SAMPLE DELIVERABLE

AI & Compliance Readiness Assessment

An illustrative extract from the findings register — one of four documents a practice receives at the end of the two-week assessment.

> **This is a composite, not a client.** The practice profile and every finding below are assembled from patterns we see repeatedly in owner-led behavioral health and medical practices. No real practice, person or record is described here. Your findings will be specific to your own systems.

Practice profile used for this example

14 staff across two sites in Los Angeles County · psychology and behavioral health · regional-center and commercial-insurance contracts · clinical notes in an EHR, operations in a free task board and two spreadsheets · no internal IT.

8	3	11.2	$17,203
findings across 4 systems	rated critical	hours per week lost to duplicate entry	annual cost of that duplication

Hours figure derives from the practice's own numbers: 25 intakes per week, each record entered into three systems, four minutes per re-entry, at a $32 loaded hourly rate, over 48 working weeks. Every assumption is shown so the practice can challenge it.

Findings register (extract)

SEVERITY	FINDING	REFERENCE
CRITICAL	**Public intake form collects clinical detail with no BAA** A 23-field web form gathers date of birth, presenting concern, current medications and prior treatment history through a consumer form vendor. No Business Associate Agreement is on file with that vendor.	§164.502(e), §164.308(b)
CRITICAL	**Client names and clinical documents inside a free task board** Card titles carry full client names; four cards have assessment reports attached as PDFs. The board runs on a plan not covered by a healthcare BAA.	§164.502(e)
CRITICAL	**No written security risk analysis on file** The practice holds a policies binder dated 2021 and its EHR vendor's certification. Neither is a risk analysis, and neither covers the tools above.	§164.308(a)(1)(ii)(A)
HIGH	**Every board member can read every case** Access is granted at board level, so any staff member added to the intake board can open any client's record. Minimum-necessary cannot be demonstrated.	§164.502(b), §164.514(d)
HIGH		§164.312(b)

SEVERITY	FINDING	REFERENCE
	No usable audit trail The board records that a card moved, not who viewed it. If a record is questioned, the practice cannot evidence who accessed what, or when.	
HIGH	**Clinical reports circulated as email attachments** Completed reports travel to referring case managers as ordinary email attachments outside the compliance boundary.	§164.312(e)(1)
MEDIUM	**Shadow spreadsheet duplicating the live record** A spreadsheet exists solely so contractors can be given read access, because the primary system has no read-only role. It holds a second uncontrolled copy of client data.	§164.502(b)
MEDIUM	**No documented retention or disposal schedule** Records date to 2019 with no stated retention period and no archive or disposal process.	§164.316(b)(2)

What the practice receives

DOCUMENT	WHAT IT IS, AND WHY IT MATTERS
Security risk analysis	Written and dated, covering where protected health information actually lives across the practice and what could go wrong with it. This is the specific artefact most frequently cited in recent enforcement, and most small practices cannot produce one on request.
Shadow-AI and cloud inventory	Every AI and cloud tool in use, including the ones staff adopted without telling anyone, and which of them touch patient information.
AI acceptable-use policy	One page, written to be read by staff rather than filed. Covers what may and may not be put into a chatbot. Ready to adopt as written.
Automation roadmap	Prioritised, with the hours-saved arithmetic shown for each item, using the practice's own numbers rather than industry averages.

Commercial terms

- **$3,000, fixed fee, two weeks.** Not hourly. We carry the scope risk.
- **The practice keeps all four documents** whether or not it builds anything with us.
- **Money-back:** if the assessment does not surface a finding the practice did not already know, we refund it in full.
- **The fee credits in full** toward any build starting within 90 days.

> **What this is not.** MaxPower Labs is a workflow systems firm, not a law firm. We produce the documented analysis, the inventory and the policy. We do not issue legal opinions, and no software alone creates HIPAA compliance. For anything genuinely contested, involve counsel.

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