SOP Template: Incident Reporting and Discrepancy Resolution Steps

This SOP details the **incident reporting and discrepancy resolution steps**, outlining the systematic process for identifying, documenting, and addressing incidents and discrepancies in the workplace. It emphasizes timely reporting, clear communication, thorough investigation, root cause analysis, corrective action implementation, and follow-up to prevent recurrence, ensuring compliance with organizational policies and fostering a safe and efficient work environment.

1. Purpose

To establish a standardized process for reporting incidents and resolving discrepancies in the workplace, ensuring prompt correction, compliance with company policies, and continual improvement.

2. Scope

This procedure applies to all employees, contractors, and visitors involved in or witnessing incidents, near misses, or discrepancies within the organization.

3. Definitions

Term	Definition	
Incident	An unplanned event that results in or could result in injury, illness, damage, or loss.	
Discrepancy	A deviation from standard procedure, specification, or expectation.	
Corrective Action Measures taken to eliminate the root cause of an incident or discrepancy.		

4. Responsibilities

- All Employees: Promptly report all incidents and discrepancies.
- Supervisors/Managers: Ensure reports are completed, conduct initial assessment, and lead investigations.
- HSSE/Quality Team: Support investigations, verify corrective actions, and maintain records.

5. Procedure

1. Immediate Response

- Ensure safety of all involved personnel.
- Provide necessary first aid or emergency response if required.

2. Detection and Notification

· Any individual identifying an incident/discrepancy reports it promptly to their supervisor/manager.

3 Documentation

Complete the Incident Report Form with all relevant details (date, time, individuals involved, description, etc.).

4. Assessment & Prioritization

o Determine severity/urgency of the incident or discrepancy.

5. Investigation

- o Supervisor/assigned team investigates, gathering facts, evidence, and statements.
- o Identify root cause using appropriate analysis tools (e.g., 5-Whys, Fishbone diagram).

6. Corrective and Preventive Actions (CAPA)

- Develop and implement short-term and long-term corrective actions to address root cause(s).
- Assign responsibilities and completion timelines.

7. Communication

o Inform all relevant stakeholders of findings, actions taken, and any changes to procedures.

8. Verification & Closure

- · Verify effectiveness of corrective actions.
- o Close out report, ensuring all actions are complete and documented.

9. Record Keeping

• File all incident/discrepancy reports and investigation documentation as per company retention policy.

10. Review & Continuous Improvement

o Regularly review incident data for trends and areas for improvement.

6. Forms & Attachments

- Incident Report Form
- Root Cause Analysis Template
- · Corrective Action Log

7. References

- Organizational Health & Safety Policy
- Quality Management System Manual
- Relevant Regulatory Standards

8. Revision History

Version	Date	Description of Change	Author
1.0	2024-06-05	Initial release	SOP Team