



## MANAGEMENT SYSTEM AUDIT REPORT

Cert Ref Number:	9493	Audit Date(s):	Friday 25 <sup>th</sup> April 2014	Visit Num:	3
Standard(s) audited:	ISO 9001: 2008	Type of audit	RECERTIFICATION		

Organisation:	RPH Manufacturing Ltd				
Address:	83 Cobham Road Ferndown Industrial Estate Wimborne Dorset BH21 7QD				
Tel:	01202 870999	E Mail:	rphmanufacturing@btconnect.com	Web:	
Representative(s):	Mr Richard Haim	Staff:	FT	1	PT
Locations & Site(s) visited:	<b>SEE SECTIONS 9 &amp; 10</b>		EAC Code(s):	17m	
Lead Auditor:	Tracey Oram	Additional Team Member(s):			

Legal Status of Organisation i.e. Ltd company, Partnership etc NB if partnership - names of partners required	Limited Company
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Scope as it will appear on certificate:	Design, Manufacture and Kanban supply of precision components.
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**The objectives of the audit:**

- To confirm that the management system conforms with the requirements of the audit standard and also any statutory, regulatory and contractual requirements that are applicable;
- To confirm that the organisation has effectively implemented the planned management system;
- To confirm that the management system is meeting its specified objectives

**Audit scope:**

- The audit will evaluate the effectiveness of the processes identified within the visit plan and in line with the 3 year plan. The audit will be conducted at the location(s) specified within the visit plan.

Time the audit commenced:	09.00	Time the audit was completed:	14.30
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Report submitted to and accepted by:	<b>Richard Haim</b>	Position in Organisation:	<b>Managing Director</b>
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Report prepared by:	<b>Tracey Oram</b>	Lead Auditor
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Date(s) of Next Visit:	24.04.15	Start Time:	<b>08.00</b>
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Surveillance visits set at:	1	Per year of:	1	Days per visit
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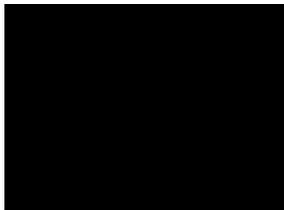
**NB If the next visit is a Recertification Visit additional days over and above the surveillance days may be required.**

**The Organisation agrees to comply with ISOQAR's Rules of Registration**

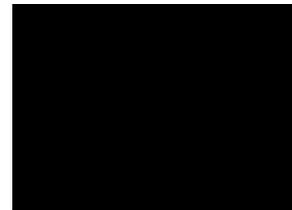
\* Please see Audit Plan for details of the next visit

\*\* Enter details in section 2 if days or pattern of days has changed

**This report is confidential and its distribution will be limited to the audit team, client representative and ISOQAR office**



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**Attendees**

**Opening Meeting**

Name	Position
Richard Haim	Managing Director

**Closing Meeting**

Name	Position
Richard Haim	Managing Director

**1 Audit Conclusion**

The audit team concludes that the organisation **HAS** established and maintained its management system in line with the requirements of the standard(s) and demonstrated to the audit team that it has the ability to systematically achieve the requirements for products and or services within the scope of its activities and in accordance with its policy and objectives.

The audit team recommends that based on the evidence obtained during this audit that Certification should be:

Recommended  Continued  Deferred (until satisfactory corrections/corrective action has been completed)

**Non-conformances**

Number of Non-conformances raised                      Major  Minor

**NB Where Non-conformances are Raised**

- For Initial Audits, Extensions to Scope and Recertification Audits; all Non-conformances must be closed out before a Certificate is authorised for issue and **can only be closed out** either by submission of evidence to ISOQAR or a re-visit to audit the corrections/corrective action (see Non-conformance section of this report).
- For Surveillance Audits any Non-conformance **classified as Major can also only be closed out** either by submission of evidence to ISOQAR or a re-visit to audit the corrections/corrective action (see Non-conformance section of this report).

NB All Non-conformances **must be actioned** within the agreed timescales.

