



# CCAS Americas Ltd

## Chamber Certification Assessment Services

### ASSESSMENT AUDIT REPORT

<b>Job No/Cert No: 2014/0709</b>	<b>Cert. Expiry Date: 12/2015</b>
<b>Date(s) of Assessment: 7/9/2014</b>	

Company <b>Jemison Metals, Inc.</b>	Type of assessment <input type="checkbox"/> Pre-Assessment <input checked="" type="checkbox"/> Certification Assessment <input type="checkbox"/> Surveillance Assessment <input type="checkbox"/> Transfer Audit
Address <b>914 Maero St NW, Trinity AL 35673 (Decatur)</b>	Company Management Representative/Job Title <b>Rick Rowland, VP Quality and Technical Services</b>
CCAS Lead Auditor: <b>Tony Franceschini</b>	CCAS Lead Auditor: <b>Michael Franceschini</b>
Assessment Standard: <b>ISO9001: 2008</b>	

KEY MEMBERS OF COMPANY STAFF SEEN (AND JOB TITLES)
<b>See Sign in Sheets held on file.</b>

Scope of assessment: <b>Processing and distribution of sheet steel products, including plasma cutting, slitting, cut to length, blanking, and shearing operations</b> <b>IAF/NACE Codes: 17 &amp; 29, DJ</b>
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

No. of Major Non Conformance's	<u>0</u>
No. of Minor Non Conformance's	<u>0</u>
No. of Observation's	<b>Desk = 0</b> <u>3</u>

- **Major Non-conformance:** The absence or breakdown of a system to meet the requirements of a clause of ISO 9001, product/service failing to meet customer requirement or a number of minor non-conformities that the Auditor considers a Major breakdown
- **Minor Non-conformance:** A single lapse in the implementation of a system element to meet the requirements of a clause of ISO 9001 or product/service failing to meet customer requirement.
- **Observation:** A potential deviation from documented procedure or product/service failing to meet 100% customer satisfaction requirements. The word "*consider*" indicates a potential area for improvement for the company to consider but does not fall into the category that requires a corrective action.

Number of full time employees	<u>106</u>
Number of part time employees	<u></u>
Departments audited	<b>Management, Documentation, Quality, Office, Sales, Engineering, Manufacturing, and Purchasing</b>
Date of previous audits	<u>N/A</u>
Agreed date for next audit	<u>December 2015</u>
Use of Logo	<b>OK</b>

### **INITIAL ASSESSMENT**

#### **RECOMMENDATIONS**



Certification to ISO 9001:2008 is accepted.

This facility will be added to the existing Certificate and all facilities will be Re-Certified Dec 2015.



Due to the severity of the non-conformance's raised during the assessment, Certification cannot be recommended.

Corrective action is required within 6 working weeks of the Initial Assessment.

### **SURVEILLANCE** (Delete if not applicable)

#### **RECOMMENDATIONS**



The Organization is continuing to comply with the requirements of ISO 9001: 2008. Continued certification is recommended.



Due to the severity of the non-conformance's raised a follow up audit is required. Corrective action is required within 6 working weeks of the surveillance assessment.

## Summary:

### Certification:

- **Use of Logo:** Review of Logo and Website was acceptable.
- **Facility Review:** The facility was audited for initial certification relating to Documentation Requirements, Management Responsibility, Resource Management, Product Realization, and Measurement Analysis and Improvement.
- **Documentation:** A review of any changes to the Jemison Metals' QMS documentation was completed relating to the ISO9001: 2008 standard (see Desk Audit).
- **Nonconformances and Observations:** This was the initial certification audit of this facility.
- **Management Representative and QMS Progress:** Rick Rowland has been promoted to VP Quality and Technical Services, but remains Corporate QMR with responsibility for Continual Improvement. All plant Quality Managers/Coordinators report to Rick and are considered back-up QMRs. Rachel White is Quality Manager at the Decatur Plant.
- **Improvements:** The organization continues to make steady progress and improvements (see Checklist).
- **The certification audit schedule was completed in all aspects as planned.**
- **Section 4:** All aspects of Documentation and Records were reviewed which included: All levels of QMS documentation, with sequence of process interactions and scope (see Stage 1 Checklist).  
Compliance was established in all areas of Section 4 of ISO 9001:2008.
- **Section 5:** All aspects of Management Responsibility were reviewed which included: Management Commitment and Focus, Quality Policy, Planning, Responsibility, Authority and Communication, and Management Review (see Checklist).  
Compliance was established in all areas of Section 5 of ISO 9001:2008,
- **Section 6:** All aspects of Resource Management were reviewed which included: Competency, Training and Awareness, Infrastructure and Work Environment (see Checklist).  
Compliance was established in all areas of Section 6 of ISO 9001:2008.
- **Section 7:** All aspects of Product Realization were reviewed which included: Planning, Customer-related Processes, Purchasing, Production and Service, and Control of Monitoring and Measuring Equipment (see Checklist).  
Compliance was established in all sections of Section 7 of ISO 9001:2008.
- **Section 8:** All aspects of Measurement, Analysis and Improvement were reviewed which included: Monitoring and Measurement, Control of Nonconforming Product, Analysis of Data and Improvement (see Checklist).  
Compliance was established in all areas of Section 8 of ISO 9001:2008.
- **Personnel:** Cooperation and competence displayed by Rick Rowland, Johnny Helms, David Wydner, Jason Whitt, Greg Chandler, and John Chesser was greatly appreciated towards completing this audit.

### Strengths:

Electronic Quality Management System, Quality Policy, Model and FIT software, Management Review, Customer Focus, Analysis of Data and Infrastructure, Production, Purchasing and Work Environment.

