

AI Readiness Checklist for Senior Living Leaders

SELF-ASSESSMENT TOOL

AI can only surface insights from information that exists, is captured consistently, and flows through the right workflows. Use this checklist to assess your clinical data foundation before investing in AI tools. Score one point for each item your organization can confidently confirm.

1 WHAT DOES THE CLINICIAN NEED TO KNOW?

- ☐ We have identified the clinical indicators that signal a change in condition for our residents.
- ☐ Clinicians can access a connected view of each resident's condition, not just isolated data points.
- ☐ Staff understand which data points are clinically significant and why they matter.
- ☐ We have defined what a complete clinical picture looks like for our residents.

2 WHERE DOES THAT INFORMATION COME FROM?

- ☐ Clinical information is documented in the EHR, not captured on paper or communicated verbally.
- ☐ Documentation workflows are standardized across departments and shifts.
- ☐ Practices are consistent regardless of who is on duty.
- ☐ We have identified gaps where clinical information is not currently captured at all.

3 IS THE INFORMATION RELIABLE?

- ☐ Our clinical data is consistently entered and complete, not sporadic or partial.
- ☐ We have processes to audit documentation quality on a regular basis.
- ☐ Staff understand why accurate documentation matters for resident care and technology.
- ☐ We distinguish between having large volumes of data and having the right clinical information.

4 IS IT MOVING THROUGH THE RIGHT WORKFLOW?

- ☐ Clinicians receive critical information when they need it, in time to act on it.
- ☐ There is clear ownership for acting on clinical alerts and changes in condition.
- ☐ Workflows are designed around clinical priorities, not administrative convenience.
- ☐ We have asked frontline staff how information actually flows, rather than assuming.

HOW TO INTERPRET YOUR SCORE

13-16

Strong foundation. Ready to evaluate AI solutions.

9-12

Solid start. Address key gaps before investing.

5-8

Foundational work needed. Prioritize data quality first.

0-4

Significant gaps. Start with a clinical workflow assessment.