

Spectrum Control Inc.

Form: 34-0918-00

Failure Analysis/8D Corrective Action Plan

Verbiage in italic font is intended to be only for informational purposes.	Corrective Action #:					
Assigned to:	8D Team Members:					
Type of Corrective Action	Customer Complaint	□Customer Return	☐SCI Supplier (SCAR)			
Response:	☐ Internal Process	☐ Internal Systems	External Systems Audit			
Spectrum Control Part Number:	RMA/CC#:	DR#:	Other pertinent info:			
	Return Qty:	Vendor #:				
Date Corrective Action Issued:	Customer Name:	Vendor Name:				
Additional Material Supplied with Customer RMA: ☐ Yes (provide details): ☐ No additional material included.						
Discipline 1: Description of Problem (include customer reference # where applicable)						
Discipline 2: Verification of stated non-conformance						
☐The discrepancy has been verified. ☐The discrepancy has not been verified.						
Verification comments:						
Discipline 3: Containment Plan (Define and implement containment actions to isolate the problem until permanent actions are in place; What, Who, When) Target for implementing and documenting containment is 10 working days from corrective action issuance. Due date:						
Discipline 4: Failure Analysis (What failure analysis method was used to determine root cause? Examples: 5 Why, Fishbone Diagram, Testing, Manufacturing Record review, etc. Attach or include as appropriate)						
Discipline 5: Root Cause Identification (Identify all applicable causes that could explain why the problem occurred)						
When applicable, consider and document human factors related to this nonconformance/problem.						

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Document has been rewritten.



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(Human factors involve gathering information about human abilities, limitations, and other characteristics and applying it to tools, machines, systems, tasks, jobs, and environments to produce safe, comfortable, and effective human use. Recognize that people performing tasks can be affected by fatigue, lack of concentration, distraction, pressure, stress, lack of awareness, etc.) Problem Statement (Summarized for D1): 1. Why did this non-conformance/problem occur? 2. Why did (1) happen? 3. Why did (2) described above happen? 4. Why did (3) described above happen? 5. Why did (4) described above happen? Based on 1-5; what is the root cause(s) of the non-conformance/problem?								
Discipline 6: Disposition of Material Customer SCI Supplier SCI internal Not applicable Comments:								
Returned N	/laterial			Stock		WIP		
Total qty returned:		Date	Total qty in Stoc	ck:	Date	Total qty in WIP: Date		Date
Sort Re-Build Return "as is" Re-Stock Rework	Qty Qty Qty Qty Qty Qty Qty		Scrap Sort Re-Build Acceptable Rework Rework at Customer cost	Qty Qty Qty Qty Qty		Scrap Sort Re-Build Acceptable Rework Rework at Customer cost	Qty Qty Qty Qty Qty	
Discipline 7: Pre actions need to take						prevent re-od	ccurrenc	e (What

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Discipline 7a: Implementation, training and follow up					
Target for documenting the corrective action and implementation plan is 30 calendarissuance. Due date:	ar days from corrective action				
1. Corrective action implementation owner assigned to (name a specific pe	rson):				
2. Corrective action implementation date:					
3. Is training required? (Yes or No):					
If Yes, perform training on affected process or procedures a. Training Completion Date: b. List Training Content: c. List Disciplines (Job Function) Trained:					
4. For Effectiveness follow up, reference Discipline 8.					
Is the discrepant product controlled by a Safety Agency, such as TUV, UL, or CSA? Yes No Does this discrepancy affect consumer safety? Yes No If both questions are answered yes, then the Divisional manager of Quality must notify the safety agency. Contact date:					
Corrective Action Impact : Where applicable, apply corrective actions taken as a products and processes.	result of this response to similar				
☐ Applies ☐ Does not apply					
List Part Numbers and Values Streams:					
For Spectrum Control Use Only:					
Is this CAR related to an internal and external system audit finding: \square Yes \square No)				
If yes, then share this RCCA with other SCI sites by placing it in the SCI Quality Sha	arePoint site.				
Comments:					
Change Notice # (where applicable):	CAR effectivity date:				
Analysis performed by:	Date complete:				
Approval/Signature:	Approval date:				
Mgr. of Quality approval/Signature:	Approval date:				

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Discipline 8: Verification of Corrective Action Implementation and Effectiveness (document what type of actions need to be taken to verify effectiveness of the corrective action)						
Target for completing and documenting the effectivity audit is 60 calendar days from the 7A completion date. Due date:						
Verification of effectiveness may be accomplished by: (check one or more)						
1. Utilizing the QA Alert system per AT 35-7036, Quality Alert Procedure (KBM)						
Performing follow up activities to ensure that the corrective action has been effective. Consider the following:						
a. Methods to be used.						
i. Who will verify? If needed, who will monitor in the long term.						
 ii. What verification indicators will be used? Examples: reduced scrap rates, reduced non- conformance's, etc. 						
iii. How frequently and for how long will the monitoring activities occur?						
iv. Audits, Spot-checks, KPI's, monitoring.						
b. Verify Actions as specified in the verification plan						
c. Close actions and the Corrective Action if they are working as planned.						
 d. If effective corrective actions are not achieved, the CAR is returned to the owner for additional root cause and action plans. 						
Verification of CAR Effectiveness Performed by: Verification Date:						
Provide details concerning the method (s) used to determine effectiveness here:						

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