Assessment Report

Windsor Machine & Stamping (2009) Ltd.- G & R Cold Forging Plant 3

Report Author
Ganesh Natarajan

Visit Start Date
09/27/2011

Introduction

This report has been compiled by Ganesh Natarajan and relates to the assessment activity detailed below:

Visit ref/Type/Date/Duration	Certificate/Standard	Site address
7716701 NCR closeout visit 09/27/2011 1 day(s) No. Employees: 67	TS 543510 ISO/TS 16949:2009	Windsor Machine & Stamping (2009) Ltd. G & R Cold Forging Plant 3 7085 Smith Industrial Drive McGregor Ontario N0R 1J0 Canada

Client management system version(s):

Quality Manual/ 14-Jul-2009

The objective of the assessment is to follow-up on the NC's issued during the reassessment visit for their effective resolution

Management Summary

The NC's reviewed during the course of the visit were generally found to be effective.

Corrective actions with respect to nonconformities raised at the last assessment have been reviewed and found to be effectively implemented.

No new nonconformities were identified during the assessment. Enhanced detail relating to the overall assessment findings is contained within subsequent sections of the report.

Areas Assessed & Findings

Follow-up visit to verify the NC's from the RA visit

The major and minor NC's issued during the reassessment was followed up was reviewed and resolved as per comments in the NC's below.

Major Nonconformities Raised at Last Assessment

Ref	Area/Process	Clause
A595872/1	Manufacturing	8.2.3.1

Details:	The manufacturing process implementation as per the control plan was not effective. IS/TS Clause 8.2.3.1 requires The organization shall maintain manufacturing process capability or performance as specified by the customer part approval process requirements. The organization shall ensure that the control plan and process flow diagram are implemented, including adherence to the specified ☐ measurement techniques, ☐ sampling plans, ☐ acceptance criteria, and ☐ reaction plans when acceptance criteria are not met. Objective evidence On review of the control plan of the Head rest (P415), the following issues were found with respect to adherence to control plan requirements. 1. Head rest control plan specifies receiving inspection of tube to be done using height/ length gage- but it is being done using a tape measure. 2. Broach Process calls for 1 pc set-up inspection of Broach- Notch Angles/ True position/ Radius, but there is no records of the same being done. 3. Head Rest Inspection- Control calls for once/ day inspection of the head rest foam using the template fixture, but it only done once/ month and also the feeler gage used is not as per the tolerances specified, i.e. +/- 3 mm. 4. Re-hit Back set bend process specifies 100% inspection of the Bend offset/ leg pitch/ bun level using an assembly fixture, but the same is not done. The bend offset is being done using another attribute gage that is not under calibration.
Actions:	Containment actions: The control plan for P415 was reviewed and updated with inspection sheets implemented to conform to the control plan requirements. The was verified and found to completed. Root cause: As the previous quality manager quit and as the replacement was not done in time, during the past several months, Quality Management was not being performed as expected or required at the Plant level. The Quality System was not audited or monitored on a consistent basis to verify conformance to control plans. Corrective action taken/ verification: Review of all product control plans, update as required/ inspection criteria (review FMEA for RPN), update as required/ Process inspection criteria implemented per control plans/ Quality Auditors trained per floor inspection requirements All these actions have been done as per the plan and it was verified for effectiveness by sampling control plan implementation for part # P415 (front/ rear rows) and D258 and found to be effectively implemented.
Closed?:	Yes

Ref	Area/Process	Clause
A595872/2	QA-Calibration	7.6
Details:	The calibration/ verification of inspection/ test devices used in manufacturing was not effectively managed. ISO/TS requirements 7.6 Control of monitoring and measuring equipment The organization shall determine the monitoring and measurement to be undertaken and the monitoring and	

