
UPDATE ON THE 9104 SERIES, 9101, AND 9100 TRANSITION

And how these revisions impact AS9100, AS9110, & AS9120 Certified Organizations



INTRODUCTION

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OVERVIEW

The following standards are under revision, in the final stages. These standards will be released at the same time:

- IA9104/1A – Requirements for Aviation, Space and Defense Quality Management Systems
- IA9104/2A – Requirements for Oversight of Aerospace Quality Management Systems Registration/Certification Programs
- IA9104/3A – Requirements for Aviation, Space and Defense Auditor Training, Development, Competence, and Authentication
- IA9101G – Requirements for Conducting Audits of Aviation, Space and Defense Quality Management Systems
- IA 9100, 9110 and 9120 for limited scope revisions.

Note: All “AS” standards will be renamed “IA.” This is to align the Americas, Europe and Asia-Pacific.

BACKGROUND ON THE TRANSITION

- The IAQG suspended the 9104 and 9101 transitions back in 2022 to “realign all the certification scheme standards, delta training and OASIS V3 on a coordinated timeline.”
- Since then, the progress has been slow. This is mostly due to translation. The IAQG wanted all standards translated into all needed languages before starting the transition. It was taking a lot longer than anticipated. They recently found a new translation provider.

UPDATE ON THE TIMELINE

- While this is not set in stone, the IAQG is now hoping that the final revisions of the standards will be released March 1st, 2026.
- Once the standards are released, Certification Bodies will have time to transition. The specific timeline has not yet been decided. It will likely be between 8 and 13 months.
- At the end of that transition period, all Certification Bodies will transition at the same time and all AS audits afterward will be to the new standards.
- Supplemental Rule 005 will have more details on the requirements and timeline for the transition. As soon as that is released, we will be sure to share that.



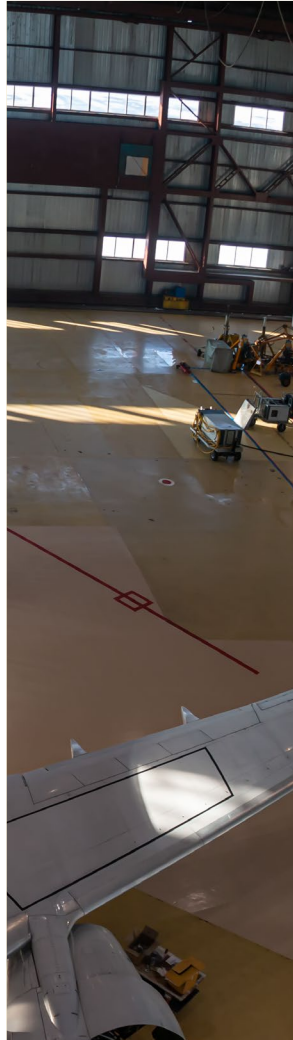
IA 9100, 9110 & 9120 LIMITED SCOPE REVISION

- All three Aerospace standards are undergoing what they are calling a “limited scope revision.”
- The reason for this limited scope revision is that Stakeholders are unhappy that the standard has not been revised in 10 years when so much has changed in the industry in 10 years.
- There are about 8 changes overall. They all relate to supplier controls.
- This standard change will require certificate issuance to all certified organizations after the transition.
- As soon as we have more information, we will share that with you all.



OTHER REVISIONS IN PROCESS

- The ISO 9001 revision is looking to be released between July and September 2026 (just an estimate).
- The full revisions for 9100, 9110 and 9120 are in process. These are planned to be released in 2027.
- There will likely be a 3-year transition timeline for the full revisions.



IA 9104/1A CHANGES

- New Requirements for Aerospace Certified Organizations
- The Future of Remote Auditing
- New Documentation Submission Requirements
- New Audit Duration Calculations

8.5.1.3.3 OF 9104/1A

- 8.5.1.3.3: The AQMS standard(s) (i.e., 9100, 9110, or 9120) utilized for certification shall be selected based on the organization's scope of certification.
 - Note: Refer to the "Intended Application" of the AQMS standards to determine the selection of the appropriate standard.
- What does this mean?
 - The scope of your organization must match the standard to which your organization is certified. During the transition, PJR will be reviewing all scopes and will inform your organization if a change is required.

