

Epic Cogito - Reporting & Analytics Go-Live Readiness Checklist

Clarity | Caboodle | Workbench |
SlicerDicer | TechFitFlow.com

Every gate must have a named owner and confirmed sign-off date before go-live approval. Cogito reporting must be validated and ready from day one of clinical go-live. Inaccurate reports used for CMS submission or performance management have serious institutional consequences.

CLARITY ETL CONFIGURATION AND DATA LATENCY

	Gate Item	Owner	Sign-off Date
[]	Clarity ETL nightly extract schedule confirmed - extract completes before business hours begin	_____	_____
[]	All Clarity test-mode hold timers and message delays DISABLED before clinical go-live	_____	_____
[]	Near-real-time Clarity extracts configured for operational tables: ADT, order status, bed management	_____	_____
[]	Near-real-time extract schedule confirmed for all tables used in operational dashboards	_____	_____
[]	Clarity ETL record count reconciliation completed - Chronicles vs Clarity record counts match	_____	_____
[]	Field-level completeness validated: all expected columns populated in top 20 most-used Clarity tables	_____	_____
[]	ETL failure alerting configured - DBA team notified within 30 minutes of ETL job failure	_____	_____
[]	Clarity ETL monitoring dashboard confirmed active - job success/failure visible to technical team	_____	_____
[]	Post-upgrade ETL validation procedure documented - checklist owner assigned for every Epic upgrade	_____	_____

CABOODLE DATA WAREHOUSE VALIDATION

	Gate Item	Owner	Sign-off Date
[]	Caboodle ETL nightly extract confirmed completing correctly - all fact and dimension tables populated	_____	_____
[]	EncounterFact record count reconciled against Clarity PAT_ENC - counts within tolerance	_____	_____

	Gate Item	Owner	Sign-off Date
[]	Pre-built Caboodle derived metrics validated against organizational definitions:	_____	_____
[]	- 30-day readmission flag: definition matches org policy (all-cause vs condition-specific)	_____	_____
[]	- Length of stay: calculation method matches billing and clinical operations definitions	_____	_____
[]	- Patient risk scores: risk model version and recalibration schedule documented	_____	_____
[]	Non-Epic data sources integrated into Caboodle tested end-to-end - financial, HR, or claims data	_____	_____
[]	Read-only database connection to Caboodle configured for external BI platform (Power BI/Tableau)	_____	_____
[]	HIPAA BAA confirmed with external BI platform vendor if PHI flows to that platform	_____	_____
[]	Azure Synapse (if cloud Caboodle): HIPAA compliance configuration reviewed with Microsoft	_____	_____
[]	Caboodle compute and query performance tested under expected concurrent user load	_____	_____

REPORTING WORKBENCH - DATA MODELS AND REPORT LIBRARY

	Gate Item	Owner	Sign-off Date
[]	Shipped data models reviewed - data model access rights assigned per user role and HIPAA minimum necessary	_____	_____
[]	Custom data models built for organization-specific reporting needs and reviewed by data governance team	_____	_____
[]	Data model column-level security reviewed: financial/sensitive columns hidden from clinical-only roles	_____	_____
[]	Every shipped report used for external reporting validated against official metric specification	_____	_____
[]	CMS IQR/OQR measure reports: denominator, numerator, and exclusion logic verified against CMS specs	_____	_____
[]	ED throughput reports: timestamp sources verified (registration vs triage for OP-18 door time)	_____	_____
[]	Sepsis bundle compliance reports: medication admin tables confirmed on near-real-time extract	_____	_____

	Gate Item	Owner	Sign-off Date
[]	Parallel reporting period completed for all critical reports - Cogito vs legacy system reconciled	_____	_____
[]	Report naming convention established and applied to all reports before go-live	_____	_____
[]	Report folder structure organized by domain/department before go-live - no flat report lists	_____	_____
[]	Report certification workflow configured - certified vs draft/personal reports distinguished	_____	_____
[]	Report owner assigned for every operational and CMS measure report	_____	_____
[]	Scheduled report delivery (email/fax/printer) tested for all automated report recipients	_____	_____

