9104-1:2022 - Frequently Asked Questions (FAQ) Log
Revision: October 21, 2022

Applicable to 9104-1:2022 – This revision was published in order to update FAQ #3

FAQ Number	9104-1 Clause	Question	Answer
1	**5.3.3.**	Are certified organizations required to keep all records in accordance with the standard for 10 years?	Participants who generate records within the ICOP scheme are required to keep those records (e.g. OCAP output, accreditation, certification records) for a minimum of 10 years. Certified organizations are not required to maintain organization performance data as a record. It is the responsibility of the CB to obtain this data, complete the risk analysis and the output of such (i.e., OCAP) will be the record.
2	**7.2.2**	Where an AB AQMS accreditation decision is made by more than one person, is it required that at least 50%of the persons making the accreditation decision have work experience and/or ASD industry and the regulatory environment knowledge?	Where more than one AB person or a committee makes a CB AQMS accreditation decision, at least 50% of the persons making the accreditation decision shall have ASD work experience and/or demonstrated knowledge of the ASD industry and the regulatory environment.
3	**7.3.9** **8.5.11.1.a**	What does “re-establish conformance” mean in the standard?	When a nonconformity is identified, the entity that is addressing the nonconformance should: 1. Provide immediate correction for the conforming condition: 2. Identify Root Cause(s) of the non-conformity: 3. Identify and implement actions required to address the root cause(s) and return the process to conformance: and 4. Implement any other actions to assure the condition does not repeat Sometimes the fourth step happens over extended time, so the re-establishment of conformance is completed at step 3 and effectiveness verified and the conformity will be closed after step 4.

FAQ Number	9104-1 Clause	Question	Answer
4	**8.2.1.b,** **8.2.2.** **8.5.1.3.4,** **9.1.10** **9101 clause 6.1.4**	What happens when the organization declines or does not provide OCAP data within the required 90 day timeframe? What happens if the client states that some or all the requested OCAP data / information is not available?	The CB must establish with the Client, legally enforceable arrangements (9104-001 Clause 8.2.1.b) that include data collection and a communication process that clarifies when data should be submitted (17021-1 Clause 8.5.1.d). The CB shall inform the client on the consequences of not conforming to the arrangements. Failure to provide the required OCAP data may be a sign that the organization does not have an effective process for data collection and reporting. The CB should evaluate the data collection process. The data must be available to support the stage 2 initial, surveillance and recertification audit planning. Should the data not be received for planning purposes then the audit cannot be performed, and the CB should follow existing processes (9104-001, Clause 8.2.2) for cancellation, missed surveillance, or expired certification.
5	**8.2.4.1.b.**	How should 9104-1 appear on Certificates and in associated documentation?	Certificates will include a statement that the certification is in accordance with the applicable 9104-001 standard and the year published. For example: AS9104/1:2022 prEN 9104-001:2022 SJAC 9104-1:2022
6	**8.2.4.4**	Can a CB utilize the IAQG logo in their certification documents?	Yes, with a formal licensing agreement from the IAQG. The IAQG requires CBs to enter a “marketing logo and trademark license agreement” to obtain the proper logo for use in certification documents. When the IAQG logo is incorporated into the certificate by the CB, the logo shall be in the form(s) and colors provided by the IAQG. The IAQG logo may not be amended but may be re-sized to fit the certificate. The IAQG logo shall not receive greater prominence than any other symbol or logo on the certificate. The IAQG logo shall not be used by the CB in any other documents or marketing materials.

FAQ Number	9104-1 Clause	Question	Answer
7	**8.5.1.3.3**	When a certified organization's customer contractually requires a specific AQMS standard (i.e., 9100) and the applicability of that standard does not align to the processes and activities of the organization (e.g. MRO or Distribution), can the CB certify the organization to the requested standard? What is the audit duration calculation for adopting a new AQMS standard?	Client discussion with the customer is needed to ensure correct understanding of the applicability of the standard (91XX "Intended Application" & Clause 8.2). Should the customer determine a need for the currently certificated standard then an integrated management system certification may be needed. The CB should also evaluate with the Client the need for both standards based on its existing contract requirements. If more than one AQMS standard is appropriate, then an integrated management system (e.g., 9110 & 9100) may be needed. The audit duration calculation for adopting a new AQMS standard would be based on the initial certification process.
8	**8.5.1.3.4,** **8.5.1.6.5.f**	How is the use of additional Aerospace Standards determined and will audit duration be adjusted by site due to the use of those additional standards?	The IAQG Standards Matrix (9104-1 Table 4) is the method to document the additional aerospace standards used by the organization as part of their documented AQMS system or as required by customer contract. This should be part of the data collected by the CB prior to the audit. The CB is supposed to determine if additional audit duration is required due to the use of these additional standards. If the standard is contractually imposed on the client additional time shall be added to each site where the processes that are related to the requirements of the standards are performed.
9	**8.5.1.4.1.b** **8.5.1.6.4**	How is a central function determined as a site in a multi-site structure? Can the central function be virtual even when there are physical sites?	Per IAF MD1 – "The organization shall identify its central function. The central function is part of the organization and shall not be subcontracted to an external organization. *Note: The central function is where operational control and authority from the top management of the organization is exerted over every site. There is no requirement for the central function to be in a single site*." The central function can be treated as an additional site (that is virtual or physical) in a multi-site structure. A central function can be a virtual site, a function within a site, or a single site within the multi-site structure. Audit duration shall be calculated based on how the Central Function is defined.