	measuring equipment needed to provide evidence of conformity of product to determined requirements. 7.6.2 Calibration/verification records Records of the calibration/verification activity for all gauges, measuring and test equipment, needed to provide evidence of conformity of product to determined requirements, including employee- and customer-owned equipment, shall include ☐ equipment identification, including the measurement standard against which the equipment is calibrated, ☐ revisions following engineering changes, ☐ any out-of-specification readings as received for calibration/verification, ☐ an assessment of the impact of out-of-specification condition, ☐ statements of conformity to specification after calibration/verification, and ☐ notification to the customer if suspect product or material has been shipped Objective evidence: 1. The Vernier caliper/ micro meter/ tape measures used for receiving inspections is not calibrated. 2. For the P415 head rest program, the attribute gage used for bend reset is not calibrated/ verified. 3. Template fixtures used for inspection of head rests is not listed and also periodically verified for accuracy as required by PR-QA-009 (WMG Procedure), e.g. P415 front row head rest template. 4. WK/WD Armrest uses a force gage for checking the cup insertion force, but this gage is not calibrated. Also the gage used for strap parallelism is not under calibration/ verification
Actions:	Containment actions: The equipment identified in the objective evidence was reviewed and verified/ calibrated to confirm no risk to the customer. Root cause: As previous Quality Manager had anticipated other career opportunities, there was a lack of initiative and control with respect to gauge calibration. This was not controlled and hence the calibration system was not well managed. Corrective action taken/ verification: A new Quality Management staff has been implemented, and access to gauge control software has been provided. All gauges and testing equipment within the plant will be identified and entered into the Pro-Gauge calibration program. Any equipment that requires calibration will be sent out for inspection and frequencies of inspection or verification will be identified. Any inspection equipment that is not calibrated or in use will be removed from production processes and deemed obsolete. All the actions has been implemented and this was verified by reviewing the P415 inspection equipment (Drop gage #14337/ Verinier # SH9228/ Rehit gages 13895/ Template gages for all programs). The gage pro software has been implemented to keep track of the calibration schedules and is being managed by the Quality Manager.
Closed?:	Yes

Minor Nonconformities Raised at Last Assessment

Ref	Area/Process	Clause
A595872/1	Reviews	8.4/ 8.5.1
Details:	The process of reviewing quality objectives and their data for QMS effectiveness and improvement was not effective in implementation.	

	8.4 Analysis of data The organization shall determine, collect and analyse appropriate data to demonstrate the suitability and effectiveness of the quality management system and to evaluate where continual improvement of the effectiveness of the quality management system can be made. This shall include data generated as a result of monitoring and measurement and from other relevant sources. The analysis of data shall provide information relating to a) customer satisfaction (see 8.2.1), b) conformity to product requirements (see 8.2.4), c) characteristics and trends of processes and products, including opportunities for preventive action (see 8.2.3 and 8.2.4), and d) suppliers (see 7.4). 8.4.1 Analysis and use of data Trends in quality and operational performance shall be compared with progress toward objectives and lead to action to support the following: ☐ development of priorities for prompt solutions to customer-related problems; ☐ determination of key customer-related trends and correlation for status review, decision-making and longer term planning; ☐ an information system for the timely reporting of product information arising from usage. Objective evidence: 1. Although the rework/ sorting hours was reviewed, the data back up was not available. 2. Premium freight data is available, but not analyzed for any actions during the reviews. 3.CI cost reductions not tracked for 2011.
Actions:	Containment actions: None done as the review of the objective evidence showed no risk to customer and it was of documentary nature. Root cause: Although certain quality objectives were being monitored, there was minimal structure to how data was collected and used for improvement and effectiveness of the Management System. This ineffectiveness was related to the Company restructuring and minimal direction from a Corporate level. Corrective action taken/ verification: All business plan measurable items will be reviewed and only those which are critical to customer satisfaction and plant efficiencies will be maintained and monitored. Within each critical measurable, the Plant and Corporate Management staff will identify the key components and data that must be collected and measured to accurately identify the effectiveness of the QMS. Corporate has recently established a Quality Director to assist in monitoring this system. The cost of poor quality data collection and components have been streamlined and is being reviewed monthly for corrective actions/ improvements and this was verified for the Aug'11 and found to be implemented.
Closed?:	Yes

Ref	Area/Process	Clause
A595872/2	Corrective Action Process	8.5.2
Details:	The corrective action process is not effective in implementation.	

	ISO/TS requires 8.5.2 Corrective action The organization shall take action to eliminate the causes of nonconformities in order to prevent recurrence. Corrective actions shall be appropriate to the effects of the nonconformities encountered. A documented procedure shall be established to define requirements for a) reviewing nonconformities (including customer complaints), b) determining the causes of nonconformities, c) evaluating the need for action to ensure that nonconformities do not recur, d) determining and implementing action needed, e) records of the results of action taken (see 4.2.4), and f) reviewing the effectiveness of the corrective action taken. Objective evidence: On review of the CA process the following implementation weakness was found. 1. CAR log maintained does not consistently list all customer complaints, i.e. the Lear issues QN # 016182/ 0152724/ 0151448 was not documented in the CAR log. 2. CA are closed without verification of completion of all actions listed. e.g. Lear QN #0151448 listed PM of monitoring of coolant filters as per maintenance schedule and testing of the cell programs to be tested daily, but there was no evidence of these actions being done. CAR # 2011-20 issued for JCI compliant listed pallet tag inspection to be added to PM, but no evidence it in the PM. 3. Although Supplier issues of Intier, Ackunia was dealt with, there was no formal CAR in the system as defined in the CA process- PR-QA-005. 4. Internal audit findings are documented, but their CA and follow-up including tracking is not consistently done using the CAR system-PR-QA-005/ IA system-PR-QA-006.
Actions:	Containment actions: All the CA in the objective evidence was reviewed and actions taken to prevent any risk to customer. Root cause: Quality Management did not maintain CAR logs effectively. Corporate Quality entity was removed during the Company restructuring process which created a lack of Plant level accountability. Corrective actions taken/ verification: CAR log will be reviewed to ensure that all corrective actions are evident in CAR log. Any corrective actions which are found on customer quality websites will be downloaded and a hard copy will be placed in the CAR log. Each corrective action will be verified by new Quality Management and monitored by Corporate Quality to ensure implementation is complete and effective. A separate CAR log will be maintained for all supplier corrective actions. All these actions have been implemented and the effectiveness was verified by sampling CA taken since the last audit and found to be effective (Customer Compliant CAR # 2011-33/ Internal audit CAR # 30,31, 32)
Closed?:	Yes

