Nurses and Patients' Bill of Rights:
Guiding Principles for A.I. Justice in Nursing and Health Care

As nurses, we know that the hands-on work of caring for other people cannot and should not ever be automated. The work of registered nurses, and of other health care workers, must be provided in person. No artificial intelligence (A.I.)[1] system, including automated worker surveillance and management (AWSM)[2] systems and clinical decision support systems (CDSS)[3], will ever replace the human expertise and clinical judgement essential to providing the safe, effective, and equitable nursing care that all patients deserve. Nurses embrace, and regularly master, worker-centric technologies that complement bedside skills and improve quality of care for our patients. But we're concerned about certain technologies that are being implemented into hospital and care settings that do neither. The application of A.I. in health care settings must follow these principles in order to ensure quality patient care, safety, and equity.

1 **The right to high-quality person-to-person care.** Patients have the right to in-person health care based on their needs and wishes provided by skilled and licensed health care professionals, in the appropriate settings. The right to health care in-person by a licensed health care professional underlies all other medical care and should not be compromised by uses of A.I. or other technologies that contribute to worker displacement or deskilling.

2 **The right to safety.** Patients and workers have a right to safety at work or while receiving care. This includes mandatory, pre-market testing and approval of any new technology and ongoing monitoring by a regulatory agency to ensure that it is safe, effective, therapeutic, and equitable—the precautionary principle in action. The burden of demonstrating safety should rest with developers and deployers, not patients and their caregivers. Technology is no substitute for appropriate staffing levels for all health care workers that are necessary to ensure the highest standards of safety and care for both workers and patients.

3 **The right to privacy.** Patients and workers have the right to privacy about their health care and the right to private and secure data. Collecting information on nurses and patients should require informed consent and an opt-in process. Health care employers should be limited in the data they collect on workers and patients and should not be allowed to profit from that data.

4 **The right to transparency.** Workers and patients have the right to know what information is being collected about them, what purpose it serves, where it is stored, and whether it is being sold or shared. Patients, patient advocates, and health care professionals have the right to see the data and clinical research that underlies A.I.-based recommendations, and in the case of large language models and other generative A.I. systems, clinicians and patients should have access to the rationale behind artificial intelligence that should be explainable and interpretable by clinicians and patients. Patients and health care providers have the right to clearly understand the information about their care that is presented to them.

5 **The right to exercise professional judgment.** Nurses and other clinicians have the right to exercise their professional judgment, within their scope of practice, and to override decisions made by A.I., AWSM, and other health information technologies when doing so is clinically appropriate, without the threat of discipline or discharge. Patients have the right to a second opinion.

OUR PATIENTS. OUR UNION. OUR VOICE.

National Nurses United

042524

6 **The right to autonomy.** Workers and patients have the right to refuse to participate in data collection and worker surveillance. Patients deserve the right for their health care information to be technology-neutral. Using A.I. to diagnose and treat patients should require informed consent and an opt-in process.

7 **The right to collective advocacy for workers and their patients.** Health care workers have the right to be consulted and engaged on all policies, procedures, and best practices surrounding the implementation of A.I. Union workers must have the opportunity to bargain over whether and how technology should be implemented in the workplace before it is selected or deployed in a health care setting, and all workers have the right to workplace democracy. Workers have the right to understand how the decisions governing their working lives are made—including hiring—and patients have the right to understand how the decisions concerning their care are made, including insurance coverage determinations.

1 • **Artificial Intelligence (A.I.)** A.I. is a machine-based technology that attempts to mimic human intelligence by taking inputs in the form of massive amounts of data, processing them through algorithmic software, and generating outputs from that process. Those outputs may be in the form of predictions, content, recommendations, directions, or decisions. In the health care context, A.I. often analyzes and generates recommendations or other conclusions based on patients' electronic health records (EHRs) and other sources of data collected from patients, health care workers, and the environment.

2 • **Automated Worker Surveillance and Management (AWSM)** In nursing, AWSM technologies feed into algorithmic management systems that can make unreasonable and inaccurate decisions about patient acuity, staffing, and care with the goal of lowering labor costs and stopping union organizing.

3 • **Clinical Decision Support System (CDSS)** A CDSS is a computer application that analyzes data to provide information for health care providers to make decisions and control options for ordering tests and providing treatments for patients. These applications may provide information that does not apply to a particular patient and reproduce health care biases.