

Problem Statement Template

A structured way to describe the issue your team is addressing, its impact, and its likely causes. Sits at the top of the PDSA worksheet.

A good problem statement names the issue, its impact, and enough of its context for the team (and anyone reading later) to understand why this work matters. It is short. It does not propose solutions. It sets up the aim.

What to include

What is happening	The observed problem, in plain language. Avoid jargon.
Who is affected	Which patients, families, or team members? How many? Where?
Why it matters	What is the impact on outcomes, experience, workload, or equity?
What the data shows	Relevant numbers from clinical system searches, audits, recall reports, or team observation.
What we think is causing it	Initial hypotheses. Note these are hypotheses, not conclusions.

TIP

A well-written problem statement is specific enough that someone new to the team could repeat it back without a preamble. If it sounds like a vision statement, sharpen it.

Worked example

EXAMPLE — TOWNSVILLE FAMILY PRACTICE

PROBLEM STATEMENT

Refugee health assessments at Townsville Family Practice are completed inconsistently. A recent audit of 30 newly registered refugee-background patients found only 12 had a documented health assessment within 3 months of registration. Reception reports that interpreter bookings are often arranged the day of the appointment, leading to missed Sango interpreter availability. GPs report struggling to complete a comprehensive assessment in a standard 15-minute appointment, particularly where complex needs or sensitive history emerge. Without a structured booking workflow, refugee health assessments tend to be partial, delayed, or missed.

FIVE WS

What	Inconsistent and incomplete refugee health assessments. 12 of 30 newly registered patients had a documented assessment within 3 months.
Who	Newly registered refugee-background patients and their families. Affects all GPs, both PNs, reception, and PM.
When	Observed since refugee-background arrivals increased in 2025; quantified at baseline audit 15 April 2026.
Where	Across the whole practice; particularly affects patients requiring Sango interpreting.
Why	Incomplete assessments delay clinical care, miss safety opportunities, and reduce MBS 701/703 utilisation. Creates equity gap for newly arrived patients.

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FILL IN WITH YOUR TEAM

PRACTICE NAME

DATE

ONE-PARAGRAPH PROBLEM STATEMENT

A 3–6 sentence paragraph covering what is happening, who is affected, what the data shows, and why it matters. Do not propose solutions yet.

FIVE WS

What <i>is happening?</i>	
Who <i>is affected?</i>	
When <i>did it start? when is it worst?</i>	
Where <i>in the practice?</i>	
Why <i>does it matter?</i>	

INITIAL HYPOTHESES

What does the team think is causing the problem? List 2–4 hypotheses. Test them with **Appendix 05 (Cause & Effect)**.

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NEXT STEP

The problem statement sits at the top of the PDSA worksheet (**Appendix 07**). It also seeds the aim statement (**Appendix 01**) and drives the cause-and-effect analysis (**Appendix 05**).