IATF Rules 6th Edition Questions and Answers

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Rules 6th Edition – Presentation Contents

Question:

What do the slides in this presentation represent?

Answer:

The contents of this presentation represent:

- All Rules 6th Edition questions submitted by certification bodies by the May 15, 2024, deadline, excluding duplicate questions.
- Answers to each question agreed upon by Global Oversight, including those reviewed in the June 18, 2024, webinar.
- Updates on Rules 6th Edition changes to the IATF Database, IATF CARA and the ADP.

The presentation DOES NOT include the questions and answers submitted regarding section 1.0, Eligibility. These will be discussed at the September 2024 Webinar.

Thank you to all who submitted questions and for your patience while Global Oversight prepared answers!

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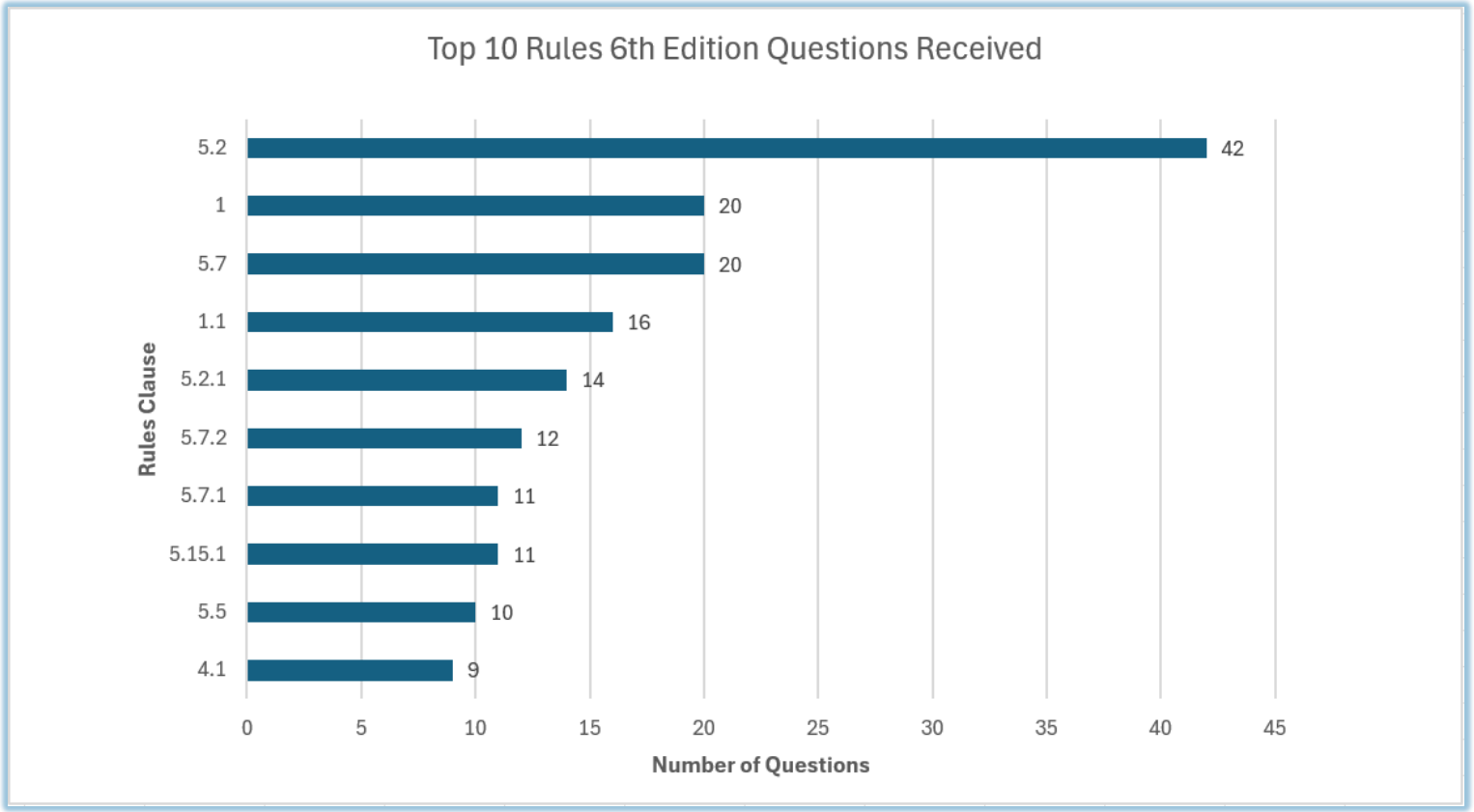
Top 10 Rules 6th Edition Sections with Questions Submitted

396 questions submitted for the June 18th Webinar.

24 CBs provided questions; late submissions were not incorporated for this session.



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ADP Training Module for Rules 6th Edition

26 April 2024

The IATF has approved CB Communiqué #2024-002.

The purpose of this CB Communiqué is to advise IATF-recognized certification bodies, auditors, non-auditors, and all related stakeholders of upcoming changes to the Auditor Qualification Process and ongoing qualification requirements related to the rollout of the Rules for Achieving and Maintaining IATF Recognition, 6th Edition ("Rules 6").

CB Communique 2024-002 – IATF Auditor Qualification Process related to Rules 6th

- Eligibility
- Stage 1
- Audit Day Duration
- Audit Planning
- Conducting Audit
- Audit Reporting
- NC Management (including decertification process)
- Remote Auditing
- Resources
- Scheme Management

IATF Oversight
Certification Body Communiqué

CB COMMUNIQUE # 2024-002

	YES	NO
CONFIDENTIAL		X
MANDATORY CONTENT	X	

ISSUE DATE: April 2024

SUBJECT: IATF Auditor Qualification Process related to the rollout of the Rules for Achieving and Maintaining IATF Recognition, 6th Edition ("Rules 6")

The purpose of this CB Communiqué is to advise IATF-recognized certification bodies, auditors, non-auditors, and all related stakeholders of upcoming changes to the Auditor Qualification Process and ongoing qualification requirements related to the rollout of the Rules for Achieving and Maintaining IATF Recognition, 6th Edition ("Rules 6").

All IATF 16949 third-party audits shall be conducted in accordance with Rules 6 effective 1 January 2025. An individual's eligibility to conduct audits aligned to Rules 6 (or other audit-related activities) will be indicated by a change to their Identifying Number after completing the necessary qualification requirements in the ADP.

Rules 6 qualification requirements will involve the completion of an online Rules 6 Training module in the ADP (incorporating embedded quizzes to confirm understanding), followed by completion of a final graded Rules 6 Test of Understanding requiring at least an 80% score to pass. Candidates will have an initial attempt and up to three retake attempts (four total attempts) to pass the Test of Understanding. The test is open book and not timed or proctored. Retakes will be provided automatically upon failure.

IATF-recognized certification bodies must employ appropriate measures to ensure the integrity of the Rules 6 qualification process.

Upon successfully completing the Rules 6 qualification requirements you will receive a certificate that counts as eight (8) hours of structured Continuing Personal Development.

To support the transition process, the IATF will be making several changes impacting all auditors and non-auditors, as outlined below:

Changes impacting the New Auditor Qualification Process (Phase 1)
New Auditor Training classes conducted in 2024, including initial ADP assessments, will continue to be conducted in alignment with Rules 5 requirements. This is to allow any newly qualified auditors to be eligible to conduct audits according to Rules 5 for the remainder of 2024.

CB Communiqué 2024-002 Page 1 of 3 April 2024

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IATF Database Changes Related to the IATF Rules 6th Edition

Question:

What are the main changes related to the IATF Rules 6th Edition in the IATF Database?

Answer:

The main changes related to the IATF Rules 6th Edition in the IATF Database are the following:

1. **Entry of stage 1 readiness assessment (new audit type)**

   This change will require stage 1 readiness assessments to be added to the IATF Database.

   The result will either be 'ready to proceed' or 'not ready to proceed'; no NCs and no certification body witness auditor entered, no certificates uploaded.

2. **Technical Review Decision for all audit types**

   This change will require a Technical Review Decision to be entered for each audit, including Name of Technical Reviewer and Date of Technical Review Decision. Decision is either 'positive' or 'negative' (except for stage 1 – see above).

3. **Entry of audits at standalone remote support locations (SA-RSL)**

   This change will require audits to be entered at SA-RSLs (except recert audit); no audit result / NCs entered.

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IATF Database Changes Related to the IATF Rules 6th Edition

4. Transfer requests and transfer process

This change will require IATF USIs to be used when initiating transfers and will require SA-RSL transfers to be processed within the IATF Database.

This change will include various transfer pre-condition checks and several enhancements to facilitate the transfer process.

Note: The transfer request feature shall be understood as a tool for certification bodies to check if, in general, a transfer of a location (IATF USI) is possible at the time the feature is used. However, it is the new certification body's ultimate responsibility to ensure that all pre-conditions are met for the location under transfer at the start of the transfer audit.

5. Audit duration composition

This change will require the time spent for an audit to be entered in categories, per each auditor: audit duration = audit days + additional audit time.

Additionally, but not included in the audit duration, the 'audit preparation and planning time' (min. 0.5 days) is entered into the IATF Database.

6. New field 'Start Date of Decertification Process'

This change will require the start date of the decertification process to be entered into the 'Edit Certificate' screen when the certificate status is set to 'suspended'.

Start date: closing meeting date, date of filing a performance complaint, entered manually if 'other' is selected.

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IATF Database Changes Related to the IATF Rules 6th Edition

7. Changes to various fields and texts to align with Rules 6th Edition (examples see below)

All certificate status change reasons are reviewed and aligned to Rules 6th for all certificate statuses.
Review and align description shown when a site relocation is conducted.
IATF CMS is reviewed and revised where applicable.
Remove 6- and 9-month audit interval since manufacturing sites will have a 12-month interval.

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IATF CARA Changes Related to the IATF Rules 6th Edition

Question:

What are the main changes related to the IATF Rules 6th Edition in the IATF Common Audit Report Application (IATF CARA) and the IATF NC CARA?

Answer:

The Rules 6th Edition requirements were analyzed by a team containing members of the Rules 6th SME for identifying required changes to various IT-Systems, incl. IATF CARA. In total 34 changes were identified for IATF CARA. The main changes however are listed in the following:

1. **Completely revised Stage 1 Readiness Assessment report**
   This change will address the requirements of 6.2.2
2. **Adding fields for certification body auditor to enter their audit planning and preparation time and date (5.7) and this populate it IATF DB Entry sheet. Split into onsite and offsite site.**
   This change will address the requirements of 5.7 and 5.7.1

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IATF CARA Changes Related to the IATF Rules 6th Edition

3. **Adding field(s) to record the date of the certification body approved Application for Audit Day Reduction (mandatory) and field (optional) to record an internal tracking number.**
   This change will address the requirements of 5.2 h) and the changed process

4. **Elimination of the 6-month and 9-month surveillance audit.**
   This change will allow only to select a 12-month audit cycle

5. **Timing requirements for major nonconformities: the client is required to submit, within a maximum of fifteen (15) calendar days from the closing meeting, the initial response…**
   This change will address the requirements of 5.1.1

6. **Timing requirements for minor nonconformities: the client is required to submit, within a maximum of sixty (60) calendar days from the closing meeting, of the site audit …**
   This change will address the requirements of 5.11.2

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Known Errors in Rules 6th after Publication

Errors found in:

- Figure 5.1.1 - Manufacturing site audit and certificate cycle
- Incorrect references in section 5.2 q), 5.11.4, 7.1, and Global overview flowchart of the first 3-year IATF 16949 certification cycle
- Numbering sequence in section 7.1 – Transfer audits
- Annex 1 – Examples 2,3,4 and 7

It is possible that additional SI's will result from the question submitted for the webinars.

No errata sheet will be issued; instead, Rules 6th SIs to address the errors will be issued in Q4 2024.

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Foreword

Question:

To what extent is a certification body allowed to use multiple extracts from the IATF Rules in its internal process descriptions, internal documents, training material to clients and staff?

Answer:

IATF-recognized certification bodies are only permitted to use Rules 6th Edition text, notes, graphics, figures, tables, or Annexes in support of their internal processes, internal training material for auditors, awareness training for clients, and client contracts.

Any other use of Rules 6th Edition text, notes, graphics, figures, tables, or Annexes is strictly prohibited.

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Section 1.1 – Certification Structure Eligibility Requirements

Question:

When extended manufacturing sites need to be transitioned to and certified as single manufacturing sites, how should this be handled?

Answer:

The certification body shall conduct an Initial Audit with no Stage 1 Readiness Assessment, and a Stage 2 Certification Audit using Recertification Days from Table 5.2 at the "new" location.

The transition must occur at the next regular audit after January 2025, at the latest; however, because this is an initial audit, it does not have to coincide with the former "main site's" audit cycle.

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Section 1.1 – Certification Structure Eligibility Rrequirements

Question:

When changing from EMS to a manufacturing site under Rules 6th Edition, it will be a heavy burden for the organization to establish an audit system from scratch for the former EMS that is being certified as a single manufacturing site.

Can we submit waivers to avoid this?

Answer:

No, a waiver would not be appropriate for this situation.

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Section 1.1 – Certification Structure Eligibility Requirements

Question:

Do grandfather rights apply for already approved extended sites if over 10 miles. Can we maintain currently approved extended manufacturing sites if over 10 miles? Should it not be 10 miles or one hour's travel, whichever is greatest?

Answer:

Grandfather rights do not apply to current EMSs.

The Rules are clear that in addition to the other requirements listed in section 1.1, an EMS must meet the 10 miles (16 Km) AND no more than a 60-minute drive from the main manufacturing site.

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Section 1.1 – Certification Structure Eligibility Requirements

Question:

1) If an extended manufacturing site executes non-manufacturing process (functions), such as purchasing, sales, etc., can this location be regarded as an EMS? Or do we need to treat this location as a site rather than an extended manufacturing site?

2) Can the EMS have a separate laboratory or warehouse?

Answer:

1) So long as the processes being executed at the EMS are done only to support the EMS itself and/or the main manufacturing site, this is acceptable. If these functions support other locations, it cannot be considered an EMS.

2) No, an EMS can only receive support from or provide support to the main manufacturing site.

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Section 1.1 – Certification Structure Eligibility Requirements

Question:

1) If the EMS does not meet the requirements (within 10 miles and no more than 60 minutes), should it be audited as a Corporate Scheme?
2) If the EMS does not meet the distance and time requirements, is it possible that certification body only audit the manufacturing processes for the site?
3) Is a Google Map needed for evidence of meeting this requirement?
4) And if client is slightly over the requirements, say 11 miles or 65 minutes, then it can not be considered EMS?