INTENDED APPLICATIONS

- **9100** is for organizations that design, develop, or provide aviation, space and defense products and services; and by organizations providing post-delivery activities, including the provision of maintenance, spare parts, or materials for their own products and services.
- **9110** is for organizations whose primary business is providing maintenance or continuing airworthiness management services for civil or military aviation articles and products and by OEMs with maintenance, repair, and overhaul operations that are operated autonomously or that are substantially different from their production operations.
- **9120** is for organizations that procure parts, materials, and assemblies and resell these products to a customer in the aviation, space, and defense industries.

8.5.2.1 OF 9104/1 A

- 8.5.2.1 b: “For an IMS with fully integrated AQMS standards, CBs shall calculate the audit duration for each standard individually; then, take the standard with the highest amount of audit duration and add 50% of the audit duration for each additional standard (i.e., Total Audit Duration = 9100 + 50% of 9110 calculation + 50% of 9120 calculation);
- This has changed from the current guidelines for determining audit duration, which requires an addition of 15% for each integrated standard (if fully integrated).

8.5.11.1 OF 9104/1 A

- 8.5.11.1: CBs shall suspend certification and retain documented information supporting the suspension decision for any of the following conditions:
 - a) When an organization fails to re-establish conformance within 90 days from the date the nonconformance was issued or
 - b) When an ethical complaint (e.g., code of conduct) or ethical related nonconformity has been substantiated with supporting objective evidence.

WHAT DOES THIS MEAN?

- When a nonconformity is issued, the organization must:
 1. Provide immediate Correction for the nonconforming condition
 2. Identify Root Cause(s) of the non-conformity
 3. Identify and implement Corrective Actions required to address the root cause(s) and return the process to conformance
 4. Implement any other actions to ensure the condition does not repeat
- Note: Sometimes the fourth step happens over extended time. The re-establishment of conformance is completed at step 3. Verification of effectiveness and closure of the nonconformity occur after step 4.
- This must all be completed within 90 days of the date the nonconformance was issued or PJR is required to suspend the organization. The current requirement is 60 days.



FOR EXAMPLE:

- If a nonconformance was issued due to the management review missing some required inputs, the organization has 90 days to:
 1. Either complete a new management review including those missing inputs or conduct a gap review to cover those missing inputs.
 2. Discover the Root Cause that led to the missing inputs.
 3. Identify and implement actions that address that Root Cause and bring the process back to conformance.
- That is when the establishment of conformance is completed. Then, you must implement any other actions necessary to ensure that nonconformance does not repeat.



8.5.11.1 OF 9104/1 A

- If PJR is informed of an ethical complaint, we must investigate. This could include requesting documentation, conducting interviews, by conducting a special audit, etc. If the evidence substantiates the complaint, PJR must suspend.
- Ex: If we receive a complaint that nonconforming product was shipped knowingly without proper disposition or informing of interested parties, we must investigate. If substantiated by evidence, we must suspend.

9.1.2 OF 9104/1 A

- 9.1.2: AQMS certified organizations, that have their AQMS standard certification suspended, shall provide notification to their ASD customers within 15 days of suspension.
- NOTE: Organizations should also provide notification when their certification is withdrawn.



CERTIFICATION STRUCTURES IN 9104/1 A

- The standard no longer recognizes several sites or complex structures. Only Single, Multi-Site, and Campus structures will be recognized. If your organization is not currently a Single, Multi-Site, and Campus structure, we will be conducting a review and making the determination of which structure is appropriate for your organization. PJR will inform your organization if any additional information is required to make that determination. PJR will also inform your organization which structure it will then fall under.
- Note: Originally, Campus structures were also going to be removed. However, they were recently added back in.

THE FUTURE OF REMOTE AUDITING

- 8.5.4.2: Where a physical location of a site exists, and ICT is utilized, a maximum of 50% of the audit duration may be conducted remotely.
 - Note: ICT = Information and Communication Technology (Virtual Auditing)
- 8.5.4.3: Where a physical location of a site does not exist (i.e., a virtual site - reference IAF MD 1), ICT shall be utilized in accordance with IAF MD 4.



WHAT IS A VIRTUAL SITE PER IAF MD 1?

- This is a Virtual location where an organization performs work or provides a service using an on-line environment allowing persons from different physical locations to execute processes.
- Note 1: A virtual site cannot be considered as such where the processes must be executed in a physical environment (e.g., warehousing, physical testing laboratories, installation or repairs to physical products).
- Note 2: An example of such a virtual site is a design & development organization with all employees performing work located remotely, working in a cloud environment.
- Note 3: A Virtual site (e.g., an organization's intranet) is considered a single site for the purposes of calculating of audit time.
- Note 4: For further information, see also IAF MD 4: The use of information and communication technology (ICT) for auditing /assessment purposes.