**Please Note the audit conclusion is provisional and subject to review by ISOQAR's Certification Review Team.**

**2 Significant Organisational Changes (also include any changes to surveillance visit patterns e.g. if additional standards have been added) and any additional information. Significant changes to the plan for stage 2 or planned arrangements (produced at stage 1)**

No changes to the organisation since the previous audit.

Do the justified exclusions remain valid YES/NO/N/A (If no please give details)

**3 Audit Summary (Observations, Non-conformance, Opportunities for Improvement, Good Practice etc)**

The company operates from a small industrial workshop located on an industrial estate. The primary activity of this business is machining of components and the operation of a KANBAN system. The workshop was seen to be kept to an exceptionally high standard with regards to cleanliness, order and also the use of visual management techniques such as labelling of all shelves, WIP and stock in storage, right up to sections of the workshop that have been allocated to certain functions (such as Final Inspection). All items in storage are stored either in protective packaging or in a manner to avoid any damage or dust contamination. Lighting levels in the workshop are of a good standard and supplemented by fluorescent lighting, cables safely routed to avoid trip hazards and the use of rubber and fabric matting around the machinery to avoid any slip hazards. The business is operated by the Managing Director who is solely responsible for all aspects of the business and it is clearly apparent that a great deal of pride is taken in all aspects audited.

**OFI – although “information only” equipment is held in a cupboard labelled as such, it may be beneficial to add information only labels to individual items of equipment to avoid any confusion.**

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#### Auditor to complete

#### 4 Management System Controls (i.e. Management Review, Internal Audits, Objectives, Complaints etc)

Also include in this section any additional requirements of the standard, sector scheme, legislation etc.

Auditor(s)  Standard(s)

#### Evidence

**QMS and Document Control** – the company quality Manual is currently at Issue 1, dated 08.04.11. The amendment sheet shows that no changes to issue status have been made since the manual was issued. All procedures and forms within the manual were seen to be at the same issue level as the manual so there is a consistent issue level throughout meaning good visibility for any changes and issue revisions. The Quality Policy is aligned with the Quality Manual and is also set at Issue 1, dated April 2011. It is signed by the Managing Director (R.H) and covers all areas as required by the standard as well as a commitment to Endeavour to deliver a “right first time” approach to its customers.

**Management Review** - The last management review meeting was held on 23.07.13 and was attended by R.H and D.D – the agenda covers the points indicated in the management review procedure (SP 5.6 Issue 1, April 2011). Management Review is held every 12 months with the agenda including outstanding points raised during the last meeting (in this instance there were none)

**Internal Audits** – Internal Audits are scheduled over a 12 month period with 8 audits scheduled. Audits are carried out by D.D. The audits for 2011, 2012 and 2012 are retained on file and have identified no issued. The schedule for 2014 will be issued after today’s audit because the client wanted to incorporate any findings from today’s audit in the 2014 program. The audits are recorded on form 05 (issue 1, April 2011).

**Customer Satisfaction / feedback** – Customer feedback and satisfaction is reviewed as part of the management review. Customer satisfaction is perceived through repeat orders and reviewing of customer communications. This is a small company with one employee who deals with all customer communications himself. The company has recently secured a new contract with CR Instruments as a result of good service provision on previous orders.

**Objectives, Targets, Improvements** – Targets and objectives are reviewed during the management review meeting, minutes of the previous MR show that targets set have been achieved, - the objectives for the period of July 13 – July 14 are to maintain these at the same level (low NCR’s and increased Turnover).

**Non Conformances, Corrective Actions, Preventive Actions** – these are reviewed during management review and the minutes show that no non conformances have been raised. The Corrective Action Procedure SP 8.52 details the steps to be taken in the event of identification of a problem. This set at Issue 1 Dated April 2011 – in alignment with the Quality Manual. The non conformance issue log shows that one NCR was raised on 19.08.11, this was in relation to some gauges being used to carry out a job not being within the calibration system. Root cause – time and financial restraints – Short term CAR – send gauges for calibration, long term CAR – record card system to be implemented to record all information, preventive action to record gauges used on relevant job cards. The NCR was closed on 22.09.11. There have been no further NCR’s issued since.