Answer:

1) If the client meets all eligibility requirements for a corporate certification scheme, then yes, the site could be audited as part of a corporate scheme.
2) No.
3) It is up to the client and the certification body to determine the best method for documenting the distance and time requirements for each EMS are met.
4) No, it cannot be considered an EMS.

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Section 2.1 – General IATF Recognition Requirements for Certification Bodies

Question:

Since Stage 1 readiness review activities are to be entered into the IATF DB, are they subject to be included in the Royalty payments?

Answer:

Yes, this is correct.

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Section 2.1 – General IATF Recognition Requirements for Certification Bodies

Question:

The contracted office holds the IATF recognition and the IATF-recognized certification body or its corporate entity shall have one hundred percent (100%) ownership of the contracted office.

What if the key functions of the certification activities (Technical Review, Auditor approval, certificate issue, database management, witness audits, etc.) are being managed at some other location or regional office or in multiple offices? How should this regional office be identified in the corporate entity and what % of ownership required?

Answer:

The primary requirement is that the main office holding the IATF recognition must be 100% owned by the certification body or its corporate entity. For regional offices where IATF 16949 certification activities are managed, while 100% ownership is ideal, it is not mandatory.

Majority ownership in these offices (i.e., > 50%) demonstrates managerial and operational control of these offices such that they will operate under the control of the contracted office in full compliance with IATF Rules.

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Section 2.1.2 – Joint Ventures

Question:

What do you mean by 'establishing and maintaining managerial control' ? What types of demonstration or evidence are typically considered acceptable in this context?

Answer:

Joint venture offices and their relevant activities must be under the control and oversight of the contracted office, for example, via: Documented Governance Structures, Policies, Processes and Procedures, Agreements and Contracts, Ongoing Monitoring and Audits, Performance Metrics and Reports, Decision-Making Responsibility and Authority, Communication and Reporting, Corrective Actions, and Management Reviews.

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Section 2.1.3 – Outsourcing of Certification Activities

Question:

How do you explain sections 2.1.2 and 2.1.3, which seem to contradict each other?

Section 2.1.3 says that certification activities cannot be outsourced, and section 2.1.2 says that the certification body must maintain control of the Joint Ventures.

Answer:

A certification body can partner with other organizations (joint ventures) to expand its capabilities, geographical reach, or expertise, but it must ensure that all IATF 16949 certification activities within these partnerships are under its direct control and supervision.

The Rules do not permit the certification body to contract with an external organization (outsource) to execute IATF 16949 certification or any part of IATF 16949 certification activities; thus, while the Rules do permit a certification body to expand its operations through joint ventures, the execution of IATF 16949 certification activities must be executed by an IATF-recognized certification body.

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Section 2.10.1 – IATF Witness Audits

Question:

What is the difference between "confirmed audit" and "planned audit"?

This is needed for correct filling of the list of upcoming audits (3-month schedule), list submitted monthly to the Oversight office.

Answer:

A “confirmed“ audit means that the audit team has been validated with suitable scope and qualification, the duration of the audit is established with dates agreed upon by the audit team and the client, and any related waiver is approved. The client and the certification body do not expect any changes to be made to the audit specification (duration, date(s), location, audit team, audit method, etc…) and the Oversight office can rely on this information to plan and conduct a witness audit.

A "planned" audit means that the audit is foreseen but not confirmed.

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Section 2.2 – Management System Requirements

Question:

What is the difference between a Joint Venture partner and multiple / regional office(s)?

Answer:

Joint venture is defined in section 10.0 as, "*a business entity created by two (2) or more parties, characterized by shared ownership, shared returns and risks, and shared governance.*"

Any certification body locations involved in IATF 16949 certification activities, which the certification body may call, "regional offices," "branch offices," "subsidiaries," "sales locations," "support centers," "affiliates," "global headquarters," etc., are considered to fall under the term "regional office" for purposes of Rules 6th Edition requirements.

A regional office may be a joint venture location.

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Section 2.2 – Management System Requirements

Question:

What prescriptive elements are required within the software system/platform?

What elements of audit planning and conducting, technical review, certification status, and certificate issuance are required to be within the software system/platform?

Answer:

Sections 2.2 d) and e) require the minimum elements of the common software system or platform to include the management of audit planning and conduct, technical review, certification status, certification issuance, appeals, and complaints.

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Section 2.2 – Management System Requirements

Question:

Are different software systems/platforms permissible?

Is it permissible to have different ERP systems at different locations, which can be accessed from other locations?

Answer:

One common software system is required to be used, where possible.

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Section 2.2 – Management System Requirements

Question:

Page 13 and Introduction section Para 6 & 7 – Waivers

For each required waiver, it seems mandatory first to submit a request for waiver to Oversight office, and if not approved by the Oversight office the waiver can be approved internally.

1) What is the criteria for internal waiver approval? To what extent it can be considered if the request is beyond rule requirements?

2) Does the certification body need to wait for Oversight office decision on a submitted waiver?

Answer:

1) IATF Global Oversight will provide guidance to certification bodies where waiver requests are not required to be approved by the relevant Oversight office and can be internally approved by the certification body.

2) Yes. If a waiver is submitted to the relevant Oversight office and not approved, the certification body cannot override the Oversight office decision with an internal approval of a rejected waiver.

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Section 2.4 – Management of Business Continuity Risks

Question:

What minimum content must business continuity risk assessments contain?

Answer:

There are purposely no minimum requirements specified for business continuity risk assessment in the Rules.

It is the certification body's responsibility to understand the breadth and depth of its operations and to identify and mitigate the risks that threaten its ability to continue its operations.

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Section 2.5.2 – Conflicts of Interest

Question:

Is it allowed to conduct a pre-audit in 2024 under Rules 5th Edition requirements and conduct Stage1 Readiness Assessment in 2025 under Rules 6th Edition requirements?

Answer:

Yes, however, pre-audits are no longer permitted under Rules 6th Edition.

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Section 2.5.2 – Conflicts of Interest

Question:

The certification body auditor's legal company has been providing consulting services for years to a client who is not certified by the certification body for whom the auditor works.

The situation changes, the site validates the certification contract with the auditor's certification body. Should the certification contract with the certification body be canceled?

Answer:

Any auditors sponsored by the certification body, including contracted (free-lance) auditors, are not permitted to consult for any of the certification body's contracted clients.

It means that the certification body cannot sign a contract with the client for at least 24 months after the contracted auditor ceases providing consulting services to the client.

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Section 2.5.2 – Conflicts of Interest

Question:

Do the requirements in section 2.5.2 mean any contract auditors we sponsor are not able to consult for any of our contracted clients? Or is it specific to each client or organization?

Answer:

This means that any auditors sponsored by the certification body, including contracted (free-lance) auditors, are not permitted to consult for any of the certification body's contracted clients.

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Section 2.5.2 – Conflicts of Interest

Question:

Can free-lance auditors who are working for several certification bodies still perform some consulting activity?

Since consulting activity provided to clients certified by a sponsoring certification body is not allowed, working for more than one certification body will become a challenge for auditors if they want to find new customers for their consulting activity.

Answer:

Yes, free-lance auditors are permitted to provide some consulting services; however, any auditors sponsored by the certification body, including contracted (free-lance) auditors, are not permitted to consult for any of the certification body's contracted clients, and the certification body cannot sign a contract with a client for at least 24 months after the contracted auditor ceases providing consulting services to the client.

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Section 2.6 – Certification Body Internal System Audits

Question:

The audit program shall identify the planned audit date(s) and, where applicable, the actual audit date(s), the audit status, the audit method (i.e., onsite or remote), and the assigned internal system auditor. Under what circumstances are remote internal audits permitted?

Answer:

The Rules are clear that internal system audits must be performed onsite at least once per year (i.e., every twelve months [+3/-3 months]) at the contracted office and each regional office identified in the IATF Standardized Regional Office Matrix.

The language in the section also states that a regional office only responsible for marketing and sales activities or only "provides support" according to the IATF Standardized Regional Office Matrix must be audited at least once every three years and may be included in the internal system audit for the contracted or regional office it supports, or may be audited separately, either onsite or using remote auditing technology.

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Section 2.6 – Certification Body Internal System Audits

Question:

What about a regional office that only performs quotations - a full day of internal auditing makes no sense.

Section 2.6 n) mandates that a full day be spent auditing all regional offices. This does not make sense if the regional office is only involved in quoting new business. We have several regional offices that may only quote a single IATF contract per month. 8 hours is excessive for such an office.

Answer:

Regional offices that are only responsible for marketing and sales activities or only provide support according to the IATF Standardized Regional Office Matrix (see section 10.0) shall be audited at least once every three (3) years. These offices may be included in an internal system audit of the contracted office or a regional office they support or may be audited separately, either onsite or remotely.

One full day every three years is not excessive, even for a regional office that only provides quotations.

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Section 2.6 – Certification Body Internal System Audits

Question:

When a certification body's contracted office is a central support hub for other regional offices and has no responsibility for certificate activities, can the required 2 days be reduced to 1 day or can we apply for a waiver for this?

Answer:

Rules 6th Edition requires the contracted office to be responsible for establishing, developing, documenting, implementing, maintaining, controlling, and improving its management system related to IATF 16949 certification, regardless of where those certification activities occur.

And, where a certification body has regional offices involved in IATF 16949 certification activities, the contracted office must be responsible and held accountable for monitoring and controlling all global activities related to IATF 16949 certification.

Two days of auditing is reasonable for assessing the contracted office's scope of responsibilities.

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Section 2.6 – Certification Body Internal System Audits

Question:

The term "nonconformity records" is used incorrectly in section 2.6 r). The correct usage should be "nonconformity management record" since it must be the entire NC management record and not just the NC record.

Answer:

In section 2.6 r) the term used should be *"nonconformity management record"*. The nonconformity management record is the documented nonconformity, supplemented with the required nonconformity management information as per the relevant requirements in the section 5.11.

To clarify this requirement, the IATF Global Oversight will issue a Sanctioned Interpretation (SI) to clarify the meaning of the *"nonconformity record(s)"* vs. the *"nonconformity management record(s)"*.

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Section 2.7 – Certification Body Internal Witness Audits

Question:

1) In 2.7 e) how is the 700 audit days calculated for the auditors working with several certification bodies?
2) Is there a provision in the IATF Database to support the monitoring?
3) Do we breach the rules if we perform the IWA before 6 years but after 700 audit days?

Answer:

1) 700 audit days is calculated per sponsoring certification body.
2) Yes, the certification body can run a report from the IATF Database for its sponsored auditors to monitor the audit days conducted.
3) The requirement states the maximum duration between internal witness audits of six years or 700 audit days – whichever comes first; this means the internal witness audit is overdue if 700 audit days is exceeded.

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Section 2.7 – Certification Body Internal Witness Audits

Question:

Regarding the latter part of 2.7 f) which says, "If necessary, the witnessed auditor shall be temporarily assigned as the audit team leader…"

Does this mean if an auditor who participated in the previous audit cycle participates in a recertification audit as a team member, and an internal witness audit is to be conducted for this auditor, that the certification body is allowed to assign this auditor to take the team leader role?

Answer:

No. A different audit must be selected for the auditor to be witnessed as the audit team leader.

For auditors who have not achieved lead auditor status, the internal witness audit for these auditors must be conducted with the auditor being temporarily assigned lead auditor role for the purpose of the internal witness audit.

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Section 2.7 – Certification Body Internal Witness Audits

Question:

Regarding the requirement in 2.7 f) does this requirement apply to audit team members? Do audit team members have to be internally witnessed as a Lead auditor or is this requirement for newly qualified auditors only? Our certification body has auditors who only audit as team members.

Answer:

This requirement is valid for all auditors, including newly qualified auditors and those auditors who choose to undertake only audit team member roles.

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Section 2.7 – Certification Body Internal Witness Audits

Question:

Section 2.2 states that during IATF office audits, witness audits, and additional monitoring activities, the problem-solving process must align with specific requirements in the IATF Certification Body Problem-Solving Manual. For internal witness audits, it seems to imply that aligning with the certification body's process would suffice.

However, does the statement in 2.7 s) mean that the internal witness audit problem-solving process is considered the same as the certification body's problem-solving process (i.e., it doesn't need to align with specific requirements in the IATF Certification Body Problem-Solving Manual)?"

Answer:

The statement in section 2.7 s) indicates that the problem-solving process used in internal witness audits is treated as part of the certification body's broader problem-solving process. Therefore, it does not need to align specifically with the requirements set out in the IATF Certification Body Problem-Solving Manual, provided it meets the internal standards and processes of the certification body.

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Section 2.8 – Appeals and Complaints

Question:

The certification body shall have a publicly accessible interface to allow a client or other interested parties to initiate a complaint or an appeal. Information about the process for initiating complaints and appeals shall be communicated to the client. What does this mean, exactly?

Answer:

A "publicly accessible interface" is a means, such as a postal address, telephone number, email address, application, portal, webpage or something similar, for the certification body's clients and other interested parties to submit appeals and complaints.

Information about the way in which a client can submit appeals or complaints must be communicated to the certification body's clients so that they are aware of the interface for appeal and complaint submission and understand how to access it.

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Section 2.9 – Management Review

Question:

Could you please clarify the note related to persons having the technical authority not permitted to conduct self evaluation on behalf of the certification body top management?

Answer:

This note means that certification body personnel who have responsibility for IATF 16949 certification activities cannot conduct management reviews in lieu of the top management of the certification body. Local and global management reviews must be conducted by top management.

Personnel who have responsibility for IATF 16949 certification activities may participate in the local or global management reviews to support the discussions, but they cannot conduct the management reviews.

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Section 2.9.1 – Management Review Items

Question:

Technical Reviewer performance has never been measured before. What are the expectations regarding this requirement? Evaluating fulfilment of timings and productivity? Quality of technical reviews? How shall this be done?

Answer:

2.9.1 p) requires the certification body to have a method for measuring the technical review and certification decision processes performance, including a measurement of technical reviewer performance.

The Rules purposely do not specify the way in which the certification body is to accomplish this task for the Technical Reviewers as the certification must determine how its processes' performance and effectiveness are measured.

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Section 2.9.2 – Management Review Records

Question:

What is the point of keeping integrated notes of management review meetings if the IATF management review is now mandatorily a separate event?

The note at the end of this clause indicates that meeting minutes can be integrated. We are having a difficult time understanding the purpose of this allowance if the IATF management review is now a mandatory separate event - are we not understanding the meeting requirement?

Answer:

The Rules do not state that the IATF 16949 management review is required to be conducted “separately”.

The Rules state that the IATF 16949 management review must be conducted “specific to IATF 16949”.