WHAT DOES IAF MD 4 SAY MUST HAPPEN?



- The organization would complete a form confirming their capabilities and infrastructure to support a remote audit.
- If it is determined that the organization is capable, PJR can setup the virtual meeting on GoToMeeting. Or if your organization prefers a different platform, we could possibly approve that. Your organization would setup the audit in that case.
- Audit duration would be calculated the same as for a physical, on-site audit.



THE FUTURE OF REMOTE AUDITING

- 8.5.10.3 of 9104/1 A: “Special audits shall be conducted on-site for scope extensions or the addition of site(s) to an existing certification.
- NOTE: Other types of special audits (e.g., complaints, transfers, corrective actions) may be conducted remotely (reference IAF MD 4).”

NEW DOCUMENTATION SUBMISSION REQUIREMENTS

- 9.1.10 of 9104/1 A: “AQMS certified organizations shall provide data required by this standard, to their CB prior to initial, surveillance, and recertification audits for the completion of the OCAP analysis.
 - NOTE: Failure to provide accurate and timely data may result in the issuance of a nonconformity by the CB and/or prevent certification.”
- 9101 requires that the organization shall provide the OCAP data to the CB prior to each initial, surveillance and recertification audit.



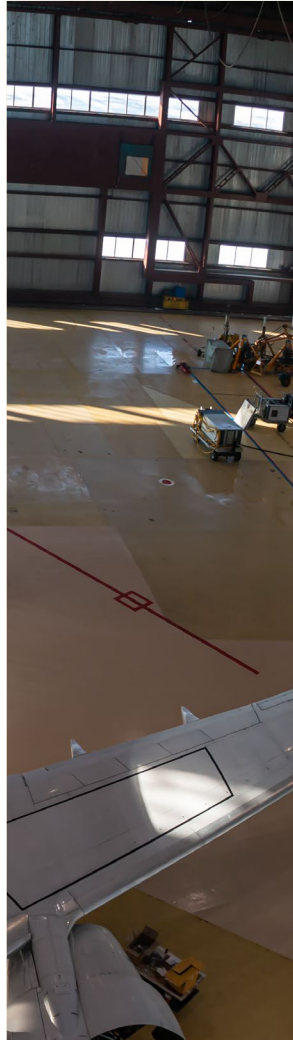
WHAT DOES THIS MEAN?

- CBs must now complete an OCAP Tool (Organization Certification Analysis Process) to determine audit duration.
 - While we can schedule your audit prior to receiving the new required information, once the information is received, the audit duration may change.
 - Information is required to be verified once the auditor is on-site. Therefore, we cannot have information submitted too far in advance of the audit. It needs to be up-to-date.
 - The information should be received approximately 3 to 4 months prior to the audit due date.
 - Your scheduler will send you the request for the information approximately 6 months prior to your audit.



WHAT INFORMATION IS REQUIRED?

- Copy of Interaction of Processes
- Copy of Internal Audit Program / Procedure
- Copy of the latest internal audit reports and findings
- Copy of the latest Management Review information
- Copy of On-Time Delivery goals and actuals
- Copy of Conformity of Delivered Product or Service goals and actuals
- Customer Satisfaction goals and actuals
- Copy of Customer Complaints or Feedback
- Copy of product related safety issues (if applicable)
- Confirmation of number of sites
- Confirmation of number of employees per site
- Confirmation of Scope of Certification
- List of additional aerospace standards utilized such as AS9146 (FOD Prevention Program) or AS9102 (Aerospace First Article Inspection Requirements)



NEW AUDIT TIME CALCULATION

- Audit Duration = Time from the opening meeting to the closing meeting
- Audit Time = All on-site and off-site time (i.e., planning, report writing, auditing, and NCR management)

NEW AUDIT TIME CALCULATION

- All required documented information previously noted will be used to determine the risk level of your organization.

