

# Epic Workflow Audit Guide & Observation Template

Observation | Data Analysis | Interviews |  
Gap Classification | TechFitFlow.com

A workflow audit surfaces gaps between intended and actual Epic use. It requires observation during real shifts, data analysis for systematic patterns, and structured interviews for qualitative context. Survey alone is insufficient.

## SECTION 1 - OBSERVATION CHECKLIST (PER UNIT / DEPARTMENT)

Observer completes one session per unit type. Minimum one full shift. Use a separate sheet per unit.

<b>Unit / Department:</b> _____	<b>Shift Observed:</b> _____	<b>Observer:</b> _____	<b>Date:</b> _____
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### NURSING DOCUMENTATION WORKFLOW OBSERVATIONS

	Observation Item	Observation / Notes
<input type="checkbox"/>	Note time stamps: when is nursing assessment being documented vs when was assessment performed?	
<input type="checkbox"/>	Are staff documenting at the bedside on mobile devices, or at workstations away from patient rooms?	
<input type="checkbox"/>	Average workstation login time observed: is slow login creating workaround behavior?	
<input type="checkbox"/>	Are any flowsheet rows being skipped or consistently left blank? Which ones?	
<input type="checkbox"/>	Is shift handoff documentation being completed before or after shift end?	
<input type="checkbox"/>	Any paper forms in use alongside Epic that were not there at go-live?	
<input type="checkbox"/>	Are super-users being asked for help with the same steps repeatedly (training gap indicator)?	

### MEDICATION ADMINISTRATION (BCMA) OBSERVATIONS

	Observation Item	Observation / Notes
<input type="checkbox"/>	Average time from medication retrieval from ADC to BCMA scan and documentation	
<input type="checkbox"/>	Any workarounds observed: medications scanned at nursing station instead of bedside?	
<input type="checkbox"/>	Any BCMA scan failures observed? What was the user response (retry, manual override, call pharmacy)?	
<input type="checkbox"/>	Is the high-alert medication confirmation step being completed or routinely bypassed?	

<input type="checkbox"/>	Are override reasons being typed or selected from a list - does the list match clinical scenarios?	
<input type="checkbox"/>	Any medications not scannable due to missing NDC - how are these being handled?	

### CDS ALERT AND ORDER ENTRY OBSERVATIONS

	Observation Item	Observation / Notes
<input type="checkbox"/>	What is the typical provider response to CDS alerts - read, acknowledge, or click through without reading?	
<input type="checkbox"/>	Are any CDS alerts being overridden by the same reason code every time (alert calibration issue)?	
<input type="checkbox"/>	Are order sets being used as designed or are providers bypassing order sets and ordering individually?	
<input type="checkbox"/>	Any order sets with content that providers consistently modify before signing?	
<input type="checkbox"/>	How long does a typical order set placement take from opening to signing?	

### GENERAL WORKFLOW AND PROCESS DRIFT OBSERVATIONS

	Observation Item	Observation / Notes
<input type="checkbox"/>	Any workflows being performed outside Epic that were expected to be in Epic (paper, external spreadsheets)?	
<input type="checkbox"/>	Any workflows where staff go between Epic and another system repeatedly that could be streamlined?	
<input type="checkbox"/>	Super-user availability and usage: are users asking their super-user or calling the help desk?	
<input type="checkbox"/>	Workstation availability: any units where staff are waiting for a free workstation to document?	

### SECTION 2 - STRUCTURED INTERVIEW QUESTION GUIDE

Conduct 30-minute interviews with: 1 department manager, 2-3 frontline staff, 1 super-user per unit. Use these questions as a guide - not a script.

<b>Workflow pain points</b>	What step in your daily Epic workflow takes the most time? What happens when the system doesn't do what you expected? What do you do instead?
<b>Feature awareness</b>	Are there any tasks you still do outside Epic that you thought Epic would handle?
<b>Feature under-use</b>	Is there anything in Epic you know exists but haven't figured out how to use effectively?
<b>Documentation burden</b>	Are there any fields or documentation steps you feel are unnecessary for your workflow?

<b>Workarounds</b>	Is there anything you do differently in Epic than you were trained to do? Why did you change your approach?
<b>Enhancement priority</b>	If you could change one thing about how Epic works for your role, what would it be?
<b>Positive observations</b>	What in Epic works better than your previous system? What do you want to make sure we don't change?