Ref	Area/Process	Clause
A595872/3	QA-MSA	7.6.1
Details:	The MSA process was not effective	

	7.6.1 Measurement system analysis Statistical studies shall be conducted to analyse the variation present in the results of each type of measuring and test equipment system. This requirement shall apply to measurement systems referenced in the control plan. The analytical methods and acceptance criteria used shall conform to those in customer reference manuals on measurement systems analysis. Other analytical methods and acceptance criteria may be used if approved by the customer. Objective evidence: On review it was found that MSA studies were not consistently done for all measurement systems called out in the control plans as per examples below. 1. Control Plan for U502/ P415 head rest uses optical comparator for armature checks-no GRR studies available for this measurement system 2. No MSA studies for the Form fixtures checks done on the Armature. 3. No MSA for the Contour template checks on the head rest parts.
Actions:	Containment actions: The objective evidence reviewed and actions taken to complete the MSA or get the records for MSA's already done. All MSA done was of acceptable and within 10%. Root cause: Previous Quality Manager (corporate) was not effective in completing and maintaining MSA studies, in addition the gauge control and MSA computer program was not being used due to I.T. system issues. Corrective action taken/ verification: I.T. department will repair technical issues related to the gauge software. Recently a new Quality Management staff for plant level has been implemented. All gauges will be reviewed and those without MSA studies will be completed as required. This was verified for the part # 415/ D 258 sampled and found the gage pro software has been implemented and all the measuring equipment identified ha MSA's completed as per the requirements.
Closed?:	Yes

Ref	Area/Process	Clause
A595872/4	Maintenance	7.5.1.4/ 7.5.1.5
Details:	The implementation of maintenance was not effective. ISO/TS requirements 7.5.1.4 Preventive and predictive maintenance The organization shall identify key process equipment and provide resources for machine/equipment maintenance and develop an effective planned total preventive maintenance system. 7.5.1.5 Management of production tooling The organization shall provide resources for tool and gauge design, fabrication and verification activities. The organization shall establish and implement a system for production tooling management including: ☐ maintenance and repair facilities and personnel; ☐ storage and recovery; ☐ set-up; ☐ tool-change programmes for perishable tools;	

	Objective evidence The following inconsistencies were found in the implementation of the maintenance system 1. The daily foam process control monitoring records is not consistently completed. 2. Although spares for robot cell and foam molds are available, there is no listing to manage their inventory. 3. The PM for broach specifies changing of the broach every 50K hits, but there is no tracking/ records of changing as per this frequency.
Actions:	Containment actions: The inconsistencies identified were reviewed and corrected. Root cause: An increase in maintenance personnel turnover created a lack of conformance to maintenance procedures and documentation. Corrective action taken/ verification: Review all maintenance procedures, controls, frequencies, modify if required Spare parts inventory control system documented and controlled All maintenance personnel will be trained by the Maintenance Manager on procedures and documentation required to maintain an effective system. The Plant Manager will verify that all maintenance records are effectively managed. These actions listed above was verified and found to effectively implemented. PM are being completed and spares list and their inventory is being maintained.
Closed?:	Yes

Ref	Area/Process	Clause
A595872/5	HR	6.2.2/ 6.2.2.2
Details:	The competence/ training requirements for was not defined/ implemented effectively. ISO/ TS requirements 6.2.2 Competence, training and awareness The organization shall a) determine the necessary competence for personnel performing work affecting conformity to product requirements, b) where applicable, provide training or take other actions to achieve the necessary competence, c) evaluate the effectiveness of the actions taken, d) ensure that its personnel are aware of the relevance and importance of their activities and how they contribute to the achievement of the quality objectives, and e) maintain appropriate records of education, training, skills and experience (see 4.2.4). 6.2.2.2 Training The organization shall establish and maintain documented procedures for identifying training needs and achieving competence of all personnel performing activities affecting conformity to product requirements. Personnel performing specific assigned tasks shall be qualified, as required, with particular attention to the satisfaction of customer requirements. NOTE 1 This applies to all employees having an effect on quality at all levels of the organization. Objective evidence The competency and training requirements for the management positions is not formally defined, i.e. QA Manager/ Maintenance Manager/ Plant Manager etc. The QA Manager was recently promoted internally, but there was no evidence of the competency/ training required	