So, if the IATF 16949 management review is integrated into a corporate management review of multiple schemes, the IATF 16949-specific portion(s) of the management review records must be identifiable and meet all requirements stated in the Rules.

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Section 3.1 – Certification Body Legal Contract with the Client

Question:

Subsidiary companies have been included in the scope of certification as remote support locations. In general, when we contract with client, site and related remote support location including subsidiary companies are applied in one contract. Does this condition mean the same legal entity?

Answer:

This means that one legal contract for certification may cover one location or multiple locations of the same client.

The key here is that the party entering into the legal contract with the certification body has the authority to sign the certification contract on behalf of all locations covered by the contract.

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Section 3.1 – Certification Body Legal Contract with the Client

Question:

3.1 o) "relevant personally identifiable information (PII)". What it is PII?

Answer:

The term "relevant personally identifiable information (PII)" refers to any personal data connected to a specific individual that can be used to uncover their identity, e.g., name, address, email, id number, telephone number, etc.

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Section 3.1 – Certification Body Legal Contract with the Client

Question:

Any violation in the contract may result in certificate withdrawal. Suspension is required before certificate withdrawal? Or can the certificate be directly withdrawn?

Answer:

Any violation of provisions a) – l) of section 3.1 must be considered a material breach of contract and will lead to appropriate actions by the certification body, including, but not limited to, audit termination, audit cancellation, contract cancellation, or certification withdrawal.

In the situation where a provision of the contract is violated, it can lead straight to certification withdrawal without suspension.

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Section 3.1 – Certification Body Legal Contract with the Client

Question:

In case the transfer activities exceed the due date set in Note 1 of clause 3.1 j), does the certification have to be withdrawn before the completion of the transfer?

Answer:

If the transfer activities are being conducted by the new certification body after a recertification audit exceed the 120-day timing set in Note 1 of clause 3.1j), the old certificate will expire with no need for cancelation or withdrawal.

If the transfer audit is conducted during the surveillance audit cycle and the activities exceed the 210-day timing set in Note 1 of clause 3.1 j), the certificate with the previous certification body remains (no automatic cancelation) and the previous certification body is expected to cancel it manually.

The IATF Database doesn't inform the previous certification body; ideally, they know because the client tells them, or they can rely on internal system checks / controls. The IATF Database only cancels the certificate with the previous certification body when the new certification body issues the new certificate after having entered the transfer audit.

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Section 3.1 – Certification Body Legal Contract with the Client

Question:

In cases where the certification body finds any quality management system-related consultant participating in the audit and they leave immediately at the certification body's request, does this audit have to be terminated?

Answer:

If consultants are found participating in the audit (either directly or indirectly), the audit must be terminated immediately, regardless if the consultant agrees to leave.

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Section 3.1 – Certification Body Legal Contract with the Client

Question:

Letter of conformance (LoC) is missing in the note under section 3.1 g)

Should the client also be able to duplicate the IATF 16949 LoC which is bearing the IATF logo for marketing and advertising purposes (same as with a certificate)?

Answer:

Yes, clients may also duplicate the IATF 16949 Letter of Conformance for marketing and advertising purposes.

The Note in Rules 6th Edition states the client may duplicate the IATF 16949 certificate bearing the IATF logo for marketing and advertising purposes. This note may also be applied to Letters of Conformance.

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Section 3.2 – Notice of Significant Changes by a Client

Question:

In the changes communicated by client, a special audit is mandatory or at certification body's discretion based on the change?

Answer:

Rules 6th Edition states the certification body must take appropriate actions based on the changes communicated by the client, including conducting special audits. A special audit is not mandatory, but a special audit may be the appropriate action to be taken.

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Section 3.2 – Notice of Significant Changes by a Client

Question:

1) Does the client need to notify the certification body in case part of the process will be relocated to other address or outsourced?

2) Is the notification only applied to the case where the relocation impacts the scope of certification?

Answer:

1) Yes, the client must communicate any relocation of some or all of their manufacturing process(es) or support activities to the certification body so the certification body can determine the appropriate actions to be taken.

2) No, it applies to any relocation or significant change.

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Section 4.0 – Personnel Resource Requirements Management

Question:

What is the difference between auditor candidates and auditors?

Answer:

“Auditor candidates” are applicants applying to be accepted into a new auditor training course or are in the auditor qualification process and have not yet successfully completed Phase 1 of the Auditor Qualification Process in the Auditor Development Platform (ADP).

“Auditors” have been accepted into a new auditor training course, attended the training and are qualified as an IATF Auditor through the successful completion of Phase 1 of the Auditor Qualification Process in the ADP.

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Section 4.0 – Personnel Resource Requirements Management

Question:

"The certification body shall perform specific calibration activities for the roles…." In this sentence, what does "calibration activities" mean?

Answer:

“Calibration activities” means training and development of people carrying out the roles to ensure consistency of evaluations based on the IATF Rules 6th Edition requirements and the certification body’s internal processes.

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Section 4.1 – Technical Reviewer Approval Criteria

Question:

Is there a maximum number of technical reviewers that a certification body can have?

Answer:

Rules 6th Edition makes no restrictions on the quantity of technical reviewers permitted per certification body.

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Section 4.1 – Technical Reviewer Approval Criteria

Question:

1) What is a permanent employee? What are the conditions?

2) Could a free-lance auditor working for a single employer become a technical reviewer?

Answer:

1) Rules 6th Edition, section 10.0 defines "permanent employees" as "those individuals who are employees or contracted employees of a **single certification body**".

2) Rules 6th Edition, section 10.0 defines "contracted employees" as "a person who has a contract through an employment agency or works as an 'independent contractor' (free-lanced) for an organization under supervision of the organization." A free-lanced auditor is considered a contracted employee under Rules 6th Edition, regardless of the length of the term of the contract.

A "permanent employee" may be a full- or part-time employee.

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Section 4.1 – Technical Reviewer Approval Criteria

Question:

Can an audit conducted as the team leader for a standalone remote support location (SA-RSL) audit be counted as audit team leader experience? (4.1 e)

Answer:

Yes, provided the experience as an audit team leader has been in primarily manufacturing site audits with some experience as an audit team leader for SA-RSLs audits.

This answer also applies to the requirement in Rules 6th Edition, section 4.1 d).

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Section 4.1 – Technical Reviewer Approval Criteria

Question:

Can a current Veto Power who passes the Rules 6th Edition training and quiz continue their qualification as a Technical Reviewer? Or are there other procedures or processes required to be followed?

Answer:

Existing Veto Powers who pass the Rules 6th training and quiz modules in the ADP will be qualified as Technical Reviewers. There are no other procedures or processes required for this conversion.

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Section 4.1 – Technical Reviewer Approval Criteria

Question:

If an auditor has major nonconformities raised during an IATF witness audit within 24 months, s/he cannot be qualified as a technical reviewer?

What does "auditor-related major nonconformities … problem-solving process" mean?

Answer:

Before applying for approval as a Technical Reviewer, the applicant cannot have any auditor-related Major NCs issued from IATF Witness Audits within the previous 24-month period.

“Auditor-related NC” means that the certification body’s problem-solving process confirmed a well-established system and process exists with adequate resources and trained personnel; however, the NC raised during the Witness Audit is attributable to an isolated incident with the auditor who was observed. (Reference IATF CB Problem-Solving Manual)

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Section 4.1 – Technical Reviewer Approval Criteria

Question:

What does 4.1 f) mean?

Answer:

The language in 4.1 f) requires the certification body to review and only nominate auditors for the Technical Reviewer role whose IATF 16949 audit NC statistics (average number of nonconformities per audit, ratio of major nonconformities to total nonconformities issued, and the ratio of audits with zero nonconformities to total audits conducted) meet or exceed the nominating certification body's global NC statistics or the IATF global NC statistics.

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Section 4.1 – Technical Reviewer Approval Criteria

Question:

1) Does “30 IATF audits” in 4.1 d) mean in total from the start of an audit career or does it mean 30 IATF audits with current certification body?

2) Does “8 IATF 16949 audits as an audit team leader within the last 12 months” in 4.1 e) start on 1 January 2025?

Answer:

1) This means the candidate must have completed at least 30 IATF 16949 audits for any sponsoring certification body at the time of the application being submitted to the relevant Oversight office.

2) This means the candidate must have completed at least 8 IATF 16949 audits for the nominating certification body as an audit team leader at the time of the application being submitted to the relevant Oversight office.

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Section 4.1.1 – Maintaining Technical Reviewer Approval

Question:

Regarding the minimum of 25 Technical Reviews - do Steps 1 and 2 count as one technical review or two technical reviews?

Answer:

To maintain technical reviewer approval, Steps 1 and 2 count as separate technical reviews.

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Section 4.1.1 – Maintaining Technical Reviewer Approval

Question:

During certification body internal system audits in regional offices, the internal system auditor samples and audits many audit pack reviews, just like a technical reviewer would. Will these also count towards the minimum of 25 technical reviews to maintain approval?

Answer:

No, sampling files as part of an internal system audit would not count as technical reviews.

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Section 4.1.1 – Maintaining Technical Reviewer Approval

Question:

At what frequency should the review of the criteria in 4.1.1 a) - e) criteria be carried out?

Answer:

The responsibility for maintaining technical reviewer approval is shared between the technical reviewer and the certification body. Points a-c) are ongoing, event-driven criteria where if something changes, the approval is revoked. Points d-e) refer to the calendar year.

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Section 4.3 – Auditor Qualification Process

Question:

If an auditor candidate achieves above 50% in all ten competency areas but has not yet passed, they will achieve an interim pass ('yellow') result and will be eligible to conduct audits until the end of their retake eligibility window (12 months from the initial assessment). Upon passing all retakes, this interim pass will be upgraded to a full pass ('green'), according to CB Communiqué 2021-010.

In a scenario where an auditor, holding a 3-AUD status (with all minimum competencies marked as yellow), receives a red result in the retake exam during the 12-month window, is it assumed that the auditor would retain the highest result achieved? (i.e., keep the "yellow" status)

Answer:

Yes, ADP scores can only improve, so a 3-AUD auditor cannot end up as a 2-AUD auditor.

If a 3-AUD auditor is not able to convert their "yellows" to "greens" to achieve 4-AUD, they will be deactivated on their expiry date, but they cannot go from yellow to red.

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Section 4.4 – Maintaining Auditor Qualification and Approval

Question:

How do we communicate to the relevant Oversight office the termination of an auditor's sponsorship within 20 days for fraudulent or unethical behavior?

Answer:

If the certification body decides to terminate sponsorship of an auditor due to fraudulent activity or unethical behavior, the CB must notify its Oversight office within 20 days. The way in which the notification occurs is not defined in the Rules.

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Section 4.4 – Maintaining Auditor Qualification and Approval

Question:

Regarding item e) 2) “timeliness of NC management”, are certification bodies expected to monitor the auditor's performance for the 15–30-day review? This is completed by email between auditor and the client. The same question applies for acceptance at the 60–90-day review requirement in section 5.11.

Answer:

Yes, the IATF expects the certification bodies to monitor the auditor’s performance for the 15-30-day reviews for Major NC’s or the 60–90-day review for all nonconformities.

Additionally, the requirement states, “timeliness of nonconformity management-related information provided to the technical reviewer.”

The certification body is expected to determine an internal measurement or target for the submission of the complete NC management records to the technical reviewer to conduct Step 2 of the Technical Review and make a certification decision within the maximum of 120 calendar days from the audit closing meeting date or before the certification expires.

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Section 4.5 – Internal Witness Auditor Approval Criteria

Question:

Is the requirement for 15% of the auditors max as internal witness auditors per region? Or is it applied to the certification body as a whole? For instance, in the UK there are 15 auditors and 6 are internal witness auditors. Is this permitted?

Answer:

The requirement states that no more than 15% of ALL sponsored IATF auditors may be nominated as internal witness auditors.

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Section 4.5 – Internal Witness Auditor Approval Criteria

Question:

If no more than 15% of all IATF 16949 auditors are designated as internal witness auditors, then our certification body would only have one internal witness auditor. How should the internal audit for this auditor be conducted? It seems that at least two auditors would be necessary.

Answer:

This would be handled via a waiver to the relevant Oversight office.

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Section 4.5.1 – Maintaining Internal Witness Auditor Approval

Question:

Are audits conducted as a team member included in the minimum 8 audits to maintain internal witness auditor approval? As a team member, you are still part of the audit process. For people in management positions who are the best qualified for conducting internal witness audits, we will not be able to be approved as an internal witness auditor.

Answer:

No, the minimum of 8 audits counted must be the role of an audit team leader, not an audit team member.

Audits conducted as a team leader and internal witness audits witnessing the role of lead auditor count toward the 8 minimum audits as a team leader.

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Section 4.5.1 – Maintaining Internal Witness Auditor Approval

Question:

Is it acceptable if an internal witness auditor is not performing any internal witness audits to maintain his qualification as internal witness auditor?

Answer:

Yes. There is no minimum number of internal witness audits required to be conducted per year to maintain the privilege.

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Section 4.6 – Internal System Auditor Approval Criteria

Question:

Regarding the requirement in 4.6 c), "worked at least 12 months”. Can this be as a contract auditor?

Answer:

Yes.

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Section 4.6 – Internal System Auditor Approval Criteria

Question:

In 4.6.1 c), it is not clear if the term "management system" describes the type of certification activity of the sector or if it refers to the management system used by the certification body for the certification activity of the sector (and in that case, only people who have worked 12 months in that team to maintain and develop the management system of the certification body would be eligible to become an internal system auditor).

Answer:

Whilst a good understanding of the certification body's management system is important, this requirement is not related to the certification body's management system; the requirement is related to the nominee working in a management system sector for the certification body (ISO 9001, ISO 14001, IATF 16949, etc....).

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Section 4.6.1 – Maintaining Internal System Auditor Approval

Question:

Does the one internal system audit in a 24-month period have to be an IATF internal system audit or do internal system audits for other schemes count?

Answer:

This requirement means that the internal system auditor must conduct an IATF 16949 internal system audit in a 24-month period. Other scheme internal system audits do not count toward maintaining the internal system auditor privilege.

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Section 4.7 – IATF Database Specialist Competence Criteria

Question:

To demonstrate the competency for the IATF Database entry and accuracy check personnel, would IATF provide access to the Rules 6th training, etc.?

Answer:

There is an IATF Database user manual, with instructions for what needs to be entered. Additionally, Oversight offices can provide support to Certification Bodies, if required.

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Section 5.1.1 – Audit Cycle

Question:

According to Rules 6th, the 6-month or 9-month cycle can no longer be applied. How should the transition from 6- or 9- month to 12-month surveillance cycle be handled?