<b>The following areas of Non Compliance require Corrective+Systemic+Preventive Action:</b>		
<p><b>None</b></p> <p><i><b>Note:</b> C+S+P Actions shall use the company's internal Form and be submitted to the Lead Auditor within 6 weeks of this report with a covering letter (Company Letterhead) and signed by the Management Representative. The Lead Auditor will indicate requirements for Verification/Validation based on the severity of the Non-Compliance.</i></p>		
<b>The following areas of Non Conformity and/or Observation from prior audits were reviewed to ensure sustainable actions are in place.</b>		
N/A		
<b>The following areas of Observation require internal Corrective+Systemic+Preventive Action:</b>		
<p>OBS-01: The organization should ensure all maintenance forms are consistently documented.</p> <p>OBS-02: The organization should review Calibration Log to ensure current conditions are reflected.</p> <p>OBS-03: The organization should better define Reject Hold Area.</p> <p style="text-align: center;"><i>Note: C+S+P Actions shall use the company's internal Form but do not need to be submitted to the Lead Auditor and will be reviewed at the next surveillance audit.</i></p>		
<p><b>AUDITOR</b></p> <p>I agree to treat as secret and confidential and not at any time for any reason to disclose or permit to be disclosed to any person the contents of this report including any notes completed during the audit except as required by the IRCA and/or RAB for their assessment of CCAS Americas Ltd auditor certification scheme.</p> <p>I confirm that I have not been involved providing any consultancy services to the client in question, or to any company related to the client, within the last two years. I have not provided consultancy as part of the assessment.</p> <p>The information contained within this report is the result of limited process sampling and therefore it cannot be assumed that other non-conformities and/or Observations do not exist. The organizations continuous improvement program will remain the most effective source of achieving quality related goals and objectives.</p>		
CCAS Lead Auditors:	Signature: <u style="display: inline-block; width: 200px; border-bottom: 1px solid black;">Tony Franceschini</u>	Date: <u style="display: inline-block; width: 100px; border-bottom: 1px solid black;">7/10/14</u>
Audit Manager	Signature: <u style="display: inline-block; width: 200px; border-bottom: 1px solid black;">Dennis J Jacobs</u>	Date: <u style="display: inline-block; width: 100px; border-bottom: 1px solid black;">7/14/2014</u>

# PROGRAMME FOR NEXT AUDIT

Audit Details: Jemison Metals			Re-Certification Schedule										Created: 7/10/14							
Instructions:			Processes Assessed																	
Shaded areas identify planned/scheduled processes to be assessed during each activity if applicable to the organisation.			Certified Stage 1 & 2 July 2014		Status			Status			Status			Status			Status			
			Scheduled Processes	Score																Scheduled Processes
Auditors shall identify those processes assessed and identify the status of the area assessed by placing an “S” for satisfactory results or by entering the applicable “NC Number” (i.e., 01, 02, etc.). Scoring: 0 = Major N.C.; 1 = Minor N.C.; 2 = Satisfactory; 3 = Planned Actions for Increasing Effectiveness of QMS; 4 = Improvement in Place, On-Target with Goals; 5 = Objectives Met, Best-In-Class																				
Quality Management System	4																			
• General Requirements	4.1		3	S																
• Documentation Requirements - Manual	4.2.2		3	S																
• Documentation Requirements – Doc. Control	4.2.3		3	S																
• Documentation Requirements - Records	4.2.4		3	S																
Management Responsibility	5			S																
• Management commitment	5.1		3	S																
• Customer focus	5.2		3	S																
• Quality policy	5.3		3	S																
• Planning	5.4		3	S																
• Responsibility, authority, and communication	5.5		3	S																
• Management review	5.6		4	S																
Resource Management	6			S																
• Provisions of resources	6.1		3	S																
• Human resources	6.2.2		3	S																
• Infrastructure	6.3		3	S																
• Work environment	6.4		3	S																
Product Realization	7																			
• Planning of product realization	7.1		3	S																
• Customer-related processes-Requirements	7.2.1		3	S																
• Customer-related processes-Review	7.2.2		3	S																
• Customer-related processes-Communication	7.2.3		3	S																
• Design and development (As Applicable)	7.3																			
• Purchasing-Process	7.4.1		3	S																
• Purchasing-Information	7.4.2		3	S																
• Purchasing-Verification of Product	7.4.3		3	S																
• Production and service provision-Control	7.5.1		3	S																
• Production and service provision-Validation	7.5.2		3	S																
• Production and service provision-Id. & Traceability	7.5.3		3	S																

Audit Details: Jemison Metals				Re-Certification Schedule				Created: 7/10/14											
Instructions:			Processes Assessed																
Shaded areas identify planned/scheduled processes to be assessed during each activity if applicable to the organisation.			Certified Stage 1 & 2 July 2014		Status			Status			Status			Status			Status		
Auditors shall identify those processes assessed and																			
• Production and service provision-Cust. Property	7.5.4		3	S															
• Production and service provision-Preservation	7.5.5		3	S															
• Control of monitoring and measuring devices	7.6		3	S															
Measurement, analysis and improvement	8			S															
• General	8.1		3	S															
• Monitoring and measurement-Cust. Satisfaction	8.2.1		3	S															
• Monitoring and measurement-Internal Audits	8.2.2		2	S															
• Monitoring and measurement-Process	8.2.3		3	S															
• Monitoring and measurement-Product	8.2.4		3	S															
• Control of nonconforming product	8.3		2	S															
• Analysis of data	8.4		3	S															
• Improvement-Cont. Improvement	8.5.1		3	S															
• Improvement-Corrective Action	8.5.2		2	S															
• Improvement-Preventive Action	8.5.3		2	S															
Use of registration, accreditation body marks, logos and symbols				S															
Rating Total ISO 9001			108																