	and records of meeting it for this new person.
Actions:	Containment actions: None required. Root cause: As a result of restructuring and the elimination of the Corporate Quality Manager, there was a lack of defined requirements for certain Management positions. Corrective actions taken/ verified: A Corporate Quality position has been reinstated to assist in the defining Quality Management position requirements in the plant and their training. The Plant Manager will define requirements related to the plant management staff and a training matrix implemented to effectively track the training progress of those employees. Competency and training requirements for management positions have been defined and documented. QA Manager's training requirements defined and training for all plant QA Managers have been scheduled with St. Clair college in Oct, 2011. Currently the plant QA Manager is under the direction of the Corporate QA Director.
Closed?:	Yes

Shift Details

3 shifts

Assessment Participants

On behalf of the organization:

Name	Position
Mr. Simon Cheng	QA Manager
Phil Fairley	Corporate Quality Manager
Marc Charron	Plant Manager
Dusan Gecelovsky	QA Coordinator
Dereck Ward	Maintenance Manager

The assessment was conducted on behalf of BSI by:

Name	Position
Ganesh Natarajan	Team leader

Continuing Assessment

The program of continuing assessment is detailed below.

Site Address	Certificate Reference/Visit Cycle	
Windsor Machine & Stamping (2009) Ltd. G & R Cold Forging Plant 3 7085 Smith Industrial Drive McGregor Ontario N0R 1J0 Canada	TS 543510	
	Visit interval:	12 months
	Visit duration:	16 hours and alternately 20 hours
	Next re-certification:	06/01/2011

Re-certification will be conducted on completion of the cycle, or sooner as required. An entire system re-assessment visit will be required.

Re-certification Plan

		Visit 1	Visit 2	Visit 3	Visit 4	Visit 5	Visit 6
Business area/Location	Date (mm/yy):	07/12	07/13	07/14			
	Duration (days):	2.5	2.5	3.5			
APQP/ PPAP-Planning - links to corporate		✓		✓			
Purchasing/Supplier Management-Links to corporate			✓	✓			
Production, Assembly, Inspections, Packaging		✓	✓	✓			
QA-Calibration		✓		✓			
Materials Management-Shipping/ Receiving			✓	✓			
Maintenance- Equipment/ Molds		✓		✓			
Training / HR			✓	✓			
Management Review, Cont. Improvement		✓	✓	✓			
Corrective and Preventive Actions, CC		✓	✓	✓			
Internal Audits		✓	✓	✓			
QMS Changes		✓	✓	✓			

Next Visit Plan

Visit objectives:

Surveillance assessment for ongoing conformance of the organization's QMS to the requirements of ISO/TS 16949 standard.

Visit scope:

As per the assessment plan below

Date	Assessor	Time	Area/Process	Clause
07/16/2012	Ganesh Natarajan	0900	Opening Meeting	
07/16/2012	Ganesh Natarajan	0930	QMS Changes, Customer Satisfaction, Management reviews, CI, IA, CA/PA	
07/16/2012	Ganesh Natarajan	1200	Lunch	
07/16/2012	Ganesh Natarajan	1230	QA-IA, CA- continued	
07/16/2012	Ganesh Natarajan	1400	APQP/ PPAP-Planning - links to corporate	
07/16/2012	Ganesh Natarajan	1700	Feedback on Day 1	
07/17/2012	Ganesh Natarajan	0830	Production, Assembly, Inspections, Packaging- Days	
07/17/2012	Ganesh Natarajan	1200	Lunch	
07/17/2012	Ganesh Natarajan	1230	Maintenance- Equipment/ Molds	
07/17/2012	Ganesh Natarajan	1430	QA-Calibration	
07/17/2012	Ganesh Natarajan	1530	Production-afternoons	
07/18/2012	Ganesh Natarajan	0600	Production- Night shift	
07/18/2012	Ganesh Natarajan	0800	Auditor review and reporting	
07/18/2012	Ganesh Natarajan	1000	Closing Meeting	

Please note that BSI reserves the right to apply a charge equivalent to the full daily rate for cancellation of the visit by the organization within 30 days of an agreed visit date. It is a condition of Registration that a deputy management representative be nominated. It is expected that the deputy would stand in should the management representative find themselves unavailable to attend an agreed visit within 30 days of its conduct.

Notes

The assessment was based on sampling and therefore nonconformities may exist which have not been identified.

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