SLICERDICER SELF-SERVICE ANALYTICS

	Gate Item	Owner	Sign-off Date
[]	SlicerDicer slicers reviewed - each slicer configured with correct population scope per user role	_____	_____
[]	No slicer provides unrestricted organization-wide patient population access to non-authorized users	_____	_____
[]	Behavioral health and sensitive patient data excluded from SlicerDicer slicers per privacy policy	_____	_____
[]	HIPAA privacy officer has reviewed and approved all SlicerDicer slicer population configurations	_____	_____
[]	SlicerDicer access tested for each user role - correct population visible, PHI scoped correctly	_____	_____
[]	SlicerDicer slicer training completed for intended clinical and operational user communities	_____	_____
[]	SlicerDicer session audit logging confirmed active - every session and population access logged	_____	_____
[]	SlicerDicer de-identification option reviewed for research use cases if applicable	_____	_____

DATA GOVERNANCE AND METRIC DEFINITIONS

	Gate Item	Owner	Sign-off Date
[]	Canonical metric definitions documented and approved by clinical and operations leadership for:	_____	_____

	Gate Item	Owner	Sign-off Date
[]	- Patient volume (what encounter types are included, how are cancelled visits handled)	_____	_____
[]	- Length of stay (admission to discharge timestamp definition)	_____	_____
[]	- Readmission (30-day, 7-day, all-cause vs condition-specific definition)	_____	_____
[]	- Provider productivity (which visit types included, how are co-signed notes counted)	_____	_____
[]	- Surgical site infection rate, sepsis bundle compliance, and other quality metrics	_____	_____
[]	Data governance committee established with clinical, operational, and IT representation	_____	_____
[]	Report certification process active - governance committee reviews and certifies reports	_____	_____
[]	Conflicting legacy report versions decommissioned before go-live to prevent metric confusion	_____	_____
[]	All report stakeholders notified of new metric definitions before go-live	_____	_____

HIPAA SECURITY AND ACCESS CONTROLS

	Gate Item	Owner	Sign-off Date
[]	Row-level security implemented in Clarity/Caboodle per user role - department-level filtering confirmed	_____	_____
[]	Column-level security reviewed per data model - financial and diagnosis columns scoped correctly	_____	_____
[]	Clarity database connection (SQL Server) secured - read-only accounts, no write access to reporting users	_____	_____
[]	Caboodle database connection secured - read-only service accounts for all BI platform connections	_____	_____
[]	HIPAA audit logging confirmed for all Reporting Workbench report runs and patient record access	_____	_____
[]	HIPAA audit log retention period confirmed: minimum 6 years per HIPAA standard	_____	_____
[]	HIPAA privacy officer has signed off on Cogito reporting security configuration	_____	_____
[]	Cogito access provisioning process documented - how users request and receive reporting access	_____	_____

	Gate Item	Owner	Sign-off Date
[]	Cogito access removal process documented - how access is revoked when staff leave or change roles	_____	_____

GO-LIVE OPERATIONS AND MONITORING

	Gate Item	Owner	Sign-off Date
[]	Cogito reporting analyst assigned to go-live command center for first 72 hours	_____	_____
[]	Day-1 operational reports ready: daily census, ED throughput, OR utilization, pharmacy charge capture	_____	_____
[]	Critical operational dashboards validated with 24 hours of live data before go-live	_____	_____
[]	Clarity ETL monitoring confirmed active - first post-go-live ETL run validated manually	_____	_____
[]	Go-live reporting readiness communicated to department managers - what is available on day 1	_____	_____
[]	Report issue escalation path documented: end user > report owner > Cogito analyst > Epic support	_____	_____
[]	Legacy reporting system read-access maintained for first 30 days for parallel verification	_____	_____
[]	Post-go-live report validation schedule: day 3, 7, 30 reconciliation against clinical operations data	_____	_____