Answer:

If a recertification audit is conducted between July and December of 2024, the certification body is encouraged to change the surveillance audit interval to a 12-month interval.

All recertification and initial audits in 2025 or later require a 12-month surveillance interval.

It is at the certification body's discretion to change the surveillance interval to a 12-month interval at the next surveillance audit.

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Section 5.1.1 – Audit Cycle

Question:

In case client is transferred to another certification body but the client failed to notify the certification body, can the certification body cancel the certificate if the surveillance time is exceeded?

Answer:

If the client fails to notify the certification body that they are transferring to another certification body, the previous certification body shall cancel the client's certificate when the surveillance audit is not conducted within the allowable timing (+3 months).

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Section 5.1.1 – Audit Cycle

Question:

If a surveillance audit cannot be conducted within the + 3 months allowable timing due to the certification body not having auditor resources, will the Oversight office allow waivers as this will not be the clients fault?

Answer:

There is an expectation that the certification body has appropriate resources to support the number of audits required; however, when necessary, a waiver may be submitted to the relevant Oversight office and the relevant Oversight office will consider on a case-by-case basis.

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Section 5.2 – Determining the Audit Duration

Question:

Has the requirement that an auditor may not perform more than 5.0 man-days alone been cancelled?

Answer:

The Rules 5th, clause 5.2 o) stated the certification body shall appoint a team of two (2) auditors minimum if the total audit day calculation exceeds five (5) audit days. This requirement did not carry over into Rules 6th Edition. It was replaced with Rules 6th, clause 5.2 i) where more than one (1) auditor is appointed, each auditor shall perform a minimum of one audit day.

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Section 5.2 – Determining the Audit Duration

Question:

If there is additional audit time is this time entered in the IATF Database?

Answer:

Yes. Additional audit time (e.g., verification of previous minor nonconformities, translation time, scope changes, investigation of IATF OEM quality and delivery requirements, etc.) will be entered into the IATF Database in the future for each audit, as well as, audit planning time, per Rules 5.7. The audit plan will need to show the total amount of additional time, per Rules 5.7.2 i) (Audit plan).

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Section 5.2 – Determining the Audit Duration

Question:

If a standalone RSL exists, does the 1.5-man day include standalone RSL man-days?

Answer:

Rules 6th 5.2 g) states after applying all permitted reductions and rounding, audits shall be no less than one and one-half (1.5) audit days at manufacturing sites. The 1.5 audit days is only applicable to manufacturing site and not to SA-RSLs.

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Section 5.2 – Determining the Audit Duration

Question:

If there is only one (1) furnace, but the furnace makes all products including non-automotive, is it possible to apply “portion of site” to this furnace?

Answer:

No. Section 5.2 h) 1) states if the equipment is shared between automotive and non-automotive, then the portion of site cannot be applied.

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Section 5.2 – Determining the Audit Duration

Question:

Is it permissible for people in this workshop to work in non-automotive production workshops?

Answer:

Section 5.2 h) 1) ii), uses the term "primarily dedicated" to working on the automotive shop floor which means these employees are qualified to work in the automotive shop floor but can work in other non-automotive shop floor areas when there is no automotive production running. However, non-automotive personnel cannot work in the automotive area.

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Section 5.2 – Determining the Audit Duration

Question:

Clause 5.2 h) 2):

1) How to share internally approved waivers with the Oversight office?

2) What is required to be entered into the IATF Database?

Answer:

1) The certification body is required to send their relevant Oversight office the certification body internally approved “Application for Audit Day Reduction” form. Each Oversight office will provide their reporting certification bodies with instructions on how they want to receive the documentation.

2) The certification body would select the field “Automotive Separation” (yes/no) in the IATF Database. No waiver is required to be entered to the IATF Database.

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Section 5.2 – Determining the Audit Duration

Question:

Clause 5.2 l):

1) Can 1.5 audit day (i.e., 12 hours) be divided into two calendar days with 6-hours per day?

2) If 4 hours of additional audit time is needed, can 2 hours of additional audit time be added in each day?

Answer:

1) Yes, this would be permitted. The NOTE under 5.2 l) says an "audit day" may be distributed between calendar days. The certification body auditor can schedule day 1 as 6-hours and day 2 as 6-hours even if there is no additional audit time required.

2) Yes, 2-hours of additional audit time can be added to a single calendar day, if the audit duration (audit day + additional audit time) does not exceed ten (10) hours. The auditor can schedule 6-hour audit day + 2 hours of additional audit time = 8 hours.

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Section 5.2 – Determining the Audit Duration

Question:

Can the certification body schedule an audit day to be 10 hours (not 8 hours) if there is no additional audit-time?

Answer:

No. A normal audit day is eight (8) hours, per Rules 5.2 l). The only time the eight (8) hour audit day can be exceeded is if additional audit time is required.

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Section 5.2 – Determining the Audit Duration

Question:

Clause 5.2 m), states maximum audit day is 10 hours. Is this saying we can no longer program longer than eight (8) hours per working day to cover third shift work?

Answer:

The audit duration (audit day + additional audit time) shall not exceed ten (10) hours per calendar day. Certification body auditors can no longer program up to 12 hours per calendar day to cover 3rd shift work. It must be covered in the regular 8-hour audit day. Auditor may need to adjust their audit plan accordingly.

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Section 5.2 – Determining the Audit Duration

Question:

Clause 5.2 m), if there are six (6) previous minor NCs and only one auditor, what is the audit duration for a two (2) man day audit?

Answer:

The audit duration is the minimum audit days + additional audit time. The audit duration would be 16 hours (2.0 audit days) + 6 hours for NC verification (6 minor NCs x 1 hour per NC) = 22 hours maximum.

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Section 5.2 – Determining the Audit Duration

Question:

Is the minimum 30% of audit days to audit the manufacturing floor calculated BEFORE or AFTER the permitted reduction and additional time?

Answer:

The 30% minimum audit days is calculated AFTER permitted reductions and rounding up are applied. The 30% is not calculated on the additional audit time.

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Section 5.2 – Determining the Audit Duration

Question:

Should all additional audit time be entered as one line item on the audit plan?

Answer:

No. It cannot be entered as one line item in the audit plan.

Rules 5.7.2 i) requires … the additional audit time is specified in hours, per calendar day, per auditor.

Rules 5.7.2 j) also requires…..the total additional audit time per auditor and for the entire audit to be specific in the audit plan.

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Section 5.2 – Determining the Audit Duration

Question:

Clause 5.2 p) did not clearly explain how much additional audit time to plan for scope change. Can the scope change be done using a special audit?

Answer:

Scope change investigations can be done through a special audit in between two regular audits or it can be done during the next regular audit. Rules 7.2 g) (Special audits) states a special audit can be conducted to verify the client's quality management system after significant changes.

The IATF did not define the specific amount of audit duration required for scope change investigation, as it is determined on a case-by-case basis. This allows the certification bodies flexibility to determine the amount of time to investigate the impact of the certification scope change on the capability of the quality management system.

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Section 5.2 – Determining the Audit Duration

Question:

Clause 5.2 p):

1) If a product is removed from the certification scope, is additional audit time required?

2) If the remote support function changes (i.e., removal/addition), is additional audit time required?

Answer:

Additional audit time may or may not be required depending on the change and the impact of the change on the capability of the quality management system to continue to fulfil the requirements for IATF 16949 certification.

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Section 5.2 – Determining the Audit Duration

Question:

How do you calculate additional audit time if a technical expert is used?

Answer:

The certification body is required to determine the amount of additional audit time needed where a technical expert is used. It is difficult to specify the amount of time as it must be determined on a case-by-case basis.

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Section 5.2 – Determining the Audit Duration

Question:

Is the minimum 1.5 audit days including additional time or excluding additional time?

Answer:

Section 5.2 g), excludes additional audit time. Additional audit time is in addition to the audit days.

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Section 5.2 – Determining the Audit Duration

Question:

If a manufacturing process has a few auditees not be fluent in language in which the audit will be conducted and many manufacturing auditees who are fluent, should the certification body add 20% additional audit time?

Answer:

Yes. The certification body is required to add 20% of additional audit time to the manufacturing process where potential auditees may be interviewed and are not fluent in the language in which the audit will be conducted.

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Section 5.2 – Determining the Audit Duration

Question:

Is the manufacturing shop floor limited to manufacturing activities? Or can it include other activities such as equipment maintenance, product inspection, storage, etc.?

Answer:

Section 10 of the Rules includes a definition of manufacturing shop floor. It is defined as the area(s) of the client's manufacturing site where manufacturing processes occur, distinct from where administrative work is carried out. The following are considered manufacturing shop floor activities: manufacturing of products, including shift changeover, maintenance activities performed by operators in the manufacturing process and any activity where production parts or materials are staged, packaged, shipped, received, inspected and tested.

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Section 5.2 – Determining the Audit Duration

Question:

Clause 5.2 o) states where the verification of the effective implementation of systemic corrective actions for minor NCs is required it shall be planned 0.5 - 1.0 hour each as "additional audit time“. This should be planned during next year's regular visit? Is there any duration for NC verification audit planned within 90 days from the closing meeting date of the audit?

Answer:

Minor nonconformance verification is at the discretion of the certification body to do it at the next regular audit or at a special audit within 90 calendar days of the audit closing meeting date, per 5.11.5.

If a minor nonconformance is verified during a special audit (e.g., along with major NCs), then the certification body shall use the .5 – 1.0 hours per minor NC when determining the audit days for the special audit, per 5.2.2.

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Section 5.2 – Determining the Audit Duration

Question:

Clause 5.2 q) states when the audited client location does not meet the IATF OEM quality or delivery targets…the certification body shall add “additional audit time”. Will the other IATF OEMs publish details on what is considered poor performance like Ford, GM, Stellantis, etc.?

Answer:

If the IATF OEM does not define targets to determine acceptable or poor quality and delivery performance, then no additional audit time is required.

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Section 5.2 – Determining the Audit Duration

Question:

Clause 5.2 q) states when the audited client location does not meet the IATF OEM quality or delivery targets…the certification body shall add “additional audit time”. If a delivery issue was related to a warehouse (i.e., SA-RSL), can a special audit can be planned to warehouse only?

Answer:

Yes, if the performance issue can be fully investigated at the warehouse. Rules section 7.2 b) allows for special audits to verify the implemented systemic corrective actions are producing improvement in the achievement of customer performance targets.

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Section 5.2 – Determining the Audit Duration

Question:

Will a common calculator be developed by the IATF?

Answer:

It is not foreseen now, but we can raise this as a potential future IATF strategic initiative.

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Section 5.2.1 – Determining Audit Duration for Stage 1

Question:

1) For a corporate scheme, is the on-site audit duration for Stage 1 readiness assessment (Part 1 and Part 2) between 2 to 5 days at the central location? (1.5 to 3 days + 0.5 to 2 days)

2) For the remaining supported manufacturing sites, is the Stage 1 readiness assessment conducted for 0.5 to 3 days?

3) Is remote assessment possible for Stage 1 readiness assessment at the central location only?

Answer:

1) Yes, it is 2 to 5 days. The central location stage 1 readiness assessment is between .5 days - 2.0 days, even if the central location is a portion of a manufacturing site, and a stage 1 readiness assessment of manufacturing site in the corporate scheme is 1.5 - 3.0 days.

2) No, each manufacturing site must have a stage 1 readiness assessment of between 1.5 - 3.0 days.

3) Yes. 5.2.1 c) states the stage 1 at the central location can be onsite or remote.

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Section 5.2.2 – Determining the Audit Duration for Special Audits

Question:

What is minimum audit day and/or additional audit time for a special audit? Is it necessary to round up such as 0.5 audit days?

Answer:

There is no minimum audit days for special audits. The certification body shall determine the appropriate audit duration (audit days + additional audit time) to conduct an effective audit.

If additional audit time is needed, no rounding up to the nearest .5 audit day is required. The rounding up (in 5.2 f) is not applicable to special audits.

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Section 5.2.2 – Determining the Audit Duration for Special Audits

Question:

If we plan for 1 major = 3 hours, and the certification body auditor can verify the effective implementation in 2 hours because the client is well prepared, is this a nonconforming situation from the relevant Oversight office witness audit or office assessment?

Answer:

Rules 5.2.2 states each major nonconformity shall have between 1 and 3 hours planned and executed.

No, as long as the auditor executes between 1-3 hours to verify the major nonconformance and the verification activities meet the requirements in 5.11.4, no nonconformance should be issued.

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Section 5.2.3 – Determining the Audit Duration for SA-RSLs

Question:

What is minimum audit MD for standalone remote support location (SA-RSL)? If the SA-RSL has one (1) process can the certification body allocate two (2) hours (.25) audit day?

Answer:

There is no minimum audit days for SA-RSL when using the allocation method, so an audit of one process could be scheduled for two (2) hours or 0.25 audit days. It is not only about the process; the certification body should also consider other factors such as:

1) Number of supported manufacturing sites
2) Complexity, type and extent of the support activities and interactions with support manufacturing sites
3) Internal and external performance issues and process risks
4) Customer risks associate with the support activities
5) Frequency, size and type of audit samples needed to draw a representative audit conclusion
6) Any recent or ongoing changes

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Section 5.2.3 – Determining the Audit Duration for SA-RSLs

Question:

Is the ratio calculation method for stand-alone remote support locations (SA-RSL), as demonstrated in Annex 1, a must?

Answer:

Rules 5.2.3 allows for two different methods of calculating the minimum audit days for SA-RSLs:

1) Apportionment method, as show in Annex 1 Examples, OR
2) Calculate the audit days separately for each SA-RSL and manufacturing site based on the number of employees at each location, as per Table 5.2.

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Section 5.3 – Determining the Audit Duration – Corporate Scheme

Question:

Where manufacturing site A is also the headquarters (HQ) for a corporate scheme and supports manufacturing site B and C, can the audit days from manufacturing site A be re-distributed to the other manufacturing sites?

Answer:

No. Rules 5.3 states the calculated total minimum audit days shall only be distributed from the manufacturing site(s) to the standalone remote support location(s). Manufacturing site A is considered a remote support location, not a standalone remote support location. Apportioning of support function employees located in a manufacturing site that provides support to another manufacturing site is NOT permitted when calculating minimum audit days, per Rules 5.2.3.

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Section 5.4 – Determining the Audit Duration – Permitted Reductions

Question:

Rules 5.4 states that the maximum possible audit day reduction is 30% when combining reductions for 5.4 a) - e). Does this mean if an organization who wants to upgrade from ISO 9001 to IATF 16949 and is in corporate scheme with no design responsibility, they cannot get a benefit of 30% upgrading discount at Stage 2?

