

SOP Template: Discrepancy Identification and Reporting Procedures

This SOP details the **discrepancy identification and reporting procedures**, encompassing the systematic process for detecting, documenting, and communicating discrepancies within operations. It ensures timely identification, accurate reporting, root cause analysis, corrective action implementation, and continuous monitoring to maintain quality control and operational efficiency across all departments.

1. Purpose

To establish a consistent approach for the identification, documentation, reporting, investigation, and resolution of discrepancies in operational processes.

2. Scope

This SOP applies to all employees and departments involved in operational activities where discrepancies may occur, including but not limited to inventory, production, quality control, and administrative processes.

3. Responsibilities

- **All Employees:** Identify and report discrepancies promptly according to the procedure.
- **Supervisors/Managers:** Review discrepancy reports, coordinate investigations, and implement corrective actions.
- **Quality Assurance:** Analyze trends, verify corrective actions, and ensure compliance with SOP.

4. Definitions

- **Discrepancy:** Any deviation or inconsistency from standard operations, documented procedures, specifications, or expected outcomes.
- **Corrective Action:** Steps taken to eliminate the cause of a detected discrepancy.
- **Root Cause Analysis (RCA):** A structured method to determine the underlying cause(s) of a discrepancy.

5. Procedure

1. **Identification**
 - Employees systematically monitor activities and records for discrepancies.
 - Examples include documentation errors, inventory mismatches, process deviations, equipment malfunctions, or quality issues.
2. **Documentation**
 - Upon detecting a discrepancy, complete a **Discrepancy Report Form** (see Appendix A).
 - Include detailed description, date/time, department, personnel involved, and supporting evidence (photos, logs, etc.).
3. **Notification and Reporting**
 - Submit the completed form to the immediate supervisor or designated authority within 24 hours.
 - If the discrepancy has immediate operational impact, report verbally in addition to written documentation.
4. **Investigation and Root Cause Analysis**
 - Supervisor initiates investigation within 48 hours of report receipt.
 - Collaborate with relevant personnel to perform a Root Cause Analysis if necessary.
5. **Corrective Action**
 - Develop an action plan to address the cause(s) and prevent recurrence.
 - Assign responsibilities and deadlines for each action item.
6. **Follow-Up and Closure**
 - Quality Assurance or supervisor verifies implementation and effectiveness of corrective actions.
 - Close the discrepancy report once actions are complete; archive documentation for record-keeping.
7. **Continuous Monitoring**
 - Review discrepancy trends regularly (e.g., monthly or quarterly).
 - Update procedures as needed based on recurrent or significant findings.

6. Records

Maintain completed discrepancy reports, investigation records, root cause analyses, and corrective action plans for a minimum of [X] years, in accordance with company policy.

7. Appendix A: Discrepancy Report Form (Sample)

Field	Description
Date/Time	When discrepancy was identified
Department/Area	Where the discrepancy occurred
Description of Discrepancy	Detailed account of the event/issue
Personnel Involved	Names/roles of individuals involved
Immediate Action Taken	Measures taken initially to address the issue
Reported By	Name and signature of reporting employee
Date Reported	Date the report was submitted
Supervisor Comments	Review and notes from supervisor
Corrective Actions	Summary of corrective steps taken

8. Revision History

Version	Date	Description of Changes	Prepared By
1.0	YYYY-MM-DD	Initial release	[Name]