [CHAI Draft Common Intake Questionnaire](#)

Other tools and resources
in Domain 2: Organizational
Structures Playbook

Organizational Resources

Domain 3

WHAT IT COVERS

- Budgeting for AI governance
- Staffing and workforce planning
- Technology and tooling investments
- Sustaining governance over time
- Leveraging shared resources & consortia

GETTING STARTED

- 1 Assess for data, human, computing, and tooling resources needed for AI intake, evaluation, documentation, use, and governance.
- 2 Build governance into budget cycles
- 3 Explore shared-service models with peers
- 4 Document resource needs for leadership

TOOLS & RESOURCES

[Sample RACI for Domain 3: Organizational Resources](#)

Other tools and resources in Domain 3: Organizational Resources Playbook

Responsible AI Lifecycle Management & Use

Domain 4

WHAT IT COVERS

- Pre-deployment review & approval
- Performance monitoring post-launch
- Incident detection and response
- Decommissioning AI tools
- Clinician override & transparency

GETTING STARTED

- 1 Define a pre-deployment checklist
- 2 Set up performance monitoring alerts
- 3 Create an AI incident reporting process
- 4 Establish clear decommission criteria

TOOLS & RESOURCES

- [CHAI Testing & Evaluation \(T&E\) Frameworks](#)
 - [CHAI Responsible AI Lifecycle Management and Use Worksheet](#)
- Other tools and resources in Domain 4.1: Responsible AI Lifecycle Management & Use Playbook

Risk & Impact Assessments

Domain 5

WHAT IT COVERS

- Algorithmic bias screening
- Patient safety risk evaluation
- Privacy and security risk review
- Equity impact analysis
- Risk tiering and prioritization

GETTING STARTED

- 1 Identify high-risk AI use cases first
- 2 Adopt a risk-tiering framework
- 3 Assess AI tools for bias on your population
- 4 Integrate risk review into procurement

TOOLS & RESOURCES

- [CHAI Risk Categorization Tool \(v3\)](#)
- [NIST AI Risk Management Framework \(AI RMF\) & Playbook](#)
- [Microsoft Responsible AI Impact Assessment Template](#)
- [Security Risk Assessment \(SRA\) Tool \(v3.6\)](#)
- [Example Template: Risk & Impact Assessment Phases as Governance Decision Gates](#)

Other tools and resources in Domain 4.2: Risk & Impact Assessment Playbook

Risk to Life & Safety

Title: [Risk Categorization Tool v2.0](#)

Risk Assessment Domain: Life and Patient Safety & Data & Technology Risk

Primary Audience: Health systems (any size) and teams responsible for pre-deployment risk review.

Risk Modifiers: (Low, Med, High)

- Proximity of Impact on Patients
- Human in the Loop
- Consequences of Failure
- Patient Population Vulnerability
- Level of Difficulty Monitoring Solution Output
- Data Transparency
- Solution's Clinical Level of Care
- Time to Intervention (if output is wrong)
- Breadth of Potential Harm
- Integrated Error Propagation Risk
- Population Sensitivity or Outcome Variability Risk

Use Case Example: AI-assisted Patient Scheduling software (e.g., scheduling chatbot) - for outpatient, primary care clinics - simplifies booking, rescheduling, and managing patient appointments. These products allow patients to select appointment times and providers to manage their calendars, reduce no-shows, and optimize clinic workflows. Typical features include automated reminders, real-time availability updates, and integration with EHRs. Human confirms appointment once scheduled

Modifier: Distance from Patient

How physically or operationally close is the AI solution to the patient?

Low: No direct impact on individual patient care, supports back-end functions such as back office, administrative tasks, population health analysis, or workflow optimization

Medium: Indirect impact on patient care, access to care, or informational use, such as scheduling, transportation, non-clinical informational chatbots

High: AI solution has a semi-direct impact on patient care, such as, used by a healthcare professional as part of a broader clinical judgment; OR AI solution is directly involved in patient care/patient interaction

Modifier: Human in the Loop

The extent to which human oversight is involved in reviewing, verifying, or overriding the AI solution outputs before they affect patient care

Low: AI solution output is always reviewed by a relevant expert before any action is taken

Medium: AI solution output has optional human in loop review by relevant expert before any action is taken

High: AI solution output is never reviewed by provider before an action is taken

Modifier: Data Transparency

The clarity, completeness, and accessibility of the data sources and datasets used to train, test, and validate the AI solution.

Low: health system has complete access to training data of the underlying model(s) for the AI solution; lowest level of detail for the data/datasets are shared and available (e.g. AI solution is developed internally)

Medium: partial access to training data of the underlying model(s) for the AI solution; OR some level of detail for the data/datasets are shared and available.

High: no access to training data OR no components of the data/datasets are shared or available (e.g.. Data provenance and data catalog/dictionary unavailable)

? ?

