

Supplier Quality Assurance
Supplier Corrective or Preventive Action (SCAR/SPAR)
Response/Evaluation Checklist

Part # _____ Name _____ Date _____
 Supplier _____
 SCAR / SPAR Number _____

NOTE: All Sections shown in *italics* must be responded to within the initial response (i.e. within 24 hours).

YES	NA	NO	DOCUMENTATION RESPONSE EVALUATION
			SECTION 1 – HEADER
<input type="checkbox"/>		<input type="checkbox"/>	1.1 <i>The response is provided on Stackpole form, concern number is present. All attachments submitted with the response must have the Stackpole concern number referenced on them.</i>
<input type="checkbox"/>		<input type="checkbox"/>	1.2 <i>If the response is on the suppliers standard form, the Stackpole “Concern Number” must be referenced / shown in the header information and all attachments, and at a minimum the supplier form must include all sections as shown on the Stackpole form</i>
<input type="checkbox"/>		<input type="checkbox"/>	<i>NOTE: Supplier must respond with a “YES” to either Item 1.1 or Item 1.2 or the response will be rejected.</i>
<input type="checkbox"/>		<input type="checkbox"/>	1.3 <i>The response identifies a champion leading the investigation, including the person’s name, job title and phone number.</i>
<input type="checkbox"/>		<input type="checkbox"/>	1.4 <i>All team members name(s) and job title(s) listed. NOTE: Based on the defect description, verify that the Supplier is utilizing a cross-functional team approach.</i>
			SECTION 2 – CUSTOMER INITIAL DEFECT DETAILS
<input type="checkbox"/>		<input type="checkbox"/>	2.1 <i>Stackpole documented “CUSTOMER INITIAL DEFECT DETAILS” statement is shown on the form. This statement represents the Stackpole initiators educated interpretation of the problem.</i>
<input type="checkbox"/>		<input type="checkbox"/>	2.2 <i>Supplier documented “PROBLEM DESCRIPTION” is shown on the form – supplier modified defect description to support their internal investigation.</i>
			SECTION 3 – SHORT TERM CONTAINMENT
<input type="checkbox"/>		<input type="checkbox"/>	3.1 <i>Containment response issued by supplier and received by Stackpole issuing division within 24 hours.</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3.2 <i>Containment activities / response to include, at a minimum:</i>
<input type="checkbox"/>	<input type="checkbox"/>	REJ	a) <i>Product in transit from the supplier or at Stackpole Distribution Center, including “Hold / Reject” areas – may include product Stackpole has already shipped or at the customer(s). Identify the date and whom the activity was assigned to. List quantity contained / suspect quantity found.</i>
<input type="checkbox"/>	<input type="checkbox"/>	REJ	b) <i>Product in process, being produced or in finished goods at the supplier, or stored at an off-site warehouse. Also, verify any product in a “Hold / Engineering” area that may contain the same defect. This investigation would also include any “family” parts that could contain the same problem (produced on the same process, but a different color, grade, configuration, etc.) Identify the date and whom the activity was assigned to. List quantity contained / suspect quantity found.</i>
<input type="checkbox"/>	<input type="checkbox"/>	REJ	c) <i>Product at, going to or returning from a sub-supplier. Identify the date and whom the activity was assigned to. List quantity of product contained / suspect quantity found.</i>
			<i>NOTE: Additional minimum containment actions:</i>
			1) <i>Certify all shipments until corrective action(s) have been implemented and verified to prevent the recurrence.</i>
			2) <i>Green “X” (or obvious identifier that is clearly recognizable) identify all shipping labels indicating that the product has been certified.</i>

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YES	NA	NO	DOCUMENTATION RESPONSE EVALUATION
			THE SUPPLIER MUST ADDRESS THE FOLLOWING CONCERNS IN THEIR RESPONSE
<input type="checkbox"/>		<input type="checkbox"/> REJ	3.3 For the appropriate containment activity (below), the supplier is to identify the verification method(s) to be used. a) If 100% of all product reflects the concern, can an interim standard be implemented that does not compromise the fit, form, function or appearance of the end assembly? Comment:
			b) Can product be sorted / reworked? Comment: 1) If the product is to be reworked, the default verification will be to the Control Plan 2) If the product is to be sorted, the default verification will be to the Stackpole.specific failure
			c) Can problem be immediately corrected to eliminate the issue for subsequent production? Comment::
			d) Can a poke-yoke be implemented at the supplier / Stackpole to prevent exposure to Stackpole customer(s)? Comment:
			e) Other? (Provide detail on specific containment activity.)
<input type="checkbox"/>		<input type="checkbox"/> REJ	3.4 Using the "quantity contained / suspect quantity found" data from Section 3.2 – "a" through "c", provide the actual Parts Per Million (PPM) calculation for each of the containment activities NOTE: In Sections 3.2.a, b and c, and 3.4, for data that is not finalized for submission to meet the Initial Response deadline (24 hours), the supplier will respond with actual dates when the information will be forwarded to Stackpole.
			SECTION 4 – ROOT CAUSE(S)
<input type="checkbox"/>		<input type="checkbox"/>	NOTE: Root cause must address the "Customer Initial Defect Details" and the "Problem Description" identified on the SCAR (see Section #2). 4.1 Potential Root Cause(s) – Initial evaluation of the source point or system root cause that contributed to the failure must be included with the initial response. The initial analysis will identify numerous potential root causes through the application of the basic problem solving tools (5 whys/Cause & Effect/Is – Is Not/ Etc.) NOTE: With the initial 24-hour submission, the supplier is to list all potential root causes in the "Primary Root Cause" section. This field will also be used for the final response root cause.
<input type="checkbox"/>		<input type="checkbox"/> REJ	4.2 Root Cause(s) – The result will be the identification of the true root cause(s). This could result in several core documented responses. a) Supplier details a fact based response to the "CUSTOMER INITIAL DEFECT DETAILS" and/or "PROBLEM DESCRIPTION"
<input type="checkbox"/>		<input type="checkbox"/> REJ	1) Primary Root Cause: Point of failure process or design root cause. Enter the "date" this root cause(s) was determined, and "who" is responsible to ensure all root cause analysis activities are completed.
<input type="checkbox"/>		<input type="checkbox"/> REJ	2) Secondary Root Cause: Identify what allowed the defect to be shipped. Enter the "date" this root cause(s) was determined, and "who" is responsible to ensure all root cause analysis activities are completed.
<input type="checkbox"/>		<input type="checkbox"/>	3) Document the details of the specific quality system element (identified in the Header information). Input this response in the "Secondary Root Cause" field. Enter the "date" this activity occurred and "who" ensured this activity was completed
<input type="checkbox"/>		<input type="checkbox"/>	4) The documented ability to turn the problem off and on again. Input this response in the "Secondary Root Cause" field. Enter the "date" this activity occurred and "who" ensured this activity was completed
<input type="checkbox"/>		<input type="checkbox"/>	4.3 For "Warranty Concerns", supplier is to enter "NO" unless directed by the issuing Stackpole representative.