The audit methods used were interviews, observation of activities, review of hard copy documentation, review of documentation retained electronically and a review of records. The conclusion is based upon the evidence obtained during the audit. The auditor(s) used standard sampling techniques to obtain this evidence and no guarantee can be given that a different conclusion may have been reached had different samples been taken.

## 5 Significant Process Audit Trails followed (i.e. Sales, Purchasing, Design, Production, Training etc).

Also include in this section any additional requirements of the standard, sector scheme, legislation etc.

Auditor(s)	Tracey Oram	Standard(s)	ISO9001
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### Evidence

**Enquiries, Quotes and Sales** – The company generally operates on fixed rolling contracts, where the customer will place a contract which details the part numbers and quantities required over the next 12 months, along with references to corresponding drawings and part descriptions. Viewed a new order for Wessex Lifts who are a long standing customer. Order number K44007, date 01.04.14. Items on this order include 3600 off VM30 110 – dwg Issue B, 1500 off VM110621- dwg issue A, and 1818 off VM10 0331, dwg issue A. The audit has shown a recent new enquiry has been started with CR Instruments Ltd and this is as a result of some business that was carried out 2 years previously. New bespoke boxes to transport and store the parts have been ordered and the MD is currently awaiting drawings from the customer so production can start. Currently order number K39020 is being processed for Wessex lifting

Due to the size of the business and the current work meaning it is working to maximum capacity, there are no “day to day” enquires or orders to view. The company does however hold various marketing items, such as brochures and product samples that can be taken out to potential clients. The display cases for sample components were designed and made in house to an extremely high standard.

**Process Control (including Purchasing)** – All items under manufacture are accompanied by the relevant job pack. This includes a copy of the drawing / specification and also the job card. Viewed the following jobs in progress:-

- Order no K39020, WM100644 Issue C, Delivery note ref 981. Op 1 turn complete, OP2 mill 3.5, OP3 Drill 2.5 dia hole, OP4 remove tooling spigot. All stages have been stamped RPH1 inspected. Dated 01.03.14
- Order number W39020, part number VM500204, dwg issue b. Batch off 100. PO number 1813B, Delivery note ref 97750. OP1 turn complete, Machine number 066, RPH1 inspected. Manufacture date 180414, delivery note 1019.
- Viewed job for HNJ Engineering Ltd, order number 0276, part number HNJ0-600300, dwg issue Eb, machine nut tool, qty 100, Turn OP1 machine 067, programme 00013. Turn OP2 machine 067, program 00022, Turn OP3 machine 068 program HNJ6000300 03, Turn OP4 machine 068, program 02.
- Final inspection is carried out on 100% of all finished items and this indicated by the inspection stamp on the job card. Stamp reference is RPH1.

All job sheets reference back to the purchase order number of the original raw materials used and the purchase orders were available to view in a dedicated file allowing full traceability. It was noted that the raw materials could also be traced back to individual Cast numbers if required. Viewed the following purchase order.

- PO number 0276, placed on 29.01.14, for 15 x 45.0mm EN24T from Wessex Materials Ltd. Received on delivery note reference 180208.

All machines are set up with individual programs which are stored on local memory and these are also backed up on to PC and this is further backed up on to a pen drive which can be taken from the premises if needed. Viewed the following programs

- LR101427 for HRCO BMC 2416 – file reference 01.HD3
- Also 2116 – Tip blank – dated 01.02.1999 stored on Windows G-Coder
- DM01-PF on the Fanuc Symbolic Cap T program.

Machine parameters are also stored on the PC in the event of battery fail they can be restored fairly quickly and easily with minimal disruption to production. Viewed

- Act-20-18TA 3042135 FS-400 with OT. The parameters for this machine are also held on hard copy just in case but the service engineers will also have copies.

