



AI-Enabled Wearable Health Technology Assurance Training Course

4 – 15 January 2027
New York

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Overview

AI-Enabled Wearable Health Technology Assurance Training Course is a ten-day advanced course for healthcare technology leaders, clinical engineering personnel, digital health managers, biomedical engineers, data governance specialists, and innovation teams, who leave with an AI-Enabled Wearable Health Technology Deployment and Assurance Blueprint. Participants connect wearable biosensors, physiological signal quality, digital biomarkers, wearable data interoperability, and post-deployment monitoring with validation, cybersecurity, human factors, and workflow controls. Agile Leaders Training Center delivers training in AI-enabled wearable health technology assurance.

Who Should Attend

- Healthcare technology leadership personnel responsible for investment, assurance, deployment, and scaling decisions
- Clinical engineering personnel responsible for connected-device performance, integration, safety, and lifecycle oversight
- Digital health personnel responsible for service design, remote monitoring, workflows, and adoption
- Biomedical engineering personnel responsible for sensing, signal quality, device evaluation, and technical evidence
- Data governance personnel responsible for lawful purpose, access, quality, privacy, and secondary use
- Product and innovation personnel responsible for requirements, pilots, suppliers, evidence, and transition to operations

The course assumes participants can assess digital health technologies and organizational controls, and it leaves out diagnosis, treatment decisions, algorithm coding, and device repair.

Departments and Industries

The course supports wearable health technology assurance across healthcare providers, medical technology, insurance, occupational health, research services, and digital health operations.

- Digital health and virtual care
- Clinical engineering and biomedical technology
- Data governance, privacy, and cybersecurity
- Quality, risk, and technology assurance
- Procurement, innovation, and product management
- Health research and population services

Learning Objectives

By the end of this course, participants will be able to:

- Analyze wearable use cases, intended users, and operational constraints
- Evaluate sensors, signal quality, edge processing, and data pipelines
- Apply validation, human-factors, privacy, and cybersecurity controls
- Compare interoperability, workflow, supplier, and procurement options
- Build pilot evidence and post-deployment monitoring plans
- Build a wearable technology deployment and assurance blueprint

Course Agenda

Day 1: Intended Use and Wearable Ecosystem

- Wearable Health Intended-Use Statement
- User, Caregiver, and Workforce Context Map
- Consumer, Wellness, and Medical Technology Boundary
- Wearable Value and Risk Hypothesis Canvas
- Stakeholder Accountability and Decision-Rights Matrix

Day 2: Sensors and Physiological Signals

- Wearable Sensor Modality Selection Grid
- Body Placement and Measurement Context Map
- Physiological Signal Quality Assessment
- Motion Artifact and Missing-Data Diagnostic Method
- Sampling, Battery, and Comfort Tradeoff Matrix

Day 3: Data Pipelines and Digital Biomarkers

- Wearable Data Provenance Record
- Time-Series Preparation and Feature Pipeline
- Digital Biomarker Definition Sheet
- Edge and Cloud Function Allocation Canvas
- Data Retention and Secondary-Use Control Map

Day 4: AI Model Development Evidence

- Dataset Fitness and Representation Checklist
- Label Quality and Reference Standard Review
- Training, Validation, and Test Separation Plan
- Subgroup Performance and Error Analysis Matrix
- Model Limitation and Failure-Mode Register



Day 5: Validation and Human Factors

- Analytical and Operational Validation Framework
- Human-AI Team Performance Assessment
- Alert Burden and Escalation Logic
- Usability and Wearability Evaluation Plan
- Transparency and User Information Checklist

Day 6: Interoperability and Workflow Integration

- Device, Application, and Record Interface Map
- Wearable Observation Data Mapping Sheet
- Identity, Time, and Context Reconciliation Method
- Remote Monitoring Workflow Integration Canvas
- Exception, Handover, and Accountability Pathway

Day 7: Privacy and Cybersecurity Assurance

- Wearable Data Purpose and Consent Matrix
- Privacy Threat and Data-Minimization Review
- Device Identity and Access Control Checklist
- Secure Update and Vulnerability Response Plan
- Connected Ecosystem Cybersecurity Boundary Map

Day 8: Procurement and Pilot Design

- Supplier Evidence and Due-Diligence Scorecard
- Total Lifecycle Cost and Support Assessment
- Pilot Population and Success-Criteria Definition
- Implementation Readiness and Dependency Register
- Procurement Requirement and Acceptance Matrix

Day 9: Monitoring and Responsible Scaling

- Post-Deployment Performance Monitoring Dashboard
- Data Drift and Model Change Review Gate
- Safety Signal and Incident Escalation Path
- Equity, Access, and Adoption Monitoring Grid
- Scale, Correct, Suspend, or Retire Decision Review

Day 10: Assurance Practice and Capstone

- Suggested Exercise: Diagnose a Wearable Signal-Quality Failure
- Suggested Exercise: Evaluate AI Validation Evidence
- Suggested Exercise: Design a Secure Workflow Integration
- Suggested Exercise: Build a Monitoring and Scaling Decision
- Capstone Exercise: AI-Enabled Wearable Health Technology Deployment and Assurance Blueprint

Practical Exercises

The course uses suggested activities that turn wearable technology proposals into testable assurance and deployment decisions.

- Suggested activity: define intended use, users, sensing context, boundaries, responsibilities, and operational constraints
- Suggested activity: examine signal quality, dataset fitness, subgroup performance, failure modes, and human-AI interaction
- Suggested activity: map interoperability, workflow, privacy, cybersecurity, procurement, and supplier evidence controls
- Suggested activity: assemble pilot criteria, monitoring measures, owners, change gates, and scaling decisions

FAQs

Who suits AI-enabled wearable health technology assurance, and what does it assume?

AI-enabled wearable health technology assurance suits technology leaders, clinical and biomedical engineering personnel, digital health managers, data governance specialists, and innovation teams. It assumes experience assessing digital health technologies and organizational controls.

How does wearable health technology assurance differ from general digital health training?

Wearable health technology assurance focuses on body-worn sensing, signal quality, continuous data, algorithm evidence, wearability, connected-device security, monitoring, and lifecycle decisions rather than digital service strategy alone.

How should teams validate AI-enabled wearable health technology?

Teams should validate intended use, sensor performance, signal quality, dataset fitness, subgroup errors, model limitations, human-AI interaction, workflow performance, and monitoring measures against defined acceptance criteria.



What makes wearable data interoperability reliable?

Reliable interoperability preserves device identity, participant identity, timestamps, units, observation meaning, measurement context, provenance, exceptions, and accountability as data moves between devices, applications, and records.

How should organizations monitor wearable health AI after deployment?

Organizations should monitor signal quality, missingness, performance, subgroup errors, alert burden, security events, workflow exceptions, adoption, model change, and safety signals through assigned owners and decision gates.

Conclusion

Participants take back an AI-Enabled Wearable Health Technology Deployment and Assurance Blueprint linking intended use, sensing, data, validation, workflows, safeguards, suppliers, evidence, monitoring, and owners. It changes how teams move from appealing device demonstrations to governed implementation decisions. The blueprint supports pilot evaluation, accountable operation, change review, and evidence-based scaling.