Table 7 - Organizational risk determination

RISK FACTOR	DATA SOURCE	LOW (1)	MED (3)	HIGH (6)	RISK SCORE
Complexity	Figure 2	Low	Med	High	A
Internal Audit	Table 5	Low	Med	High	B
On-time Delivery	Organization	Exceeds	Meets	Below	C
Conformity of Delivered Product or Service (e.g., item escape rate)	Organization	Exceeds	Meets	Below	D
Customer Complaints/Feedback	Organization	Exceeds	Meets	Below	E
AQMS Process Effectiveness from Previous Audit Report	PEARs (lowest value)	5	3-4	1-2	F
Total Risk Score = $\sum(A+B+C+D+E+F) = R$					R
When R = (36 to 25) Risk is HIGH (24 to 12) Risk is MED (11 to 6) Risk is LOW Example: A=High (6), B=Low (1), C=Low (1), D=Med (3), E=Med (3), and F= Low (1) Therefore $\sum(6+1+1+3+3+1) = 15$ Organizational Risk = Medium					

Table 8 - Audit duration per site

Number of Personnel	Initial Audit Duration	Annual Surveillance Audit Duration	Recertification Audit Duration
1-5	2	1	2
6-10	2.5	1	2
11-15	3	1.5	2.5
16-25	3.5	1.5	3
26-45	5	2	4
46-65	6	2.5	4.5
66-85	7	3	5.5
86-100	8	3	6
101-125	8.5	3.5	6.5
126-175	9.5	4	7
176-275	10.5	4	8
276-425	12	5	9
426-625	13	5.5	9.5
626-875	14	5.5	10.5
876-1175	15	6	11
1176-1550	17	7	12.5
1551-2025	18	7	13.5
2026-2675	19	7.5	14
2676-3450	20	8	14.5
3451-4350	21	8	15.5
4351-5450	22	8.5	16
5451-6800	23	9	16
6801-8500	24	9	17.5
8501-10700	25	9.5	18
10701-12225	26	10	18.5
12226-13970	27	10	19
13971-15715	28	10.5	20
15716-17460	29	11	20.5
17461-19205	30	11	21
19206-20950	31	11.5	22
20951-22695	32	11.5	22.5
22696-24440	33	12	23
24441-26185	34	12.5	24

NOTE 1: For sites with employees greater than 26185, follow the progression in Table 8.

NOTE 2: If the annual surveillance is performed in multiple audits, the total annual surveillance audit duration still applies.

NEW AUDIT TIME CALCULATION

- The starting audit duration is based off your employee count.

NEW AUDIT TIME CALCULATION

- Once the starting audit duration is determined, your organization's risk level will be addressed in the following manner:

- Low risk = 10% Reduction
- Medium Risk = No Change
- High Risk = 10% Addition

Table 9 - Audit duration risk adjustments

RISK ANALYSIS	% CHANGE
Low	Minus 10%
Medium	No Change
High	Add 10%

NEW AUDIT TIME CALCULATION

Table 10 - Allowable site audit duration reductions

PROCESSES (not present at site)	AUDIT DURATION REDUCTION
Management of QMS	10%
Design and Development of Products and Services	20%
Control of Externally Provided Processes, Products, and Services	15%
Control of Production and Service Provision	20%

- We then review the site specific processes, which could result in a reduction to a site's audit duration.
- It is **extremely** important that your Interaction of Process be clear as to what processes occur at each site.



NEW AUDIT TIME CALCULATION

- 9104/1 A, 8.5.1.6.5 (d): The total reduction by site after all adjustments (including rounding) shall not exceed 50% of the audit duration per Table 8.
- 9104/1 A, 8.5.1.6.6: To determine audit time, 20% shall be added to the total audit duration for all sites. This added time is used for OCAP analysis, audit planning and report writing.

FOR EXAMPLE:

- Let's say an organization has a Recertification audit. They have 66 employees, the OCAP documentation showed they are Low Risk, and Design is not applicable.
 - Table 8 tells us the base audit duration is 5.50 days.
 - 10% reduction for low risk.
 - 20% reduction for no design responsibility.
 - 20% reduction + 10% reduction = 30% reduction (1.65 day).
 - $5.5 - 1.65 = 3.85$. We round to the nearest $\frac{1}{2}$ day, which is 4.0. This is the audit duration.
 - We add 20% for planning. This brings us to 4.8 days overall.

SUMMARY

- This is the information that we currently have.
- As soon as we get further updates, we will be sure to share that.
- PJR will do our best to ensure a smooth transition for all certified organizations.

Any questions?

If you have any additional questions, please feel free to reach out to PJR's Aerospace Program Manager, Kim Wagner, at kwagner@pjr.com!