FAQ Number	9104-1 Clause	Question	Answer
10	**8.5.1.5.1** **8.5.1.5.3**	Determining the "risk level" for client supplied data is not defined relative to the meet, exceed or below performance thresholds (M, L or H). How should the CB interpret client data to be consistent based on differing metrics submitted? How are metrics used for each site when they are related to the entire organization?	Certified organizations are required to have KPI's that reflect these performance measures, they may have been defined differently but they are intended to reflect OTD, Customer Satisfaction, and Customer Feedback. There should not be interpretation, however dialogue may be required with the organization to ensure the KPI is relevant, credible and include performance goals that can be audited. The standard identifies that certain organizational metrics for risk analysis are used for all sites. Site level data should be used when available for organizations that are eligible for PBS/RP
11	**8.5.1.5.1** **9101 5.3.1.4.d**	Is the Aerospace Auditor responsible for the OCAP analysis and verification?	The CB shall have a process for the collection and analysis of the organization's risk before each audit, the OCAP results shall be retained. Verification of the data during the audit is the responsibility of the auditor.
12	**8.5.1.5.1.a**	Certified organizations that have a low percentage of AS&D clients, is this factored into the risk analysis?	Complexity and the associated risk is based on the product and services (Figure 2) that are within the scope of certification. The percentage of AS&D work is not a factor in the risk assessment.
13	**8.5.1.5.1.c**	A certified organization has many customers. How many do we choose to report for OCAP?	The organization must define the metrics and how they are derived. ASD customers' data should be relevant to the organization.
14	**8.5.1.5.2.a**	How recent does OCAP data have to be to perform the OCAP Risk Analysis? What if the data is collected and reported annually, semi-annual, or a time frame beyond 90 days, etc.	The information that is the most current it is what should be the input to the OCAP. This includes current internal performance data that must be submitted and customer feedback data that may be less frequent.
15	**8.5.1.5.3**	Is the CB or the client organization responsible for the final determination of the acceptance of performance metrics used in the OCAP?	CBs are ultimately responsible for the OCAP Risk determination based on credible and verifiable performance metrics supplied by the organization.
16	**8.5.1.5.3**	Can a CB utilize site specific QMS performance data to complete the required risk analysis?	In accordance with 8.5.1.5.3; when "Organization" is referenced as the data source within Table 7, the CB shall utilize the organization's performance measures and associated risk determination (i.e., exceeds, meets, or below) to support completion of the risk analysis and conformance to this standard. When site level performance data is available it should be used to determine if additional audit duration (above OCAP) is needed to address the associated risk.
17	**8.5.1.6.3.a**	Does Audit Time (the 20% added to audit duration) include post audit activities such as addressing NCs, reports, etc.?	Per IAF MD 5 – Audit Time is defined as "includes the total time on-site at a client's location (physical or virtual) (1.7) *and time spent off-site carrying out planning, document review, interacting with client personnel and report writing*."