**Design and Development** – The Managing director is currently working on a new product which will hold parallel plates in the correct position and at the correct pressure while machining. Each individual component has its own drawing which has been generated in house with part numbers and issue levels. Viewed;

- Dwg Ref RPH011 Issue 1 – front pad – material black acetal - finish none
- Dwg Ref RPH02 – Issue 1 – Rear pad – material white acetal (natural)
- Dwg Ref RPH04 Issue 1 – Support Pin – material Red PVC

All drawings and machined samples are retained in clearly labelled plastic bags and held in a special location. Once the product has been through the finalisation and validation process it is hoped that it will be offered to customers. A prototype storage case is currently being investigated which will include layered foam to safety hold the parts to avoid any damage.

**Calibration** – All equipment within the workshop has been issued and labelled with a unique reference number. This includes machinery, IT equipment and also measuring equipment that requires calibration.

All measuring equipment is held within the final inspection area and is clearly labelled with an individual ID number which is traceable back to the individual calibration certificate and also a record card which can be used to note any references specific to the piece of equipment.

Where possible, gauges are stored in cupboards to keep them clean and free of any contaminants, and also to avoid any damage occurring. The information only items are stored in a cupboard which has a sign on the front showing the status of its contents. OFI – the company may find it beneficial to label each item to show this to avoid any confusion.

Viewed the following items;

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- Equipment serial number 279 – M10 x 1.50 6H Screw Gauge. Calibration Date 24.08.11. Recal date 24.08.16, certificate number 112987. Viewed certificate – MP Calibration Services, UKAS registration number 0228.

Equipment serial number RPH5 – imperial gauge blocks. Calibration date 21.09.11, recal date 21.09.16. Viewed certificate – Colleague Gauge Calibration UKAS registration number 4691.

Recal date 21.09.16

Equipment / Machine Maintenance – Each machine has its own sets of files which include;

- User Manual
- Maintenance Records.

Extensive records were seen by the 2 following machines;

- Okuma Howa Turning Centre. Serial number 00049. Last service carried out 07.07.13, service reference 1851, fitted air assy to aid lubrication to spindle. Feb 2013 on service number 1828, spindle replaced. Coolant checks were carried out on 23.02.12 – outcome to raise concentration – satisfactory pH and no growth.
- Hurco BMC 2416 3 axis machine centre. Initial service upon installation in 1999 on service sheet no 95428. Viewed most recent service, reference 128035 on 04.11.13 which is an annual service carried out on service contract (contract reference 1071, dated 15.08.13)

**Training and Competence** – Due all business functions being carried out by the Managing Director, training records and competence records are not deemed necessary. There are documented procedures for induction training (WI 6.21) and in house training (WI 6.22) should the need arise to employ any additional persons.

## 6 Follow Up of Previous Audit Results

Previously raised Improvement Requests/Non-Conformances have been effectively closed out, root cause determined and effective actions taken. YES/NO/N/A

N/A
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If **Yes** summarise the evidence seen if **No** what actions have you taken as a result:

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## 7 Recertification Visits (complete only at a Recertification Visit)

Has the review of activities (in particular complaints against the client) and reports covering the certification cycle revealed any issues

YES			
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NO
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X
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If Yes please provide details

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## 8 Activities planned but not covered on this visit and require planning for the next visit.

Date	Process/Department/Activity/Site Visit etc.	Auditor
25.04.14	None	TO

## 9 Head Office/Locations/Branch Offices visited during this audit

Date	Location	Auditor
25.04.14	Head office	TO

## 10 Client/Contract Sites/Temporary Sites visited during this audit (if applicable).

Date	Location & Activity Audited	Auditor
25.04.14	N/A	TO

## 11 Locations/Branch Offices

All permanent Locations/Branch offices for which certificates are required (Check on Business Manager) are current and correctly identified YES/NO

YES
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If no correct details are

Location (Town/City)	Address	Standards

## 12 Registration Marks

Use of Registration Mark (if used) is in accordance with the Rules of Registration

YES/NO/N/A
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YES
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Brief details of where the UKAS registration Mark and ISOQAR Logo is used
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Company signage and stationery. All correct.
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**AUDIT PLAN NEXT VISIT**

