



Go-Live Readiness Criteria

Health-Chex, LLC · Consulting & Training

Decide with evidence, not with optimism

Most go/no-go meetings fail the same way: the criteria were never written down, so the conversation becomes a contest of confidence between the people who want to go and the people who are nervous. This worksheet forces the criteria into the open **before** the meeting, keeps the **go/no-go decision** separate from the **fix list**, and makes every claim something a person could check and record as failed. Complete the header once, then one row per function.

DECISION — COMPLETE ONCE

ORGANIZATION / PROJECT	PLANNED GO-LIVE DATE	GO / NO-GO MEETING <i>Far enough ahead that "no" is still affordable — usually 5 to 7 days out, not the night before.</i>
WHO MAKES THE CALL <i>One named person, not a committee</i>	WHO MUST BE IN THE ROOM	WHAT "NO-GO" MEANS IN PRACTICE <i>Delay to what date — and what happens to the people already scheduled</i>
LAST DATE A DELAY CAN BE CALLED <i>After this, the cost of stopping exceeds the cost of going</i>	WHO TELLS THE STAFF	ROLLBACK PLAN EXISTS AND HAS BEEN TESTED? <i>Y / N — and who tested it, when</i>

CRITERIA — ONE ROW PER FUNCTION

FUNCTION OR AREA <i>registration, pharmacy, lab, billing...</i>	CLAIM THAT MUST BE TRUE <i>written so someone could record it as failed</i>	EVIDENCE, AND WHO VERIFIES IT <i>name — not "the team"</i>	VERIFIED <i>Y / N / date</i>	WEIGHT <i>Blocker · Should-fix · Watch</i>

Only three weights, and only one of them stops a go-live. A **Blocker** is a claim that, if false, means patients or revenue are harmed on day one — and it stops the go-live on its own, without debate. A **Should-fix** goes on the fix list with an owner and a date. A **Watch** you look at in week one. If more than a fifth of your rows are Blockers, they are not all blockers — and the ones that aren't teach everybody that the word means nothing.

WORKED EXAMPLE — THREE ROWS FILLED IN

FUNCTION	CLAIM THAT MUST BE TRUE	EVIDENCE, AND WHO VERIFIES	VERIFIED	WEIGHT
Pharmacy	Every order in the top-20 formulary list transmits to the dispensing system and returns a confirmation within 60 seconds, including the three that require a weight-based dose.	Pharmacy lead runs all 20 in the mirrored environment and keeps the log. <i>Named: not "pharmacy."</i>		Blocker — a silent failure here reaches a patient
Registration	A walk-in with no referral can be registered and routed without a workaround, by a clerk who has not been shown how that morning.	Observed on two clerks by the trainer, using the go-live build, not the training build.		Blocker — it happens on day one, every site
Billing	A claim generated from a day-one encounter passes the clearinghouse edit check.	Revenue cycle manager submits three test claims and reports the rejections.		Should-fix — painful, but it surfaces in week two, not hour one

Notice what the claims have in common. Each one names a condition and a person, and each one could come back false. "Pharmacy is ready" cannot come back false — there is no observation that would contradict it, which is why it always gets a yes. The claim in the first row can fail on a Tuesday afternoon with a log to prove it, which is the entire point.

FIX LIST — KEPT SEPARATE FROM THE DECISION

ISSUE	WEIGHT	OWNER	DUE	WORKAROUND IF IT IS NOT FIXED BY GO-LIVE <small>who is told, and how</small>

THE DECISION

DECISION	IF "GO WITH CONDITIONS" — THE CONDITIONS, AND WHO OWNS EACH	DECIDED BY / DATE
Go · Go with conditions · No-go		

A readiness review before your go/no-go meeting. Send us your criteria as they stand and we will read them against the failure modes above — which claims cannot fail, which blockers are not really blockers, and which function nobody has written a row for. We will write back before your meeting. No charge, and no obligation after it. info@health-chex.com