AI Acceptable Use Policy Template for Behavioral Health

This template is for behavioral health organizations, such as community mental health agencies, clinics, hospitals and group practices, that are setting rules for staff use of AI. Fill in the fields, adapt the wording where your organization needs to, and have your attorney or compliance officer review the policy before you adopt it.

Organization	Policy owner (title)

Approved by	Effective date	Next review date

Purpose and scope

This policy sets the rules for using artificial intelligence (AI) tools in the work of the organization named above. It applies to every employee, contractor, trainee and volunteer who uses AI in clinical, administrative or training work, on any device or account used for that work.

Definitions

- **AI tool:** software that generates text, summaries, recordings, transcripts or other output in response to a request, such as a chat assistant or an AI scribe.
- **Approved AI system:** an AI tool listed in the table of approved AI systems as approved for identifying client information and covered by a business associate agreement (BAA) with the organization.
- **Identifying client information:** protected health information, including any of the 18 identifiers in HIPAA's Safe Harbor method.
- **De-identified material:** client material with all 18 identifiers removed for the client and the client's relatives, employers and household members, and with no other detail that staff know could identify the client.

Approved AI systems

Only the systems marked as approved for identifying client information may receive it. The policy owner keeps this table current.

AI system and plan	Approved for	BAA in place	System owner

For each system, record what it is approved for (identifying client information, de-identified material only, or administrative work with no client information) and whether a BAA is in place.

Permitted uses

Staff may use the AI tools listed in the table of approved AI systems for these purposes, within the rest of this policy:

- Planning sessions and treatment approaches from de-identified material, or from identifying information in an approved AI system.
- Drafting documentation for the clinician's review and signature.
- Practicing clinical skills with fictional clients, and studying therapy models.
- Preparing educational materials and handouts that a clinician reviews before use.
- Administrative work that involves no client information, such as general correspondence.

Other permitted uses

Prohibited uses

- Entering identifying client information into any AI tool that is not an approved AI system.
- Using AI to make clinical decisions, to diagnose or to replace the clinician's judgment.
- Using AI to communicate with clients on a clinician's behalf without the organization's approval.
- Recording or transcribing sessions with an AI tool without the client's written consent.
- Using a personal AI account for work with client material unless the table of approved AI systems lists it.
- Entering substance use disorder program records into any system that is not approved for them under the section on substance use disorder records.

Client information and de-identification

- Before entering client material into an AI tool that the table lists for de-identified material only, staff remove the 18 Safe Harbor identifiers for the client and for the client's relatives, employers and household members.
- Staff remove any other detail that could identify the client, such as a rare job or an event in the news, and refer to the client by a label such as Client A. Initials are not used.
- The original record stays in the organization's health record system.
- If identifying information is entered into an AI tool by mistake, staff record what was entered and where, delete the conversation and report it the same day to the privacy officer, who decides on next steps under the organization's breach procedure.

Privacy officer (name or title) Contact

Substance use disorder records (42 CFR Part 2)

☐ The organization operates a program whose records are covered by 42 CFR Part 2.

If this box is checked, records from that program carry additional federal protections. Staff enter them only into AI systems that the privacy officer has approved for Part 2 records, under the consents that Part 2 requires.

AI systems approved for Part 2 records

Informed consent and transparency

- Clinicians tell clients when and why AI is used in their care, as the organization's consent policy and their profession's ethics code require.
- Clinicians obtain written consent before any AI tool records or transcribes a session.
- Clients may decline AI use or recording without any effect on their services.
- Clinicians follow any state law on AI in therapy where they practice, such as the Illinois Wellness and Oversight for Psychological Resources Act.

Review of AI output and clinical responsibility

- AI output is a draft. The clinician reviews every draft for accuracy and appropriateness before it enters a record or reaches a client.
- The clinician makes every clinical decision and signs every note.
- Each note describes the specific session, with no text carried over from earlier notes.
- AI assistance is documented as the organization's documentation policy requires.

Supervision and trainees

- Supervisors approve and oversee the AI use of the clinicians and trainees they supervise, and they know the AI tools they direct supervisees to use.
- Trainees use only approved AI systems for identifying client information and bring AI-assisted work to supervision.
- Trainees follow their program's rules on AI in coursework.

Training

- Staff complete training before using AI tools at work and whenever an approved system changes.
- Training covers the approved systems, de-identification, consent, review of AI drafts, the crisis protocol and how to report a problem.

Training owner

Refresher schedule

Equity and bias

- Staff review AI output for bias and for fit with the client's culture, language and circumstances before using it.
- Before approving a system, the organization asks the vendor for information on its known risks, biases and limitations.

Requests for new AI tools

Staff request a new AI tool from the policy owner. Before approval, the organization reviews the tool's privacy terms and BAA, adds it to the HIPAA security risk analysis, tests the quality of its output, reviews it for bias and records the decision in the table of approved AI systems.

Monitoring and reporting

- Staff report AI errors, safety concerns and near misses to the policy owner.
- The organization reviews a sample of AI-assisted work and the reports received on a regular schedule.
- The organization may also report AI-related safety events confidentially, with de-identified details, to a federally listed Patient Safety Organization (PSO) or through other existing channels.
- Whenever a situation involves risk to a client, staff follow the organization's crisis protocol first.

Accreditation and review of this policy

Accrediting bodies and standards that apply

The policy owner reviews this policy and the table of approved AI systems at least once a year and whenever laws, accreditation standards or approved systems change.

Staff acknowledgment

I have read this policy, completed the required training and agree to follow it.

Name	Role	Date

Signature