See third-party management section for intake questions & model card template to help with risk evaluation

Risk modifiers for Data and Technology Risk

- Use of Sensitive Data
- Accuracy, Completeness, and Veracity of Data Used for Model Training and Operation
- Sufficiency & Representativeness of Data Used for AI Model Training and Operation
- AI Model Security Vulnerabilities
- Third-Party AI components and Vendor Risk
- AI Model Lifecycle Management and Updates
- AI Monitoring, Incident Detection, & Response
- AI Detection & Traceability

Responsible Data Management & Use

Domain 6

WHAT IT COVERS

- Data governance for AI inputs/outputs
- Patient data rights and consent
- De-identification and data minimization
- Data quality and provenance tracking
- Data Use Agreements (DUAs)

GETTING STARTED

- 1 Audit what patient data AI tools use
- 2 Review and update DUAs with vendors
- 3 Establish data quality standards for AI
- 4 Map consent requirements to AI use

Other tools and resources in Domain 4.3: Responsible Data Management & Use Playbook

TOOLS & RESOURCES

- [Data Use Agreement Discussion Worksheet](#)
- [HHS Model Business Associates Agreement](#)
- [Analytics Maturity Assessment Model \(AMAM\)](#)
- [Illustrative example of Data Acquisition Registers for a sample of AI solutions](#)
- [Joint Commission: Responsible Use of Health Data](#) Voluntary Certification
- [Guidance Regarding Methods for De-identification of Protected Health Information in Accordance with the Health Insurance Portability and Accountability Act \(HIPAA\) Privacy Rule](#)

Guidance for data management & use outside of HIPAA

- Encryption in transit and at rest when possible
- Access controls
- Regular security assessments
- Incident response plan
- Effective Data Use Agreements:
 - Permitted uses
 - Data minimization
 - Explicit Prohibition of reidentification
 - Third-party obligations that align with internal policies (e.g. encryption, regular security assessments, etc.)
 - Audit rights

Upcoming tool: Technology & Data Risk Tool

Third Party Management

WHAT IT COVERS

- AI vendor due diligence
- Contract terms for AI transparency
- Ongoing vendor performance review
- Sub-processor and data sharing oversight
- Right to audit and exit clauses

GETTING STARTED

- 1 Create a vendor AI inventory
- 2 Add AI-specific terms to contracts
- 3 Require transparency on training data
- 4 Schedule annual vendor reviews

TOOLS & RESOURCES

- [CHAI AI Intake Questionnaire](#)
- [Example Template: Assign Roles and Responsibilities](#)
- [CHAI Applied Model Card \(AMC\)](#)
- Example AI Addendums from Mercy & Kaiser Permanente in Domain 4.4 Third Party Management Playbook

Other tools and resources in Domain 4.4:
Responsible Data Management & Use Playbook



Tool: Applied Model Card

Applied Model Card Template

Name: Developer:		Inquires or to report an issue: abc@abc.com or +1 (999) 999- 9999	
Release Stage: Global Availability:		Release Date: Regulatory Approval, If applicable:	Version:
Summary: Keywords:		Uses and Directions: • Intended use and workflow: • Primary intended users: • How to use: • Targeted patient population: • Cautioned out-of-scope settings and use cases:	
Warnings			
• Known risks and limitations: • Known biases or ethical considerations: • Clinical risk level:			
Trust Ingredients			
AI System Facts: • Outcome(s) and output(s): • Model type: • Foundation models used in application, if applicable: • Input data source: • Output/Input data type: • Development data characterization: • Bias mitigation approaches: • Ongoing Maintenance: • Security and compliance environment practices or accreditations, if applicable: • Transparency, Intelligibility, and Accountability mechanisms, if applicable: Transparency Information: • Funding source of the technical implementation: • 3rd Party Information, If Applicable: • Stakeholders consulted during design of intervention (e.g. patients, providers):			
Key Metrics			

See examples of Completed model Cards on the [CHAI Model card registry](#).

Can also encourage Vendors to submit Model cards to the CHAI registry.



Tool: Applied Model Card

Key Metrics					
Usefulness, Usability, and Efficacy		Fairness and Equity		Safety and Reliability	
Goal of metric(s):		Goal of metric(s):		Goal of metric(s):	
Result:	Interpretation:	Result:	Interpretation:	Result:	Interpretation:
Test Type:		Test Type:		Test Type:	
Testing Data Description:		Testing Data Description:		Testing Data Description:	
Validation Process and Justification:		Validation Process and Justification:		Validation Process and Justification:	
Resources					
• Evaluation References, If Available: • Clinical Trial, If Available: • Peer Reviewed Publication(s): • Reimbursement status, if applicable: • Patient consent or disclosure required or suggested:					

Education, Training & Feedback

Domain 8

WHAT IT COVERS

- AI literacy for all staff/role-specific training (nice to have)
- Use-case Specific AI training programs (must have)
- Mechanisms for patient transparency & Feedback loops for AI concerns
- Tracking training completion
- Continuous learning culture

GETTING STARTED

- 1 Survey staff on AI awareness gaps
- 2 Create role-based training tiers
- 3 Launch an AI feedback/concerns channel
- 4 Track and report training completion

TOOLS & RESOURCES

- [American Hospital Association \(AHA\) Patient and Family Advisory Councils \(PFAC\) Blueprint](#)
- [Example Template: Closing the Feedback Loop on AI Incident Reporting](#)
- [Association of American Medical Colleges \(AAMC\) proposed AI Competencies Across the Learning Continuum](#)

Other tools and resources in Domain 4.5: Education, Training, & Feedback Playbook

CHAI Resources for Your Organization

Frameworks, Tools, & Playbooks

- [AI Governance Playbook \(8 domains\)](#)
- [Responsible AI Guide](#)
- [Use-case Specific Best Practice Guides & Testing & Evaluation Frameworks](#)
- [Risk Tool \(Patient Safety & Data & Technology Risk\)](#)
- [Legislative Scan on Transparency](#)
- [Patient Survey Report: Transparency & Trust](#)

Get Involved

- www.chai.org
- For membership: tom@chai.org
- Attend CHAI working group meetings: Express interest [here](#)
- Submit feedback & case studies, present at webinars
- Responsible AI team: merage@chai.org & Anthony@chai.org