**Please note that changes to Auditors may be unavoidable due to operational requirements**

Lead Auditor	Tracey Oram	Additional Auditors (Expert)		
Standard(s)	9001	Type of Audit (ie Surveillance)	Surveillance	
Audit Dates	24.04.15	Location(s)	HO	
Audit Start Time	08.00am	Does Client need to confirm site visit with ISOQAR Head Office prior to next visit <b>YES/NO</b>	No	
Audit Language (if not English)		Is Recertification Planning Required <b>YES/NO</b>	No	

**Management Processes**

Date	Time (or AM/PM) or N/A		Auditor
24.04.15	am	Opening meeting and follow up of previous report	TO
	am	QMS & Document Control	TO
	am	Management Review Meeting	TO
	am	Internal Audits	TO
	am	Customer Satisfaction / Feedback	TO
	am	Objectives, Targets & Improvements	TO
	am	Non-Conformances, Corrective & Preventative Actions	TO
	am	Enquiries, Quotes & Sales	TO
	am	Process Control (including Purchasing)	TO
	am	Design & Development	TO
	am	Calibration	TO
	pm	Equipment / Machine Maintenance	TO
	pm	Training & Competence	TO
		Report writing	TO
		Closing meeting	TO

**Locations/Branch Office Visits**

Date	Time(or AM/PM)	Process/Aspects/Activities etc to be Audited	Auditor
		NA	

**NOTE TO CLIENT: No further confirmation or reminders will be issued. Failure to honour the date arranged may result in extra charges being incurred by your company as stated in ISOQAR Rules of Registration. Cancellation of audit or surveillance dates within 20 working days of the agreed date will result in ISOQAR claiming an extra half day rate levy from the company for each staff day cancelled.**

Refer to 3 year Audit plan and last Audit plan when producing the audit plan for the next visit  
 Ensure client fully understands the cancellation policy stated above.  
 All Management System Elements must be audited once per year as a minimum

Ensure that all clients' locations/branches are visited in accordance with the 3 year audit plan  
 Ensure that site activities are witnessed as appropriate and in accordance with the 3 Year Audit plan  
 Review the 3 year audit plan and if appropriate and necessary amend the plan

### AUDIT PLAN COVERING THE 3 YEAR ASSESSMENT CYCLE

Organisation Name 9493 – RPH Manufacturing Ltd

This plan commences:

- On the date of the first surveillance visit following the initial audit (stage 2) or;
- On the date of the Surveillance Audit following the Re Certification Audit;
- At the next surveillance visit if the plan requires amending or to take into account extensions to scope.

	Visit 1	Visit 2	Visit 3
	04/15	04/16	04/17
	1	1	1
<b>Month and Year</b>			
<b>Number of Days</b>			
<b>Standards</b>	9001	9001	9001
Area/Function/Process/Activity/Site Visits (temporary sites) etc			
QMS & Document Control	✓	✓	✓
Management Review Meeting	✓	✓	✓
Internal Audits	✓	✓	✓
Customer Satisfaction / Feedback	✓	✓	✓
Objectives, Targets & Improvements	✓	✓	✓
Non-Conformances, Corrective & Preventative Actions	✓	✓	✓
Enquiries, Quotes & Sales	✓	✓	✓
Process Control (including Purchasing)	✓	✓	✓
Design & Development	✓	✓	✓
Calibration	✓	✓	✓
Equipment / Machine Maintenance	✓	✓	✓
Training & Competence	✓	✓	✓
Recertification Planning		✓	

#### Head Office/Locations/Branch Offices Visit Plan

	Visit 1	Visit 2	Visit 3
<b>Head Office</b>	✓	✓	✓

Indicate with a ✓ when audit of this function planned or when a visit is planned.

When producing this plan ensure that all clauses of the standard(s) can be attributed to Area/Function/Process/Activity/Site Visits (temporary sites) and are audited over the 3 year Recertification Cycle. The clients Locations/Branch Offices must also be appropriately sampled over the 3 Year Certification Cycle.

Plan Produced By Tracey Oram Date 25.04.14

Plan Amended By   Date