AI Literacy

for Community Health Workers

Using AI to work smarter, not harder (and stay compliant!)

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2:00 – 3:00 PM CT · 50-minute session, 10-minute Q&A

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Who here has tried an AI tool?

And who has gotten back an answer they weren't sure they could trust?

AI finds patterns and generates content

Predictive AI

Finds patterns and estimates what may happen next.

Risk scores, fraud detection, recommendations.

Generative AI

Creates new text, images, audio, and summaries.

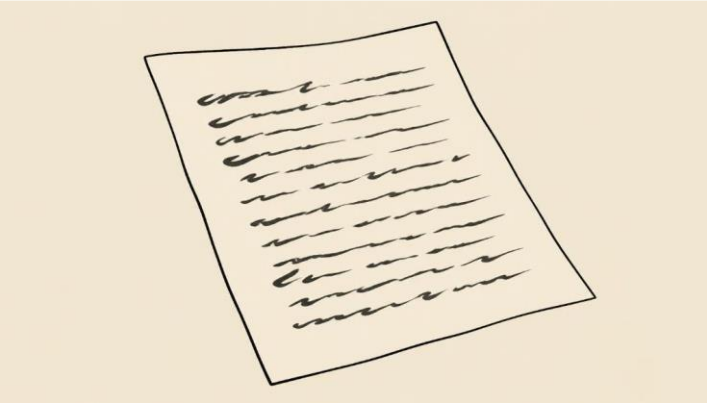
ChatGPT-style tools, copilots, writing assistants.

Everything we cover today is about the second one.

Generative AI is genuinely good at language

summarize	**organize**	**rewrite**
translate	**brainstorm**	**draft**

Generated writing is not proof of accuracy



"Here is a clear, confident, well-written answer..."

A polished answer can still be wrong.

Fluency is a feature of the tool.

Accuracy is your job.

Confidence on the screen tells you nothing about whether it is true.

AI helps most with the work around the work

Simplify

Put medical jargon into plain language.

Brainstorm

Generate ideas for outreach or education.

Draft

Start non-sensitive handouts, emails, or scripts.

Organize

Turn ideas into a checklist, outline, or plan.

Which of these takes up time in your week?

The value is after the first draft

YOUR PROMPT

"Give me five ways to explain high blood pressure in plain language for a general adult audience. Keep each explanation to two sentences."

THEN ASK YOURSELF

Is it accurate?

Is the reading level right?

Does it fit this community?

What would I change before using it?

You are the editor, not the audience.

If an answer sounds professional and includes a citation, what would make you trust it?

Check four things before you use an AI answer

1

Source

Where did this actually come from?

2

Date

How current is it?

3

Context

Does it apply to this community?

4

Claim

Can I confirm this independently?

AI can invent details that sound completely plausible

IT WILL CONFIDENTLY PRODUCE

- facts
- citations
- policies
- statistics
- details that sound exactly right



A citation on the screen is not the same as a verified source.

Think about the information you already share with clients...

What makes a source trustworthy to you?

When the stakes go up, verification goes up



The more a mistake could affect a person, the less you depend on AI alone.

Patient information changes the conversation

1. **Does this include patient or client information?**
2. **Is this tool approved by my organization for that information?**
3. **Do I actually need to share it to complete the task?**

Unsure? Stop, and ask your organization.

If your name is on the documentation, review it like you wrote it

Useful support

- organize a generic template
- improve clarity
- shorten repetitive language

Watch closely

- invented details
- changed meaning
- missing context

AI can help with wording. It should never become an unchecked author.



Keep people at the center

AI can help with the work around the work. Community health work still depends on:

trust	**relationships**	**judgment**

Use AI where it helps. Keep people at the center.

A five-step habit for using AI

01

Pause

Is AI appropriate for this task?

02

Protect

What information am I sharing?

03

Prompt

Give it a clear, limited task.

04

Verify

Check important facts and sources.

05

Own

You decide what gets used.

Which step would be easiest to skip when you are busy?

NEXT UP

Ben May

Let's do some examples!

Good uses of AI in CHW work

- ✓ Brainstorm ways to explain a general health concept.
- ✓ Rewrite a generic handout at a simpler reading level.
- ✓ Create questions to consider before a group activity.
- ✓ Draft a non-sensitive checklist, email, or educational outline.

Low stakes, no patient information, you still review the output.

Risky uses to avoid

- Pasting patient records into an unapproved chatbot.
- Assuming a confident medical answer is accurate.
- Using AI-generated citations without checking them.
- Letting AI make a patient-specific decision you are responsible for.

Each of these puts your judgment behind something you did not verify.

Sources and further reading

U.S. Department of Health & Human Services

Guidance on HIPAA & Cloud Computing

U.S. Department of Health & Human Services

Minimum Necessary Requirement

National Institute of Standards and Technology

AI Risk Management Framework: Generative AI Profile (NIST AI 600-1)



Full links are in the speaker notes and the handout version.

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