FAQ Number	9104-1 Clause	Question	Answer
18	**8.5.1.6.4.a**	How are part-time, temporary persons, interns, contract personnel, etc. included in the total number of persons at a site?	The standard requires audit time to be calculated using the total number of personnel at each site, within scope, at the time of the audit. It is the organization's responsibility to determine this headcount and provide the headcount number to the CB.
19	**8.5.1.6.5.b**	Reductions associated with Table 10 Are reductions based on the total absence or partial absence of the stated processes? Can a partial reduction be taken?	Partial reductions are not allowed. Percentages shown in Table 10 are based on processes "not present" at the site at the time of the audit.
20	**8.5.1.6.7**	What will constitute retained documented information for OCAP analysis and determination of audit duration adjustments?	The CB's documented information should include either the OCAP Tool or their equivalent method of audit duration calculation, the documented information collected from the organization, and any justification in written form or embedded in the analysis tool about reductions based on processes, risk and other requirements (Table 4, NCRs and other additions or reductions based on the client situation).
21	**8.5.3.1**	Does PBS/RP require the CB to be approved by their AB prior to offering it to a client? Does each PBS/RP client approval need prior AB notification or approval?	CBs are required to obtain approval for PBS/RP from their accrediting ICOP approved AB before offering and implementing PBS/RP. Once CBs are approved by their AB for PBS/RP, no individual approvals or notifications are required.
22	**8.5.3.1** **8.5.3.2**	Who decides the use of PBS/RP, the CB, or the client?	Certified organizations are to "apply" to their CBs for the ability to use PBS/RP. The decision for use is a mutual responsibility between the organization and their CB.
23	**8.5.4.3**	How is a virtual site determined?	A virtual site is where an entity performs work or provides a service using an on-line environment allowing persons irrespective of physical locations to execute processes. Source: ISO/IEC 17011 and IAF MD 4. *NOTE: For organizations with multiple locations; the "virtual site definition" is applicable when the central function or another location does not have a physical location or is a combined online and physical location.* If there is a physical site and some workers are remote, they are still part of the headcount of the physical site.
24	**8.5.3.6** **Appendix D.2**	Do customer NCs and external audit NCs (such as Nadcap or similar audits) affect PBS/RP qualification and requalification? What about customer satisfaction and complaints?	Feedback, complaints and external major NCs linked to internal audit, management review, or corrective action processes will affect the initial AQMS PBS/RP qualification (Reference Appendix D, Table D.1). Any valid complaints or external major NCs against the AQMS certification requirements can affect the PBS/RP maintenance activities and required adjustments (Reference Appendix D, Table D.2).

FAQ Number	9104-1 Clause	Question	Answer
25	**8.5.6.d**	When an AEA or an AA has "timed-out" after six annual audits, how long are they to be separated from this client's site?	The standard states "six consecutive audits" so once the consecutive string is broken (i.e., no participation in the next surveillance or recertification audit of a site). After at least one break in audits, the auditor can again audit the organization and/or site. If there is no alternative auditor or other reason for exceeding the six annual audits, the CB can approach their AB for a justified deviation.
26	**8.5.10.3**	How do you add a site when the certified organization is approved for PBS/RP?	A special audit using the associated audit time (i.e., initial) is required for the addition of a site (Reference 9104-001, Clause 8.5.10.4). If the organization is currently approved to PBS/RP the site would be included in the PBS/RP audit program after the certification decision. The site's performance must be evaluated in accordance with Appendix D, Table D.2 and any required adjustments made. At a minimum, the site must be audited at the next surveillance or at the next recertification audit.
27	**9.1.10**	Can a CB write an NCR to certificated organization against the requirements of 9104-1?	CBs are to determine when a nonconformance exists and associated corrective action response is required. The nonconformance is written against the AQMS. Many of the requirements in 9104-1 that directly relate to the certified organization should be part of the CBs contractual arrangements with their clients. The CB should follow its requirements when a client in not in compliance with contract requirements.
28	**9.2.1**	Does the internal audit program requirement for PBS/RP qualification as stated in 9104-1, Table D1, item c) require all clauses of the certified AQMS standard(s) to be audited each year?	The requirement is that all 'applicable' requirements of the AQMS are audited each year. In any one year, the internal audit program must cover all the identified processes. The inputs for planning the internal audit program, should include the importance of the processes, changes affecting the organization, and the results of previous audits.
29	**9.2.1**	To qualify for PBS/RP are all internal auditors required to have completed a TPAB approved ASD Lead Auditor course as stated in 9104-1, Table D1, item d)?	The audit team must have trained auditor(s) that have completed the TPAB approved ASD Lead Auditor course and be an active participant for each audit performed.
30	**9.2.1** **Appendix D.1**	After an organization qualifies, when can PBS/RP begin?	According to the requirements an organization is required to complete at least one (3-year) certification cycle at a minimum. PBS/RP can be initiated at the beginning of the next audit (surveillance or recertification) for a single site and after recertification (and before the first surveillance) for a multi-site structure.

End of the 9104-1:2022 - FAQ Log