Answer:

Correct, the maximum total reductions that can be applied is 30%; used to be 50% under Rules 5th Edition.

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Section 5.4 – Determining the Audit Duration – Permitted Reductions

Question:

In 5.4.a) states that a 15% reduction can be applied for a non-product design organization. What evidence is required?

Answer:

Definition of non-product design responsibility is in section 10.0. Rules 6.1.1 f) (Application for certification) states that the applicant shall provide a written declaration of product design or non-product design responsibility. The evidence required is:

- For design responsibility, the applicant should be able to show product design process(es) exist in their quality management system and contracts with existing customers stating the applicant is design responsible.
- For non-product design responsibility, the applicant should be able to show contracts with existing customers stating they are not design responsible. It may not be feasible to show every contract in cases where the client has 100 customers.

This shall be verified during Stage 1 readiness assessment and continuously validate at each regular audit and may re-determine the client's design responsibility.

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Section 5.4 – Determining the Audit Duration – Permitted Reductions

Question:

What is the permitted reduction percentage for upgrading from a Letter of Conformance? Clause 5.4 d) stated a 30% reduction, but the Annex 1 Examples 3 & 4 show 15%.

Answer:

Normal permitted reduction for upgrade from LOC is 30% applied to the Stage 2 audit only.

However, when combining reductions, the maximum is 30%.

This explains why in Annex 1, Example 3, only 15% reduction applied to stage 2 for upgrade from LOC.

Example 3

1 single manufacturing site with 1 extended manufacturing site (main site: 550 employees, EMS: 40 employees)
1 standalone remote support location (25 employees)
2 permitted reductions (upgrade from a letter of conformance and no design responsibility)

Total number of employees = 615 (550 + 40 + 25)

Using the apportionment method

Site	Year	Type of audit	Current number of employees	Minimum audit day requirement, Rules Table 5.2	Upgrade from LOC	Non-design responsible reduction	Calculated minimum audit days	Minimum audit day requirement (rounded up to nearest 1/2 day)	Distribution of minimum audit days from MFG site to SA-RSL	Minimum audit days at MFG site after distribution	Minimum audit days at SA-RSL
1 (main + EMS)	0	Initial Stage 2	615	11.0	^15%	15%	(11.0 days * 0.70) = 7.7	8.0	8.0 days - 1.0 day	7.0	1.0
1 (main + EMS)	1	Surveillance	615	5.5		15%	(5.5 days * 0.85) = 4.675	5.0	See Note 3		
1 (main + EMS)	2	Surveillance	615	5.5		15%	(5.5 days * 0.85) = 4.675	5.0	5.0 days - 0.5 day	4.5	0.5
1 (main + EMS)	3	Recertification	615	7.0		15%	(7.0 days * 0.85) = 5.95	6.0	6.0 days - 0.5 day	5.5	0.5

Note 1: Assumes no changes over the 3-year audit cycle to number of employees, certification scope, etc.

^Note 2: Rules 5.4 states that when combining reductions, the maximum possible audit day reduction is thirty percent (30%). In this case, the upgrade from a Letter of Conformance (LOC) to certification can only be a 15% reduction to be able to combine the reductions and meet the 30% maximum allowed.

Note 3: Non-product design functions shall be audited at least every two years (section 5.5.1. c)).

It is the responsibility of the certification body to determine the distribution of the minimum audit days each year from the manufacturing sites to the standalone remote support locations to ensure the effectiveness of the audits.

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Section 5.5 – Support Functions

Question:

What is meant by “relevant client locations”?

Answer:

Relevant client locations means that anywhere the process interface and interactions exist. One would not audit a process or its interface at a client location if the process interaction did not occur at said location.

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Section 5.5 – Support Functions

Question:

Is it mandatory to audit an indirect remote support location (a.k.a., “Remote of a Remote”) or is it at the certification body’s discretion?

If it is mandatory, is the scope of the “Remote of Remote” on the manufacturing site certificate through the stand-alone remote location?

Answer:

According to the language in Rules 6th, it is mandatory to audit an indirect remote support location if it exits and provides support to a standalone RSL. The way in which the audit is conducted (onsite or remotely during the audit of the SA-RSL) is at the certification body’s discretion.

If the certification body conducts an onsite audit of the indirect support location, the time would be in addition to the minimum audit days.

The last note in section 5.5 clearly describes that an indirect support location is not included in a manufacturing site's certification scope and therefore would not be listed on the manufacturing site’s certificate.

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Section 5.5 – Support Functions

Question:

If the support is identified during a manufacturing site audit, is it necessary to put it on the certificate or is it appropriate to wait for the next remote support location audit to include it on the certificate?

Answer:

If the remote support location (where the newly identified support function resides) is being audited on an ongoing basis, (i.e., already included in a valid IATF 16949 certificate) the certification body must audit its interactions and interfaces during the current audit, document it in the audit record, add it to the IATF DB and the manufacturing site's certificate.

If the remote support function identified resides in a location that has not yet been audited, an initial audit would be required at the location before it can be added to the IATF Database and the manufacturing site's certificate.

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Section 5.5 – Support Functions

Question:

Can indirect support locations be clustered around a “main” indirect support location with the “main” indirect support location being the only location interacting with one or more manufacturing sites?

Answer:

There is no formal answer to this question.

The certification body must determine whether the inclusion of the indirect support locations, together or separately, is required to cover all the applicable requirements from IATF 16949 standard aligned with the certification scope.

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Section 5.5 – Support Functions

Question:

1) Should the number of audit days be calculated including the number of people at the indirect support location?
2) Should an on-site or remote audit be conducted according to Annex 2 (whether remote audit is possible or not) for indirect support locations?
3) Should an on-site or remote audit be conducted independently for indirect support locations?
4) When conducting an audit at a supporting business site, can personnel from the indirect support location participate in the audit remotely?

Answer:

1) The indirect support location employees may be considered in the audit duration calculation; however, it is not required by the Rules.
2) Annex 2 is not applicable to indirect support locations.
3) This is not the intent of the requirement; processes are audited as a set of interrelated activities, which means that the indirect remote support location is intended to be audited with the SA-RSL to which it provides support. The certification body should not audit an indirect support location independently from the SA-RSL.
4) Employees from the indirect support location can be brought into the SA-RSL audit virtually to examine the process activities, interfaces and interactions.

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Section 5.5 – Support Functions

Question:

What is the minimum audit duration at a standalone remote location (SA-RSL)? How does IATF consider this when the remote location only provides one support function, i.e., sales, to manufacturing sites?

Answer:

There are no minimum audit days required for an SA-RSL if the “allocation” method is used to determine the minimum audit days (5.2.3).

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Section 5.5.1 – Audit Program Requirements for Support Functions

Question:

Does a failure to conduct audits of the standalone remote support location (SA-RSL) require manufacturing site certificate(s) to be suspended or withdrawn?

Answer:

If the surveillance timing for a SA-RSL is exceeded, Rules 5.5.1 g) states the SA-RSL shall undergo an initial audit.

If there is no evidence of audits being conducted at the SA-RSL according to the allowable timing stated in the Rules, the certification body would not be able to make a positive certification decision for the manufacturing site it supports.

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Section 5.5.1 – Audit Program Requirements for Support Functions

Question:

It appears that the statements in clauses 5.5.1 a) and 5.5.1 f) contradict each other.

Answer:

5.5.1 a) applies to support functions that reside in a manufacturing site.

5.5.1 f) applies to support functions that reside at a standalone remote support location (SA-RSL).

They are different requirements for different situations.

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Section 5.5.1 – Audit Program Requirements for Support Functions

Question:

How should existing standalone remote support locations (SA-RSLs) be treated relative to audit planning?

Answer:

Existing SA-RSLs will continue with an ongoing sequence of surveillance audits starting 1 January 2025, using the closing meeting date of the most recent recertification, transfer or initial audit to establish the ongoing surveillance audit timing. The certification body is not expected to conduct initial audits for existing SA-RSLs.

New SA-RSLs, however, must start with an initial audit or transfer audit (5.5.1c)), with the ongoing surveillance audit due date being established from the closing meeting date of the initial or transfer audit (5.5.1 d)).

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Section 5.5.2 – Auditing Process Interfaces at Remote Support Locations

Question:

Is it mandatory to sample all manufacturing sites that receive support and the related activities in the audit cycle? What if the number of supported sites is three or less?

Answer:

The expectation is that different supported site are sampled over the ongoing sequence of audits until all supported sites are sampled.

If all supported manufacturing sites can be sampled in the cycle, for instance if there are only two supported sites, then yes, they should both be included in the sample.

If all supported manufacturing sites are not able to be sampled in the cycle, for instance if there are a large quantity of supported manufacturing sites, then no, they do not all have to be sampled in the cycle; however, they must be sampled at a reasonable frequency in subsequent audit cycles to ensure the process interfaces and interactions are effective.

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Section 5.5.2 – Auditing Process Interfaces at Remote Support Locations

Question:

Do all supported manufacturing sites have to be sampled at a Stage-2 and/or newly added manufacturing supported sites when auditing process interfaces?

Answer:

No, all supported sites do not have to be sampled at the Stage 2.

All processes must be audited in a stage 2 audit, and sampling of supported manufacturing sites is permitted during a Stage 2 to accomplish this task.

Taking a sample of supported manufacturing sites during an standalone remote support location (SA-RSL) audit should provide an indication of the process interface implementation and effectiveness, and a conclusion drawn that the process interfaces with other supported sites that were not sampled at that time are effectively implemented.

This is the point of sampling, otherwise the Rules would require 100% of every process interaction and interface, no matter where they are carried out, to be audited in a Stage 2. This is not reasonable or practical.

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Section 5.5.3 – Reviewing Remote Support Location Audit Records

Question:

If it is the initial certification and the SA-RSL audit report identifies a different support function between the SA-RSL and the manufacturing site, how does the certificate describe the remote support function?

Answer:

If the SA-RSL audit report identifies a different support function and that function's process interfaces and interactions cannot be verified at the supported site's audit, that support function cannot be listed on the site's certificate.

Rules 5.13 g) states that support locations can only be included on the manufacturing site's certificate after the interfaces and interactions with the remote support locations and the relevant support functions have been verified during the audit at the manufacturing site.

If the support function is named differently in the SA-RSL CARA report than the way in which the manufacturing site names it, for instance, if the SA-RSL calls the support function "laboratory" and the manufacturing site calls the support function "testing", the certification body must resolve the difference with the client before the support function can be listed on the manufacturing site's certificate.

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Section 5.5.3 – Reviewing Remote Support Location Audit Records

Question:

What is meant by a “relevant support function” ?

Answer:

“Relevant” is intended to mean that the process named in the CARA report can be linked to the appropriate support functions.

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Section 5.5.3 – Reviewing Remote Support Location Audit Records

Question:

"Note: If a support relationship between the remote support location and the manufacturing site being audited has been newly established, the certification body that audits the remote support location is required to audit the interfaces in relation to the supported manufacturing site at the next planned audit (see section 5.5)"

Does this apply to a new site as well?

Answer:

Yes.

The referenced section (5.5) in the note states, "Process interfaces and their interactions between manufacturing sites and remote support locations shall be audited from all relevant client locations. Any new process interface and its interactions shall be audited at the next audit."

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Section 5.5.3 – Reviewing Remote Support Location Audit Records

Question:

Is it possible to plan a special audit to audit any change of interactions between a standalone remote support location (SA-RSL) and a manufacturing site before the manufacturing site audit?

Answer:

Yes, section 7.2 g) provides for special audits to be conducted to assess significant changes in a client's quality management system, which could include changes to relationships between SA-RSLs and supported manufacturing sites.

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Section 5.5.3 – Reviewing Remote Support Location Audit Records

Question:

How shall the requirement 5.5.3 g) for the full NC-management be fulfilled?

Answer:

The 5.5.3 g) requirement states, "latest version of the audit plan and audit report".

This is intended to mean the latest final, technical reviewed version of the audit report and the most current NC management records, regardless of their status. This may indicate that the full NC Management process has not yet been accomplished.

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Section 5.6 – Establishing the Audit Team

Question:

"Each member of the audit team and any technical experts shall declare, before conducting any audit, that they have no conflict(s) of interest (see section 2.5.2) with the client."

Is the signing of a general contract not valid?

Answer:

The signing of a contract does not meet this requirement.

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Section 5.6 – Establishing the Audit Team

Question:

Can a team member from a manufacturing site audit also be the team leader for the remote support location audit?

Answer:

This is permitted, but it is not required.

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Section 5.6 – Establishing the Audit Team

Question:

1) Please provide more detail on the 'fully dedicated' Team Leader requirement.
2) If at first the audit team leader starts an audit at a manufacturing site then moves to the standalone remote support location (SA-RSL), and then returns to the manufacturing site - is this acceptable for team leader's audit schedule?

Answer:

1) This requirement means that the audit team leader must fully participate in the entire audit to which they are assigned as the audit team leader. For instance, an audit team leader cannot audit for the first day of a three-day audit at client A location, go conduct another audit on the second day at client B location, and return to client A location on the third day of the audit to continue the audit as team leader.
2) Rules 5.7 states the certification body may develop an audit plan that combines the manufacturing site and its SA-RSL when the locations are audited together in one (1) audit over consecutive working days. If the audits at the manufacturing site and SA-RSL are planned and conducted separately, then the example given in the question would not be permitted.

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Section 5.6.1 – Auditor Rotation and Continuity

Question:

Does the requirement in 5.6.1 e) mean that a permanent auditor is assigned to audit a standalone remote support location (SA-RSL) on a continuous basis?

Answer:

The approach for SA-RSLs relative to auditor rotation is like that for manufacturing sites. The requirement is intended to create consistency in the audit team for 3-years at the SA-RSL, and then after 3-years, the team is rotated.

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Section 5.6.1 – Auditor Rotation and Continuity

Question:

An auditor was used only to conduct special audits for verification of NCs. Can this auditor be used as the audit team leader for the next cycle without a waiver?

Answer:

No. This person is considered part of the audit team and cannot participate in the next audit cycle.

The only special audits this person could have done and been able to be appointed as the audit team leader would have been special audits related to performance complaints (5.6.1.d)).

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Section 5.7 – Audit Planning

Question:

1) Is the one-half day of audit planning time included in the scope for certification body royalty payments?

2) Are Stage 1 Readiness Assessments included in the scope for certification body royalty payments?

Answer:

1) Yes, all audit activities, including audit planning, are subject to royalty payments.

2) Yes, Stage 1 Assessments are in the scope of certification body royalty payments.

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Section 5.7 – Audit Planning

Question:

Will a new IATF Auditor Guide be released?

Answer:

Yes, a new IATF Auditor Guide is currently being developed and will be available in Q1 2025 for purchase.

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Section 5.7 – Audit Planning

Question:

Does the definition of "consecutive working days" in section 10.0 include weekends and holidays?

Answer:

Holidays are not intended to be included in the definition of consecutive working days.

Weekends (Saturday and/or Sunday) may be included in the consecutive working days for an audit if the weekend is included as a normal part of the client's operating pattern.

To clarify this definition, IATF Global Oversight will issue an SI to remove "calendar days" from the Rules 6th definition and replace it with "*'Regular working days of the client'* over which an audit is conducted in succession and without interruption."

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Section 5.7 – Audit Planning

Question:

1) Does the confirmation of audit dates at least 90 calendar days before the audit due date apply to standalone remote support locations (SA-RSLs)?

2) If a client does not confirm the audit dates at least 90 calendar days before the audit due date, what actions shall be taken by the certification body?

Answer:

1) Yes, audit dates must be confirmed with the client no less than 90 calendar days for any location being audited.

2) The consequences for this requirement not being met by clients was intentionally omitted from the Rules. The certification body must determine how to manage this situation with its clients up to and including the language included in the legal contract with the client (section 3.1).

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Section 5.7.1 – Client Information Required for Audit Planning

Question:

Does audit planning information also have to be collected for Stage 1 Readiness Assessments?

Answer:

Audit planning information required by section 5.7.1 is not required to be provided by the client prior to the Stage 1 Readiness Assessment. However, the client application and Quality manual must be provided by the client and used by the certification body to plan and prepare for a Stage 1 Readiness Assessment (6.2.1).

During the Stage 1 Readiness Assessment, the audit team is required to collect similar information as required in 5.7.1. and document the evidence in the Stage 1 Readiness Assessment CARA report.

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Section 5.7.1 – Client Information Required for Audit Planning

Question:

Regarding the requirement in 5.7.1.e), to what level of employee should the languages be identified?

Answer:

The requirement states, “any language spoken onsite”, which means this requirement applies to all employees from top management to the manufacturing shop floor.

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Section 5.7.1 – Client Information Required for Audit Planning

Question:

The last note in this section states, "Delaying an audit may result in loss of certification.“ What does "loss of certification" mean?

Answer:

In the example provided in the question, loss of certification means certificate cancellation when an audit cannot be conducted on time.

If the audit is delayed, the audit timing could be exceeded which would result in cancellation of the certificate, per Rules 5.1.1 (Audit cycle).

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Section 5.7.1 – Client Information Required for Audit Planning

Question:

Delaying an audit due to the client sending in the audit planning information late will create difficulties for the certification body that will not be able to reschedule the audit before the deadline. Will it be possible to handle this situation through a request for a waiver?

Answer:

Waivers are handled on a case-by-case basis by the relevant Oversight office.

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Section 5.7.1 – Client Information Required for Audit Planning

Question:

Is the requirement for a two-hour review of management review records (if not submitted with audit planning information) in addition to the one-half day of audit preparation and planning time?

Answer:

Yes, the two hours for the onsite review of management review records is in addition to the required one-half day for audit planning and shall be entered into the IATF Database.

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Section 5.7.1 – Client Information Required for Audit Planning

Question:

Off-site planning time needs to be entered into the IATF Database. Will there be a field created in the CARA report so auditors can record the time spent for off-site planning? This would help the IATF Database administrators see the information.

Answer:

Yes, this time will be captured in the CARA report and included in the IATF Database entry sheet.

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Section 5.7.2 – Audit Plan

Question:

1) What will be the consequence if the audit plan is not issued to the client at least 14 calendar days before the start of the audit?

2) Does the 14-calendar day requirement also apply to standalone remote support location (SA-RSL) audit plans?

Answer:

1) This is considered as a violation of the Rules and a nonconformity will be issued to the certification body from the Oversight office.

2) Yes, it does.

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Section 5.7.2 – Audit Plan

Question:

What is meant by 5.7.2 a), “any additional required onsite audit planning activities”?

Answer:

Additional onsite audit planning that is now permitted is related to the fourth paragraph in section 5.7.1., which states that if due to confidentiality reasons the client does not submit the management review records, two hours are added to the audit plan for the onsite review of management review records.

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Section 5.7.2 – Audit Plan

Question:

Does each process in the audit plan have to be listed separately?

Answer:

Yes.

Clauses 5.7.2. c) and d) require the specific names for each of the client's processes to be audited and when the process will be audited to be identified in the audit plan.

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Section 5.7.2 – Audit Plan

Question:

1) What is the meaning of "in what process the type and extent of controls for any outsourced process will be audited”?

2) How does it work for the audit plan?

Answer:

1) Let’s say as an example, a client machines main shafts for transfer cases and sends the green-machined main shafts to a supplier for heat treatment before the final machining processes are completed. The audit plan must identify the process(es) in which the type and extent of controls for the heat treatment of the main shaft will be audited. Perhaps some of the controls are audited in the client’s supplier management process, some controls are audited in the client’s incoming inspection process, and other controls are audited in the client’s final machining process(es) after heat treatment.

2) In each of these processes (supplier management, incoming inspection and final machining) in the audit plan, the outsourced heat treatment process controls must be identified as being sampled. The way in which this is identified in the audit plan is up to the certification body.

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Section 5.7.2 – Audit Plan

Question:

Regarding 5.7.2 h), are the customer specific requirements (CSRs) mentioned in this requirement limited to IATF OEM CSR's?

Answer:

Any customer specific requirement (CSR) document that meets the definition provided in IATF 16949 ("interpretations of or supplemental requirements linked to a specific clause(s) of this Automotive quality management system Standard") and will be audited must be included in the audit plan.

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Section 5.8.3 – Customer Risk and Performance Orientation

Question:

How does one audit the customer specific requirements (CSRs) for a company that delivers to more than 200 different customers? (Ex. components or cable). It is unfair to audit OEM CSR which represent less than 5% of sales, even they are IATF members. And for small companies, the further from the OEMs you are, the more they are impacted by this heavy pressure with no lean or fair process.

Answer (part 1 of 2):

Customer specific requirement (CSR) documents must be included in the audit plan.

Rules 6th Edition, section 5.8 requires, "*When determining audit trails or samples, priority shall be given to IATF OEMs and new automotive customers unless there is reasonable justification to deviate from this requirement.*"

Section 5.8.3 also requires the following concerning the prioritization for CSR sampling, *"b) customer performance to targets and related trends since the previous audit", "d) how the client ensures that all applicable latest versions of customer-specific requirements are identified, reviewed, and implemented within the quality management system, including any changes since the previous audit", and "f) all applicable IATF OEM customer-specific requirement documents over the three (3) year audit cycle by sampling from the requirements in each document."*

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Section 5.8.3 – Customer Risk and Performance Orientation

Question:

How does one audit the CSRs for a company that delivers to more than 200 different customers? (Ex components or cable). It is unfair to audit OEM CSR which represent less than 5% of sales, even they are IATF members. And for small companies, the further from the OEMs you are, the more they are impacted by this heavy pressure with no lean or fair process.

Answer (part 2 of 2):

Also refer to the changes related to the auditing of CSR from the IATF Rules 5th Edition to the Rules 6th Edition:

IATF Rules 5th Edition, clause 5.8 k) required:

> *"The customer-specific requirements shall be sampled for effective implementation over the three (3) year audit cycle and specific records of the requirements audited shall be retained."*

IATF Rules 6th Edition, clause 5.8.3 f) requires:

> *"all applicable IATF OEM customer-specific requirement documents over the three (3) year audit cycle by sampling from the requirements in each document."*

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Section 5.8.3 – Customer Risk and Performance Orientation

Question:

How does an auditor audit the customer specific requirements (CSRs) for non-IATF OEMs and other automotive customers?

Answer:

Any customer specific requirement (CSR) document that meets the definition provided in IATF 16949 ("interpretations of or supplemental requirements linked to a specific clause(s) of this Automotive QMS Standard") must be included in the audit plan.

The IATF Rules 6th Edition, section 5.8 requires, *"When determining audit trails or samples, priority shall be given to IATF OEMs and new automotive customers unless there is reasonable justification to deviate from this requirement."*

Section 5.8.3 also requires the following concerning the prioritization for CSR sampling, *"b) customer performance to targets and related trends since the previous audit" and "d) how the client ensures that all applicable latest versions of customer-specific requirements are identified, reviewed, and implemented within the quality management system, including any changes since the previous audit"*

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Section 5.8.2 – Understanding the Current Quality Management System

Question:

Regarding clause 5.8 l), can the CARA report have a field where the auditor shows he has seen, reviewed the correct certificate for accuracy where it exists? Can this be linked to changes to scope and make the auditor document that they have validated the certificate accuracy?

Answer:

The IATF Global Oversight will discuss the implementation of a check-box and relevant mandatory comment field related to certificate scope validation/confirmation in IATF CARA.

Details will be provided at a later point.

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Section 5.8.3 – Customer Risk and Performance Orientation

Question:

Nothing specifies that 100% of the requirements must be audited over the 3-year cycle? So, no requirement to cover all requirements over the 3-year cycle?

Answer:

Rules 5th Edition also does not require 100% of the requirements from all CSR documents to be audited. Rules 5the Edition 5.8 k) reads, *"information and evidence about the customer-specific requirements, including customer-specific quality management system requirements audited. The customer-specific requirements shall be sampled for effective implementation over the three (3) year audit cycle and specific records of the requirements audited shall be retained."*

IATF Rules, 6th Edition, clause 5.8.3 f) requires / clarifies, *"all applicable IATF OEM customer-specific requirement documents over the three (3) year audit cycle by sampling from the requirements in each document."*

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Section 5.8.5 – Automotive Process Approach

Question:

Why it is no more the CAPDo methodology to audit?

Answer:

This question is too unspecific to be answered and therefore remains unclear.

Although the “CAPDo approach” was never explicitly mentioned in the IATF Rules, the principles apply and continue to apply to IATF 16949 audits / in the IATF Rules 6th Edition.

If this question can be further explained in detail, IATF can respond in more detail to the question.

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Section 5.8.5 – Automotive Process Approach

Question:

What does 5.8.5 l) mean exactly?

IATF Rules 6th Edition, 5.8.5 l) requires the audit to be conducted to, *"ensure that processes are audited where they occur (i.e., where they take place or are carried out) unless auditing the processes where they do not occur has no detrimental impact on the audit effectiveness and/or the achievement of the audit objective"*

Answer:

The only exception from the rule of auditing a process at the location "*where it occurs*" is when the auditor can reasonably justify that auditing the process at another location (e.g., in a meeting room) does not negatively impact (or even positively impacts) the effectiveness of the audit in meeting all audit objectives.

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Section 5.8.5 – Automotive Process Approach

Question:

Reasons for omitting recertification audits?

Answer:

This question remains unclear.

IATF Rules, 6th Edition, section 5.8.5 is mostly referring to "*the audit*" (unless otherwise explicitly stated in e.g., in the 5th paragraph). This is generic terminology and does typically include recertification audits; therefore, this section is not omitting recertification audits.

The only possible clause where recertification audits are not mentioned is clause 5.8.5 c) which requires the audit shall be conducted to*, "ensure for standalone remote support locations that all applicable IATF 16949 requirements are audited for effective implementation at the stage 2 certification audit, within a two (2) year surveillance period, and at a transfer audit."*

The reason for not mentioning recertification audits in 5.8.5 c) is that audit programs for Standalone Remote Support Locations do not include recertification audits (see IATF Rules, clause 5.5.1).

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Section 5.10 – Audit Reporting

Question:

Shall we understand that the link to the IATF NC CARA is to be provided with the final approved report (not with the draft) within 15 days? If yes, how can the client submit the short-term actions and other required evidence for major NCs within 15 days too?

Answer:

The IATF Rules, 6th Edition, clause 5.10 requires, *"The certification body shall issue the draft audit report and the nonconformity management record(s), where applicable, to the client at the audit closing meeting."*

In fact, the requirement(s) as written in 5.10 could be misunderstood to mean that the link to IATF NC CARA could be provided as late as issuing the final report within a maximum of fifteen (15) calendar days to the client. This was not the intention of the language.

IATF Global Oversight will issue a Sanctioned Interpretation (SI) to clarify the language to require the link to be provided at the closing meeting so that clients are able to immediately start working on the identified nonconformities.

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Section 5.10 – Audit Reporting

Question:

Can't the auditor release the final audit report at the end of the audit?

Answer:

The IATF Rules, 6th Edition, clause 5.10 requires, *"The certification body shall issue the draft audit report and the nonconformity management record(s), where applicable, to the client at the audit closing meeting."*

The requirement above is clear that the audit team shall issue and release the draft report at the closing meeting.

The final audit report is not released to the client before a technical reviewer approves the report within a maximum of fifteen (15) calendar days of the audit closing meeting date (see last paragraph under IATF Rules 6th Edition, section 5.10).

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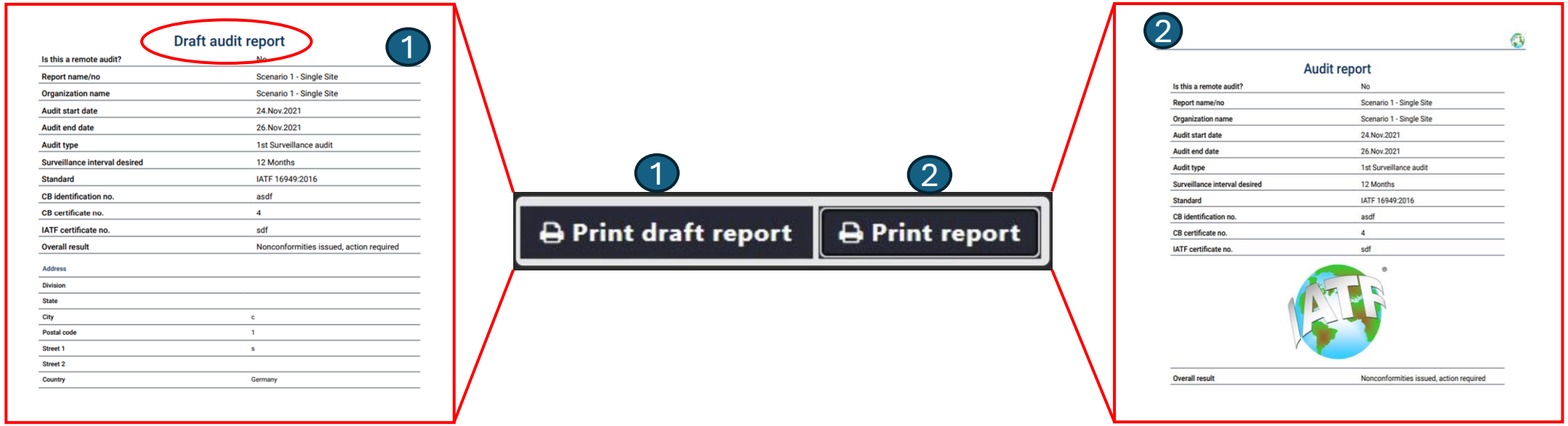
Section 5.10 – Audit Reporting

Question:

How will this be indicated that this is a draft report, will CARA be updated? Or do we name the file accordingly?

Answer:

The IATF CARA allows to create a draft report. The user (auditor) has different printing options to select from, either to "Print draft report" or to "Print report" (final audit report). These buttons can be found at the bottom of the window. As shown below, the "Draft audit report" will be indicated on this report:



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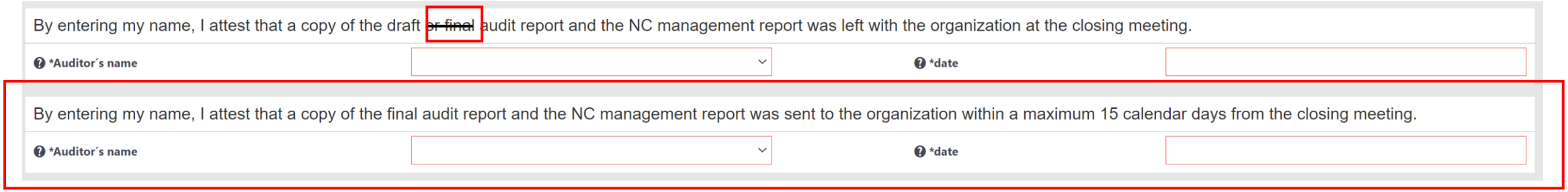
Section 5.10 – Audit Reporting

Question:

How will the final approved report after Technical Review be indicated in the CARA report?

Answer:

The IATF CARA report results page requires the auditor to attest to sending the final audit report to the client. The language will be modified to reflect the new requirement and the “final” report being provided at the closing meeting will be deleted.



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Section 5.10 – Audit Reporting

Question:

The term "nonconformity management record(s)" is used two times incorrectly. It should be "nonconformity record" instead, since at this point there is only the nonconformity record available, not the nonconformity management record.

Answer:

In section 5.10 the term used should be *"nonconformity record"*, instead of "*nonconformity management record"*. The nonconformity record includes the identified and documented nonconformity in the required four distinct parts as per section 5.9.

The nonconformity management record is the documented nonconformity, as stated above, supplemented with the required nonconformity management information as per the relevant requirements in the section 5.11.

IATF Global Oversight will issue a Sanctioned Interpretation (SI) to clarify the meaning of the *"nonconformity record(s)"* vs. the *"nonconformity management record(s)"*.

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Section 5.11 – Nonconformity Management

Question:

What evidence should the certification body keep to verify that the deadlines for NC management are met?

Answer:

It is the responsibility of the certification body to ensure, and to be able to demonstrate, that the deadline(s) for the NC management are met. The way in which ensuring compliance with this requirement and the way in which demonstrating compliance with this requirement can vary from certification body to certification body. Some certification bodies might have highly automated CRM-systems containing all communication between the certification body, the auditor and the client, and some certification bodies follow more a "manual approach" where the auditor communicates directly with the client.

In any case, the certification body shall be able to monitor NC management, ensure compliance to requirements, and be able to provide and demonstrate sufficient evidence of the relevant submissions.

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Section 5.11.1 – Client Responsibility for a Major Nonconformity

Question:

What are the consequences if the client does not submit the required evidence (for a major NC) within 15 days ?

Answer:

If the client does not respond to the major NC "at all" within 15 days, the following IATF Rules, 6th Edition, requirements apply: *"When a nonconformity response is not received per the timing requirements in sections 5.11.1 and 5.11.2, the final audit result shall be failed, the certification decision shall be negative, and any existing certificate shall be immediately withdrawn."*

The requirement allowing submission of an acceptable nonconformity response within a maximum of thirty (30) calendar days from the audit closing meeting date only applies **IF** the fifteen (15) day response was already rejected, e.g., because it was incomplete. The rejected response must have been submitted within 15 days for this requirement to be applied.

5.11.3 goes on to state, *"If a resolution cannot be achieved within the required timing stated above, the nonconformity response shall be rejected, and the final audit result shall be failed. The certification decision shall be negative (see section 5.12), and any existing certificate shall be immediately withdrawn."*

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Section 5.11.1 – Client Responsibility for a Major Nonconformity

Question:

Client to submit their Major NC responses within 15 days. Is there a deadline for the certification body to review this? If yes, within how many days?

Answer:

No, Rules 6th does not define a specific timing for the certification body / audit team to review and respond to client NC responses to ensure that the client can do timely rework on the response. There is also no requirement to allow a minimum number of rework iterations.

It is in the certification body's best interest to define appropriate timing for response reviews to allow the client to rework responses in due time to meet the final deadline for acceptance (30 or 90 days, as applicable).

There is a high risk for the client in not attempting to submit a "first time right" response and in submitting the NC response too close to the defined deadline as this may not allow for rework of NC responses.

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Section 5.11.1 – Client Responsibility for a Major Nonconformity

Question:

The time allocated for issue of the approved final audit report and NC management (after technical review) is also 15 days from the closing meeting date. How will these 2 activities will be completed within 15 days, considering the overlap for technical review and Major NC action by the client within 15 days from the closing meeting date if during technical review, changes are made?

Answer:

This overlap between NC management and technical review step 1 may become challenging when the documented NC in the draft report was misclassified as a minor NC, reported as such, and is upgraded at the technical review. This would impact the timing for the NC response due to the required 15-day response for the major NC on short notice; however, the client is supposed to start working on the NC based on the nonconformity record provided at the closing meeting (i.e., the draft report including the reported nonconformities). If the NC is upgraded, it would be acceptable for the certification body to allow the client to submit an acceptable 15-day response until day 30 after the closing meeting.

The certification body is expected to advise their clients to start working on nonconformities without delay, regardless of their classification. The certification body is also expected to inform the client of any changes made to the NC details, including its classification, resulting from the step 1 technical review.

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Section 5.11.2 – Client Responsibility for a Minor Nonconformity

Question:

Why asking for a minor NC to provide containment measures because a minor NC has no proven customer or system impact?

Answer:

Rules 6th, section 10 defines "Containment" as: ***"****Temporary actions that are taken to prevent a nonconformity from causing any further negative impact until the root-cause analysis is completed, and the systemic corrective action is implemented and verified for effectiveness."*

A minor NC can be "a failure relative to IATF 16949 in some part of the quality management system" (see section 10). Therefore, it can have a negative impact and the client is expected to implement containment actions meeting the definition from section 10.0. However, there may be cases where containment is not applicable or reasonable for a minor NC based on justification provided by the client. Containment is always required for major and minor NCs that are 100% Resolved (see 5.11.3.1).

NOTE: The definition for a major NC does not state the need for a "proven" impact. The words read "probable" and "likely" as we are considering risk, which is not the same as certainty.

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Section 5.11.3 – Certification Body Responsibility

Question:

Can non audit team members review NCR responses?

Answer:

No, this is not permitted. IATF Rules, 6th Edition, clause 5.11.3 states, *"A member of the audit team shall review the submitted nonconformity response provided by the client and accept or reject it." (5.11.3)*

This requirement clarifies that the NC response review and the decision to accept or reject shall be done by a member of the audit team. The step 2 technical review, of course, is required to be done by a technical reviewer.

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Section 5.11.3 – Certification Body Responsibility

Question:

Can any audit team member *(can be appointed for the nonconformity management with the client)*?

Answer:

IATF Rules, 6th Edition, clauses 5.11 and 5.11.3 require *"The client and the certification body are responsible for managing audit nonconformities per the requirements detailed below. The IATF NC CARA shall be used to exchange the responses between the audit team and the client for each nonconformity." (5.11)*

"A member of the audit team shall review the submitted nonconformity response provided by the client and accept or reject it." (5.11.3)

This language intentionally allows for a certain flexibility of who in the audit team is appointed to communicate with the client regarding the nonconformity management. It would even allow for a shared responsibility amongst the audit team members if considered to be the most effective approach.

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Section 5.11.3 – Certification Body Responsibility

Question:

What if the result of the special audit is a recommendation for "Open but 100% resolved"? This new language seems to imply that a special audit for a major NCR cannot result in a recommendation of "Open but 100% resolved" - is that the case?

Answer:

This is correct. The major nonconformance cannot be determined as 100% resolved at the special audit.

The client's response to any nonconformity must be approved prior to the onsite special audit, per 5.11.3, including any corrective actions that need to be approved as 100% resolved.

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Section 5.11.3 – Certification Body Responsibility

Question:

For major NC's what action shall be taken at 30 calendar days after the closing meeting if the response from the client is still not acceptable and cannot be agreed?

Answer:

IATF Rules, 6th Edition in section 5.11.3 states *"If a resolution cannot be achieved within the required timing… the nonconformity response shall be rejected, and the final audit result shall be failed. The certification decision shall be negative (see section 5.12), and any existing certificate shall be immediately withdrawn."*

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Section 5.11.3 – Certification Body Responsibility

Question:

"The audit result shall be updated, and any one hundred percent (100%) resolved nonconformity status entered no later than the date the certification decision is entered into the IATF Database."

The requirement to enter the 100% resolved status is incorrect at this point.

Answer:

This requirement does not contradict current practice as per IATF DB manual (please refer to the IATF Database Users Manual: "Update on how to manage nonconformities classified as "open but 100% resolved".) The entry of the 100% resolved status happens after completion of the NC management with the client when updating the audit result in the database, which is likely to happen close to the time the certification decision is entered.

This practice should be maintained. It is important to know about a 100% resolved NC when the certification decision is entered, and at that point indicating, the need for the 100% resolved special audit before the next regular audit.

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Section 5.11.3 – Certification Body Responsibility

Question:

Should the entry in the IATF Database be the date of the Veto Power decision instead of the date a member of the audit team approved (or rejected) the NCs?

Answer:

No. The date of the Technical Review decision will be entered in a new field in the IATF Database (as part of several IATF Rules 6th Edition changes).

The certification body will enter the latest approval/rejection date for all client nonconformities in the field called “Audit Result Changed” when changing the audit result from “open with corrective action” to “acceptable” or “failed”, as explained in the IATF Database Users manual.

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Section 5.11.4 – Verification of a Major Nonconformity

Question:

What if a client is overconfident and has their special audit for a major NC early in the 90-day window? The use of "one time" is worrisome. What if a client is overconfident and attempts to have their special audit for a major at day 45. Why wouldn't we be allowed to conduct another special audit within the 90-day window? It seems counterintuitive to punish clients for being confident.

Answer:

The special audit includes verification activities against the accepted systemic corrective action plan. If the corrective action plan is not effectively implemented according to the accepted plan, then the special audit shall be failed. If the certification body verifies the systemic corrective action plan is effectively implemented, then the audit result is acceptable. These are the two possible options currently. The 100% resolved path is already indicated with the submitted systemic corrective action plan and is not an optional ad-hoc decision during the special audit.

The intention is to not permit a “trial and error” problem solving and unplanned or unnecessary special audits. Instead, it is important for the client to establish first-time right problem solving with internal verification of the effectiveness of corrective actions before the certification body comes for special audit.

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Section 5.11.4 – Verification of a Major Nonconformity

Question:

1) If there is one systemic corrective action and the action is accepted as 100% resolved, is a special audit within 90 calendar days required, per 5.11.4?

2) If there are three systemic corrective actions and one of the three corrective actions is accepted as 100% resolved, is a special audit required within 90 calendar days, per 5.11.4?

Answer:

1) No, a special audit is not mandatory within 90 calendar days, per 5.11.4. The certification body would follow the requirements in 5.11.3.1 d), which require an onsite special audit to be conducted based on the corrective action plan timing and no less than 90 calendar days BEFORE the next regular audit.

2) Yes, a special audit is required within 90 calendar days from the closing meeting date, per 5.11.4, to verify the effective implementation of the two systemic corrective actions that were not determined to be 100% resolved. The one systemic corrective action that is determined to be 100% resolved requires a second special onsite audit no less than 90 calendar days BEFORE the next regular audit.

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Section 5.11.4 – Verification of a Major Nonconformity

Question:

In 5.11.4 the term "corrective action" is used for a "systemic corrective action“. This whole rules document requires to define and implement systemic corrective actions. This term should be used consistently.

Answer:

The remark is correct. However, in section 5.11.4 the term “*systemic corrective actions*” was used, and “*corrective actions*” was used twice. From the context it should be clear that both terms are used synonymously.

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Section 5.11.5 – Verification of a Minor Nonconformity

Question:

What will happen with the previous minors if found not to be effectively implemented at the next audit? Are they failed in the IATF Database to the last audit when two new major NCs are issued at the current audit?

Answer(s):

No. The nonconformity-related status "failed" does not exist in the IATF Database. Only the audit result can be failed; however, certification bodies are not expected to revisit the previous audit result in the IATF Database or IATF CARA.

The issuance of the new major nonconformities (reissue the minor whose corrective action was not effectively implemented to a major nonconformity and issue a new major nonconformity against the client's corrective action process) will not affect/change the audit result of the previous audit during which the minor NC was originally issued.

The decertification process will be started when the new major nonconformities are issued.

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Section 5.11.5 – Verification of a Minor Nonconformity

Question:

If minor nonconformities were verified during a special audit, would the original audit result (where the minor nonconformities were issued) be “acceptable”, and a positive technical review/certification decision made?

Answer(s):

Yes, the original audit result would be “acceptable” (provided positive verification result on major nonconformities) and a positive technical review/certification decision made independent from the (re)raise of the minor nonconformity. The new majors for the (re)raised nonconformity will start the decertification process and may lead to the issuance of the new certificate already being in suspension.

Comment:

The intent here is that if a certification body elects to include verification activities for minor nonconformities during the special audit required for verification activities for major nonconformities within 90 days after the closing meeting, the client should not have a huge disadvantage compared to the standard method of verifying the minor nonconformities during the next regular audit.

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Section 5.11.5 – Verification of a Minor Nonconformity

Question:

1) Shall the audit team record the verification result of the corrective action for previous audit nonconformities in the "Audit information" section (audit note) for each relevant process, even though there is a "verification of previous audit nonconformities" in "Audit conclusion" of CARA report?

