Transition to the 2009 Version of the AQMS Standards

Frequently Asked Questions

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Why We Are Doing This?

- We want to make sure that your organization is prepared for the transition to the 2009 version of the aerospace standards.

- We have prepared a series of Frequently Asked Questions to highlight some of the areas of confusion/concern and the industry's and PJR's expectations regarding these areas.

What document governs the transition to the 2009 version of the aerospace standards?

- International Aerospace Quality Group (IAQG) Other Party Management Team (OPMT) Supplemental Rule 001 – Rules for 9100/9110/9120:2009 Transition (last revised 04 November 2011)

- There is also a Frequently Asked Questions document for SR 001.

- Both are available on the main page of the OASIS database http://www.sae.org/?PORTAL_CODE=IAQG

Why are the audit days for my transition audit higher than my normal surveillance or recertification days?

Answer

- ## SR 001 governs the transition time.
  - Clause 7d: "The days for all transition audits shall be as follows:
    - i: transition during surveillance audit using 50% of the initial audit day requirements of IAF MD 5 and 100% of the initial audit day requirements of table 2 of 9104.
    - ii: transition during recertification audit using 80% of the initial audit day requirements of IAF MD 5 and 100% of the initial audit day requirements of table 2 of 9104.
    - iii: In addition, it is the responsibility of the CB to identify additional days that may be required to audit the new requirements of the 9100/9110/9120:2009 standards and complete the 9101:2009 (Rev D) audit report.
  - IAF MD 5 is a free document available at www.iaf.nu. AS9104 must be purchased through SAE.

Frequently Asked Question 3

What is audited during a transition audit?

- From SR 001, clause 7:

  - e: Transition audits conducted during surveillance shall include an audit of all processes (and process interfaces) affected by the changed requirements within the AS9100/9110/9120:2009 AQMS standard.

  - f: Transition audits conducted during recertification shall include an audit of all clauses of the 9100/9110/9120:2009 AQMS Standard.

Frequently Asked Question 4

Will I get a new certificate after successful completion of my transition audit?

- From SR 001, clause 7n:

  - An organization shall not receive a new three year recertification period if they were not subject to a recertification.

- Clients transitioning at surveillance will have their existing certificate revised to reflect conformity with the 2009 version of the applicable standard. The expiration date of their existing certificate will remain the same.

What is the deadline for completing the transition?

Answer

- Per SR 001, clause 8b:
  - Organizations that have not been certified to the 9100/9110/9120:2009 standard by 1 July 2012 (including their revised certificate uploaded into OASIS) shall have their certificate withdrawn in OASIS.

- In order to meet this deadline, PJR's Scheduling Department will work with you to schedule your transition audit on or before 1 April 2012.
  - Some exceptions have been made.

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Where can I access documents to help me prepare for the transition?

- Deployment support materials are available at the IAQG main website: http://www.sae.org/iaqg/organization/requirements.htm

What are the biggest changes/additions to the 2009 version of AS9100?

- ## New requirement (7.1.1) on project management

  - Need to plan and manage product realization in a structured and controlled way to meet requirements at acceptable risk, within resource and schedule constraints.

- ## New requirement (7.1.2) on risk management

  - Need to implement a risk management process applicable to the product and organization covering responsibility, criteria, mitigation and acceptance.

- ## Increased emphasis on customer focus/satisfaction (5.2/8.2.1)

  - On-time, on-quality performance

What is PJR's F-108as form?

Answer

- The F-108as form is given to all clients prior to their AQMS transition or initial audits. It requires the client to answer certain questions to confirm their readiness for their initial or transition audit. The completed form and required attachments must be e-mailed to your Lead Auditor, with a copy to your scheduler, three weeks prior to the start of your audit.

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Is it necessary to complete a full system internal audit to the AS9100/9110/9120:2009 requirements prior to my transition audit?

- No, it is not necessary to do this prior to your transition audit. However, per clause 8a of SR 001, "Organizations must formally declare to their CB conformance to 9100/9110/9120 prior to the CB conducting 9100/9110/9120:2009 audits."

- If you do not conduct an internal audit, then you must verify that your organization meets the requirements in another way, in order to make this declaration.

Is it necessary to complete a full system internal audit to the AS9100/9110/9120:2009 requirements prior to my initial audit?

Answer

- Yes. Per ISO/IEC 17021:2006, a full system internal audit must be completed prior to certification to a new standard.

What is meant by 9101D, section 4.3.2, which says that during the Stage 1 audit the CB is to review performance measures and trends for the previous 12 months? What happens if we don't have 12 months of this data?

Answer

- If there are no performance measures available for the previous 12 months, there should be not Stage 2 audit. However, there is not a requirement that this has to be "new" data after implementation of the AQMS to the new 9100. There needs to be 12 months of performance trends supporting on-time, on-quality performance.

Why do I need to provide my top aviation, space and defense customers and the percentage of business from each?

Answer

- From AS9101 D, clause 4.2.1m: "The audit team leader shall ensure that the amount of audit time planned on auditing any one customer's specific quality management system requirements is consistent (approximately) with the proportion of aviation, space, and defense business each customer represents (e.g., customer X may only have 20% of the business so do not spend 80% of the time verifying customer X's specific quality management system requirements)."

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What is a PEAR?

Answer

- A PEAR is the Process Effectiveness Assessment Report. A third-party auditor must complete this form for every product realization process. This form is scored/classified:
  - Level 1: process is not implemented/planned results are not achieved;
  - Level 2: process is implemented/planned results are not achieved and appropriate actions not taken;
  - Level 3: process is implemented/planned results are not achieved, but appropriate actions being taken;
  - Level 4: process is implemented/planned results are achieved.

- This is where your performance measures come into play!

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What happens if I am not ready for my transition audit?

Answer

- Per SR 001 clause 8ai, "… the CB shall take actions that result in the suspension of the existing certification at the due date. The CB is to initiate the process to withdraw certification if the suspension cannot be resolved."

- What is critical here is "at the due date."

Our semi-annual surveillance is due this month, but our organization is not ready to transition. Can we just convert to an annual surveillance frequency and have our transition audit in April?

- In most cases, this would not be permissible. This may leave you short on the required annual audit days.

- It may be acceptable after an even numbered semi-annual surveillance in the PJR scheme.

What are the most common pitfalls for clients during the transition audit?

Answer

- Ironically, this issue isn't specific to the transition.
  - We are still getting poor root cause submissions!
  - We are still getting corrective actions that do not address the root cause!

- Also, remember that on initial and transition audits a new or revised certificate is being issued. Clients are required to submit objective evidence of corrective action implementation, prior to PJR being able to issue a certificate.
  - This is true even for clients transitioning on surveillance.

Answer

- The new 9101 D has been a struggle for some auditors as well.
  - Boxes 11 and 12 on the PEAR form are the most common reason for PJR rejecting the audit package due to auditor reasons.
    - Box 11 requires the auditor to describe the method used by the organization to determine process effectiveness, e.g. key performance indicators (KPIs) and associated targets.
    - Box 12 requires the auditor to record objective evidence to support the process effectiveness determination.
  - In Box 13, the auditor classifies/scores the process effectiveness on a scale of 1-4.
    - A major NCR shall be issued when the effectiveness level of the process is rated a 1.
    - A major or a minor NCR shall be issued when the effectiveness level of the process is rated a 2.

How are transition audits handled for organizations with more than one location?

- Per SR 001, clause 7i iii:
  - … for multiple site organizations that transition during their existing audit cycle, the CB shall complete the central function audit and the planned sites audits (at least 50% of the sites) for the surveillance cycle to the 9100/9110/9120:2009 AQMS standard prior to certification.

Answer

- Per SR 001, clause 7j i:

  - For multiple site organizations that transition during their recertification year, the CB shall complete the central function audit and all sites audits for that recertification cycle to the 9100/9110/9120 :2009 AQMS Standard prior to re-certification.

What can our organization expect to receive at the end of our transition audit?

- Nonconformity reports must be issued before or at the closing meeting.

- The rest of the audit report must be issued within two weeks of the closing meeting, if not sooner.

Are nonconformities handled differently in 9100/9110/9120:2009 audits?

Answer

- Per 9101 D clause 4.2.4, "After issuance of a nonconformity the CB shall:

  - a: when the nature of the nonconformity needs immediate containment action, require the organization to determine and report the specific containment actions, including correction within 7 calendar days after the audit and reach agreement with the audit team leader within the next 14 calendar days;

  - c: agree with the organization on corrective action(s) and corrective action plans within a maximum of 30 days from the end of the on-site audit."

Questions or Comments?

Thank you for your time!