

Please refer to Standard Operating Procedures **SOP0004 – Problem of the Day Worksheet** at <https://ssiconsulting.ca/free-tools/> for instructions and a completed sample Problem of the Day Worksheet.

Company Name		Date	
Department		Number	

<b>What is the problem?</b>			
Responsible		Phone	
Participants			

<p>Define the problem <i>(Which object? / Which defect?)</i></p> <p><i>Use an expression such as: "The tank will not come up to the proper temperature after shutdown"</i></p>	<p>Where was it spotted?</p> <p>Location in the shop:</p> <p>Location on the product, the machine:</p>
<p>When did it appear?</p> <p>Crew: _____ Date: _____ Time: _____</p>	<p>How much, how many?</p> <p>How many products?</p> <p>How many breakdowns?</p> <p>How often did it appear?</p>
<p>Who spotted the problem?</p>	<p>How was it spotted?</p> <p>Was there a system to prevent it from occurring? YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>Did the system function properly? YES <input type="checkbox"/> NO <input type="checkbox"/> NA <input type="checkbox"/></p>

Immediate Actions to Protect the Customer			
Actions	Who	When	Done ?
			q
			q
			q

Was the protection effective? YES  NO

## Comparison With the Standards

<p><b>MACHINE SETUP</b></p> <p>Is there a setup sheet? <span style="float: right;">YES <input type="checkbox"/> NO <input type="checkbox"/></span></p> <p>Was the setup applied? <span style="float: right;"><input type="checkbox"/> <input type="checkbox"/></span></p> <p>Will the correct setup avoid the occurrence of the problem? <span style="float: right;"><input type="checkbox"/> <input type="checkbox"/></span></p> <p>Is there a machine parameter linked to the problem? <span style="float: right;"><input type="checkbox"/> <input type="checkbox"/></span></p> <p>- <span style="float: right;"><input type="checkbox"/> <input type="checkbox"/></span></p> <p>- <span style="float: right;"><input type="checkbox"/> <input type="checkbox"/></span></p>	<p><b>PRODUCTS / MATERIALS</b></p> <p>Is the incoming product specified? <span style="float: right;">YES <input type="checkbox"/> NO <input type="checkbox"/></span></p> <p>Was the incoming product conform to specs? <span style="float: right;"><input type="checkbox"/> <input type="checkbox"/></span></p> <p>Was the packaging correct? <span style="float: right;"><input type="checkbox"/> <input type="checkbox"/></span></p> <p>- <span style="float: right;"><input type="checkbox"/> <input type="checkbox"/></span></p> <p>- <span style="float: right;"><input type="checkbox"/> <input type="checkbox"/></span></p>
<p><b>STANDARD WORK METHOD</b></p> <p>Is there a standard? <span style="float: right;">YES <input type="checkbox"/> NO <input type="checkbox"/></span></p> <p>Was the standard applied ? <span style="float: right;"><input type="checkbox"/> <input type="checkbox"/></span></p> <p>Will the standard avoid the problem? <span style="float: right;"><input type="checkbox"/> <input type="checkbox"/></span></p> <p>Is there a key point linked to the problem? <span style="float: right;"><input type="checkbox"/> <input type="checkbox"/></span></p> <p>- <span style="float: right;"><input type="checkbox"/> <input type="checkbox"/></span></p> <p>- <span style="float: right;"><input type="checkbox"/> <input type="checkbox"/></span></p>	<p><b>FLOW AND ENVIRONMENT</b></p> <p>- Are the WIP levels respected <span style="float: right;">YES <input type="checkbox"/> NO <input type="checkbox"/></span></p> <p>- Is FIFO respected? <span style="float: right;"><input type="checkbox"/> <input type="checkbox"/></span></p> <p>- Is the zoning respected? <span style="float: right;"><input type="checkbox"/> <input type="checkbox"/></span></p> <p>- Are the containment zones properly used? <span style="float: right;"><input type="checkbox"/> <input type="checkbox"/></span></p> <p>- <span style="float: right;"><input type="checkbox"/> <input type="checkbox"/></span></p> <p>- <span style="float: right;"><input type="checkbox"/> <input type="checkbox"/></span></p> <p>- <span style="float: right;"><input type="checkbox"/> <input type="checkbox"/></span></p>

Simple problem? NO  Why? \_\_\_\_\_ YES  The root cause is: \_\_\_\_\_

Worksheet Continues on Page 2

This is Page 2 of the Worksheet.

Company Name	
Department	

Date	
Number	

What is the Problem?	
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**Actions to Correct the Problem, Eliminate the Root Cause**

Actions	Who	When	Done?
			⊕
			⊕
			⊕
			⊕
			⊕
			⊕
			⊕
			⊕

Was the standard updated?      YES       NO

Is the problem solved?      Yes       NO

Decision taken: