

Layered Process Audit Production Activity – Stamping

Note: An “L.P.A.” is a quality tool developed to verify conformity of production processes, and to identify opportunities for improvement. They are conducted by multiple layers of authority, and when utilized properly, LPA’s will drive cultural change throughout an organization to improve quality, reduce scrap, rework, and improve customer satisfaction.

Please conduct the following audit and return this report with your findings to the Production and Quality managers.

	↓ ↓ Audit Sample Selection ↓ ↓
<i>Audit performed by:</i>	<i>Customer Name:</i>
<i>Job Title:</i>	<i>Part Number:</i>
<i>Date:</i>	<i>Press Operator:</i>

Work Instructions

	Y	N	n/a
Are work instructions available and readily accessible at the work-site?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the Press running at the prescribed speed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the proper lubricant being applied?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do the production labels have the correct information (operator initials, correct date, heat numbers)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are labels applied to the containers correctly (used in sequential order, applied to boxes in a neat fashion i.e. straight, centered, no wrinkles.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is packaging in accordance with the work instructions (correct size cardboard boxes, returnables, skids, or bins)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are boxes or returnables neatly stacked on the skid?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments: _____

Press operations

Is the part ejection system appropriate and in accordance with work instructions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do parts eject cleanly (not piling up under the Die or on the conveyor or bolster)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the scrap being remove effectively (not piling up under the Die or on the conveyor or bolster)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the Die Clamping system adequate (as pictured in the work instructions)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are oil and air line connections correct and operable (no leaks or clogs)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments: _____

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<u>Quality Control</u>	Y	N	n/a
Are the proper gages available in the work area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are the gage calibrations current?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the operator & inspector documenting their checks on the “In-Process Inspection Sheet” – form FQ6?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the operator documenting the material checks (checks within spec)?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments: _____

<u>5S & Safety</u>			
Is the work-site clean and organized?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the work-site tooling and/or accessories stored in the correct manner (wrenches, lube buckets, coils & cradles, bolts & clamps, brooms, shovels)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any oil spills or other slip hazards present?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any apparent trip hazards (stray oil lines, air lines, electrical cords, boxes or skids in the way or out of place)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any stray parts or scrap accumulating on the floor?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is eye protection being worn (safety glasses w/side shields)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is hearing protection being used?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are gloves being used as appropriate?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments: _____

Non Conformances cited or opportunities for improvement

Comments: _____

Final Comments: Are there any additional observations or suggestions toward improving future Layered Process Audits?

Production Supervisor / Date

Production Manager / Date

Quality Manager / Date