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			SECTION 5 – MISTAKE PROOFING
<input type="checkbox"/>		<input type="checkbox"/> REJ	5.1 Provide a list of “mistake proofing” options that were considered based on the identified product non-conformance. For those not implemented, provide the rationale on why they were not pursued.
			SECTION 6 – CORRECTIVE ACTION
<input type="checkbox"/>		<input type="checkbox"/> REJ	6.1 The correct response must have a documented corrective action plan for all identified actual root causes shown in the previous steps. NOTE: The corrective action(s) must eliminate the root cause(s).
<input type="checkbox"/>		<input type="checkbox"/> REJ	6.2 The corrective action must address the condition(s) that resulted in the failure, including: a) Primary root cause point of failure - process or design
<input type="checkbox"/>		<input type="checkbox"/> REJ	b) Secondary root cause failure to contain the defect
<input type="checkbox"/>		<input type="checkbox"/> REJ	6.3 The corrective action(s) must identify date(s) when permanent actions are 100% implemented.
			SECTION 7 – VERIFY EFFECTIVENESS
<input type="checkbox"/>		<input type="checkbox"/> REJ	7.1 The correct response must identify the documented form or method of verification, who is responsible, the due date and actual dates completed.
<input type="checkbox"/>		<input type="checkbox"/>	7.2 The verification of effectiveness shall include data gathered to validate the problem resolution and corrective action(s). The data to be submitted should include proofs such as X-Bar and R Charts, Cpk analysis, P-Charts, Inspection Reports, etc.
<input type="checkbox"/>		<input type="checkbox"/>	7.3 The data to be submitted shall include a significant time period to be agreed to by Stackpole Quality Department (dependent of frequency / duration of production runs), with evidence that the issue has not occurred again.
			NOTE: Based on the successful verification, Stackpole Quality Department will advise supplier on discontinuation of containment and certification.
			SECTION 8 – PREVENT RECURRENCE
<input type="checkbox"/>		<input type="checkbox"/> REJ	8.1 The correct response will identify the documents that are (will be) updated, the person(s) responsible, the due date(s) and the actual completion date(s).
<input type="checkbox"/>		<input type="checkbox"/>	8.2 Response may include updates of the system documents to support the institutionalization of the corrective actions. Documents to be updated include, but not limited to:
<input type="checkbox"/>		<input type="checkbox"/>	a) Potential Failure Mode and Effects Analysis (PFMEA)
<input type="checkbox"/>		<input type="checkbox"/>	b) Control Plan
<input type="checkbox"/>		<input type="checkbox"/>	c) Process Flow Diagram
<input type="checkbox"/>		<input type="checkbox"/>	d) Work / Operator Instructions
<input type="checkbox"/>		<input type="checkbox"/>	e) Quality System Procedures
<input type="checkbox"/>		<input type="checkbox"/> REJ	8.3 Global Effectiveness: Supplier repeats this activity on common parts / processes and sister plants to prevent similar failures from occurring. Submit detailed information on common Stackpole parts and actions to be taken. If it is identified that common parts / processes are to be excluded from this activity, please provide the rationale for exclusion.

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SECTION 9 – INITIAL / LONG TERM VERIFICATION			
<input type="checkbox"/>		<input type="checkbox"/> REJ	9.1 Initial verification – Provide documented evidence (from a person independent of the team that investigated the problem) that there was an audit of the SCAR/SPAR and the actual system are consistent with the documented response.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9.2 30 / 60 / 90 DAY VERIFICATION – Based on Stackpole direction, the supplier will be notified if additional verification is required, and the means on how that verification is accomplished and communicated. This activity may be requested on “CC” SCARs but is recommended for all SCARs.

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