2) Even if the verification of the corrective action for entire previous nonconformities is performed using a “block of time” at the beginning of the audit, should the validation of the corrective actions for previous nonconformities be performed during each process audit again?

Answer(s):

1) The verification results shall be recorded as a minimum in the section “verification of previous audit nonconformities” in the IATF CARA report. However, additional information might be recorded in the relevant process, as appropriate, but this is not a “shall” requirement.

2) No, this is not required. If sufficient evidence about the effective implementation could be verified using a “block of time” at the beginning of the audit, there is no need to double the verification activities.

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Section 5.12 – Technical Review and Certification Decision

Question:

If no nonconformities are issued during an audit, what will be the certificate decision date?

Answer:

IATF Rules 6th Edition, introduces the concept of a two-step technical review process. The date of the certification decision (part of step 2) is the issue date of the certificate. If no nonconformities were issued, what remains for step 2 is essentially making the certification decision.

However, in this case, the certification body is not required or forced to make the certification decision immediately upon completion of step 1, i.e., issuance of the final audit report. It is not forbidden to conduct step 1 as required within 15 days of the audit closing meeting date and then "delay" step 2, provided the 120 days, or as applicable, the certificate validity, is not exceeded.

NOTE: Delaying the certification decision may be viewed as a good approach. When the certification decision is not "delayed", the client would automatically be required to conduct the recertification much earlier than the allowable due date to avoid any risk in the nonconformity management process of the recertification audit, i.e., missing required deadlines with the risk of losing the certificate.

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Section 5.12 – Technical Review and Certification Decision

Question:

For audits without nonconformities issued, Step 2 technical review is not possible. This deviates from the requirements in section 5.12. that states, "following the completion of Step 1, a technical reviewer shall make a certification decision in Step 2, regardless of whether or not the audit resulted in nonconformities".

Answer:

If no nonconformities were issued, what remains for Step 2 is essentially making the certification decision; however, technically Step 2 has to happen regardless, as this is the actual certification decision.

See also previous slide for further information.

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Section 5.12 – Technical Review and Certification Decision

Question:

When does suspension start under the revised language in this section? Clause 5.12 d) indicates that the Technical Reviewer (within 15 days of the end of the audit) must confirm whether certificate suspension is required. Does this mean that certificate suspension doesn't start until the Technical Reviewer makes their decision? Or is the suspension still backdated to the end of the audit?

Answer:

Suspension starts with the suspension decision of the technical reviewer. Suspension does not start before the technical reviewer confirms the validity of the major NC and makes the suspension decision based on the technical reviewer's analysis of the situation (see sections 8.2 and 8.3).

The suspension decision date that is entered in the IATF Database is the date of the technical reviewer's decision – NOT the initiation date of the decertification process (i.e., the audit closing meeting date).

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Section 5.12 – Technical Review and Certification Decision

Question:

1) Which aspects must be assessed as part of the Step 1 Technical Review process within 15 days after closing meeting date of the audit? Rules 6th only gives examples.

2) For most special audits, is a separate technical review/certification decision needed?

Answer:

1) The audit package to be reviewed is defined in the Rules as “the audit planning records, audit plan, and audit report, including the nonconformities issued” and “other relevant information (e.g., application information, other relevant audit reports, publicly available information, customer complaints, etc.)”.

   The IATF requirements related to the set if information and records listed above, and their corresponding certification activities are specified in various sections of these Rules and the IATF CARA. These requirements should allow the certification bodies to determine the “aspects to be assessed” during the technical review. IATF will not provide additional “checklists” or other work aids for the certification bodies to support the technical reviews.

2) Special audits conducted for verification of the effectiveness of systemic corrective actions for major and/or minor nonconformities shall have their audit results considered as part of the certification decision for the audit conducted.

It should be clear from the requirements that no separate certification decision is required for (most) special audits, i.e., for those that are "follow-ups" for nonconformities.

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Section 5.12 – Technical Review and Certification Decision

Question:

The timing requirement for a technical review decision on special audits (within 120 days) is confusing and applies only in very rare situations. Where is a separate technical review required for special audits listed in section 7.2?

Answer:

The certification decision shall be made within a maximum of one-hundred-twenty (120) calendar days from the last day of a special audit conducted for cases 7.2 e)*, f), g), and h).

**With regard to the situation in 7.2 e), the certification decision must be made before the next regular audit commences which may be less than 120 calendar days from the last day of the special audit.*

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Section 5.13 – Certification and Certificate Issuance

Question:

1) Should the appendix for the certificate include only SA-RSLs?
2) If the client has a remote support location at another site does that manufacturing site name and address go on the certificate as a support location?
3) If the site audited has its own onsite remote location 5.13 f) that supports itself and other sites, should that also appear on the appendix as a support to itself? Some cases may have separate ownership (at the same physical address), should they appear on their own certificate and their own USI?

Answer:

1) No. The appendix applies to both and should include both remote support locations and standalone remote support locations.
2) Yes, manufacturing site B providing support to the audited manufacturing site A is considered a remote support location to manufacturing site A and shall be listed on A's certificate.
3) Not sure what the question, "own onsite remote location", would be. However, to reference onsite support, i.e., a manufacturing site supporting itself (within same USI) on its own certificate, is not acceptable and misleading. If the support comes from another legal entity located at the same physical address as the manufacturing site, this different legal entity is supposed to get a different USI and be listed on the manufacturing site's certificate as a remote support location or a standalone remote support location, depending on the activities occurring there.

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Section 5.13 – Certification and Certificate Issuance

Question:

For remote support locations, the name of the remote support location is currently not listed on the certificate. To fix this, do we need to reissue all certificates prior to January 1, 2025?

Answer(s):

The certification body should reissue the manufacturing site's certificate to show the name of the remote support location(s) after the next audit that occurs after 1 January 2025.

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Section 5.13 – Certification and Certificate Issuance

Question:

If product design is outsourced, should the product name be included in the statement of "product design outsourced"?

Answer(s):

No.

In case of outsourced product design, only use the statements as required in 5.13 j) on the certificate.

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Section 5.13 – Certification and Certificate Issuance

Question:

Are brand names allowed on the certificate as a part of the scope statement? For example, “Design and manufacture of Saflex® PVB Interlayers”.

Answer:

No, brand names are not permitted to be listed on the IATF certificate unless the “specific product name” would reasonably qualify as its own “product category”.

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Section 5.13 – Certification and Certificate Issuance

Question:

The statement in 5.13 h) is confusing and not consistent with the requirements in section 1.0 that discuss "Automotive Product". Are we certifying client by manufacturing process or products?

Answer:

IATF 16949 certification is a quality management system certification. It is neither a product or a manufacturing process certification, nor is it a confirmation of process capabilities.

The entire quality management system is the focus of the IATF standard. In modern quality management, capable and robust design and manufacturing processes are considered the main drivers for achieving product quality, which is also expressed in IATF 16949.

Considering the statements made above when looking for a way to summarize the IATF 16949-certified quality management system in a scope statement for the certificate, it should not be wrong or confusing to primarily reflect the manufacturing processes in the scope statement, with the option to enhance the scope statement with categories of manufactured products.

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Section 5.14.2 – Requesting a New Letter of Conformance

Question:

1) How many times can the client request a Letter of Conformance?

2) If there is no limit to the number of times a client can request a Letter of Conformance, can the same auditor be used for each initial audit for a Letter of Conformance until the client upgrades to IATF 16949 certification?

Answer:

1) There is no limit on the number Letter of Conformance requests by a client provided the client continues to meet the preconditions for a Letter of Conformance.

2) A Letter of Conformance requires an initial audit; auditor rotation is required for each initial audit for any new Letter of Conformance request, per the requirements in 5.6.1 a).

When the client upgrades to IATF 16949 certification, the same audit team that conducted the last Letter of Conformance initial audit may conduct the initial certification audit and the subsequent surveillance audits.

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5.14.3 – Upgrade to IATF Certification from a Letter of Conformance

Question:

Can a client with a Letter of Conformance from certification body A transfer to certification body B and do a certification audit with certification body B?

Answer:

Yes, an initial audit (not a transfer audit) must occur with certification body B, and the reduction for the upgrade (see 5.4 c)) would not apply since the client is changing its certification body.

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Section 5.15 – Relocation

Question:

Is there a timeline to plan the audit related to the relocation?

Answer:

No. The IATF did not want to put a timeline requirement in the Rules. The reason for this is that IATF cannot enforce the certification of a (new) client location as this is basically client discretion. However, contracts between the client and its automotive customers could stipulate a timeline for certification.

Additionally, relocations may lead to situations where a quality management system previously certified to IATF 16949 can no longer meet all applicable IATF 16949 requirements without including the new location into the certification structure. This could lead to start of the decertification process for a manufacturing site, thus setting a timeline.

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Section 5.15 – Relocation

Question:

If a relocation takes more than one year from the stoppage of production to the re-start of production, does the certification need to be withdrawn?

Answer:

If at the latest possible audit date there is still no production running, the audit cannot not be conducted (see section 5.7). This may lead to the cancellation (not withdrawal) or expiration (if the audit date passes the certificate expiration date) of the existing certificate, according to the requirements in 5.1.1.

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Section 5.15 – Relocation

Question:

In case of relocation, shall we start with a Letter of Conformance or a certificate?

Answer:

Per the note under 5.15.1 a), a Letter of Conformance would not be required, provided it is an IATF 16949 certified site relocating; however, an Initial Audit (Stage 1 and Stage 2) would be required regardless of the extent of the relocated manufacturing and/or support activities.

In this scenario, the requirement for 12 months of manufacturing performance data for the Stage 1 is waived.

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Section 5.15.1 – Relocation Scenarios Requiring an Initial Audit

Question:

Is a Stage 1 required when an extended manufacturing site (EMS) becomes a manufacturing site or standalone remote support location, as described in 5.15.1 c)?

Answer(s):

Yes. A Stage 1 readiness assessment is required in this case.

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Section 5.15.1 – Relocation Scenarios Requiring an Initial Audit

Question:

According to the description in 5.15.1 a), if a Standalone Remote Support Location is relocated, an initial audit is required. Does this mean that an initial audit shall be conducted no matter how small it is? For example, if a small sales office of around 3 employees or an unmanned warehouse is relocated to a completely new address with no process changes, are we still required to conduct an initial audit?

Answer:

Yes, an initial audit would be required to be conducted because it is the start of the audit cycle for the new location.

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Section 5.15.1 – Relocation Scenarios Requiring an Initial Audit

Question:

How shall a previously certified extended manufacturing site (EMS) be audited to become a single manufacturing site?

Answer:

If the extended manufacturing site is relocating and will become a manufacturing site in the new location, an Initial Audit (Stage 1 and Stage 2) is required.

If the extended manufacturing site does not meet the eligibility requirements in section 1.1 and now must become a single manufacturing site, and it is not relocating to a new location, see slides in section 1.1 for guidance on transitioning the extended manufacturing site to a single manufacturing site.

This scenario does not fall under the requirements for Relocation in section 5.15.

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Section 6.1 – Application Process

Question:

How do we establish a client record in the IATF Database if no audit has been conducted? The last paragraph under clause 6.1 mandates that a client record is to be created in the IATF Database for a transferring client within 7 days of the contract's approval. IATF Database entry is tied to audit entry. How do we create the client record if the audit hasn't yet taken place?

Answer:

For purposes of creating a client record as required in section 6.1, a record of a client (i.e., the basic client information) can be entered at any time without the need to enter an audit at the same time.

The reason for this new requirement is to provide visibility in the IATF Database for clients in transfer prior to the transfer audit being conducted.

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Section 6.1 – Application Process

Question:

Do we have to issue a whole new contract for a client that is starting over after a lapse or who has moved? 6.1 b) and 6.1 c) mandate that we collect a whole new application for a client whose certification has lapsed or who has moved to a new location. We currently manage this via a contract amendment. It seems like a waste of resources to force us to collect a whole new application for an existing client who is moving or temporarily lost their certification. What is the purpose behind this?

Answer:

Rules section 6.1 states, "the certification body has the discretion to determine whether or not a new application is required in cases where an applicant organization reapplies with the same certification body for certification within six (6) months after a letter of conformance expiry, the loss of certification, or a "not ready" decision from a technical reviewer for a stage 1 readiness assessment or a negative certification decision after a stage 2 certification audit."

In the case of a relocation, yes, a new application is required and does not fall under the certification body's discretion. The purpose for this is that a relocation constitutes a change in the organization, and the certification body needs to understand the client information requirements listed in 6.1.1 a) - r). A contract may be amended, or a new contract may be issued, depending on the outcome of the application review.

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Section 6.1.1 – Application for Certification

Question:

In 6.1.1.a), there is a description that indirect support locations are to be covered within the certification scope. On the other hand, in section 5.5, there is a description that indirect support locations are not included in a manufacturing site's certification scope. Which is correct?

Answer(s):

In the application phase, the certification body needs to know about these indirect locations, and they should be audited to ensure all requirements are met, but not included on the manufacturing site certificate since they do not provide support directly to the manufacturing site.

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Section 6.1.1 – Application for Certification

Question:

What exactly is meant by “legal statuses” in section 6.1.1 a)?

Answer:

Any organization is founded with a legal status; e.g., stock company, limited company, limited commercial partnership, etc.. This is one of the important inputs in any contract management.

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Section 6.1.1 – Application for Certification

Question:

The term "nonconformity record“ in 6.1.1. o) is incorrect. The term "nonconformity management record" must be used.

Answer:

IATF Global Oversight will issue a Sanctioned Interpretation (SI) to clarify the meaning of the *“nonconformity record(s)"* vs. the *“nonconformity management record(s)”*.

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Section 6.1.2 – Application Review

Question:

"Application review" and "draft quotation" – please clarify if it includes the final costings for the final quote or is this draft only limited to approval of the organization structure, scope, audit days on site and or other additional audit time.

Answer:

The application review must cover the draft quotation's compliance with the requirements in 6.1.2 a) – i).

The certification body's application review process will determine whether the final costing is part of the draft quotation review.

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Section 6.1.2 – Application Review

Question:

How are we to include in application review the requirement from point c) for product design responsibility if the client declares non-product design responsibility? In combination with points 5.4.a) and 6.1.1.f) does the application reviewer have to review evidence of non-product design or just the client's written declaration?

Answer:

As part of the application, the client it not just required to provide a simple "yes/no-statement" about being design responsible, or not. The written declaration shall also include supporting statements on existing product-design related client processes and contracts with customers that require or do not require the applicant organization to design the automotive products it manufactures and sells to the customer (6.1.1 f) 1) and 2)). Further evidence from the client is not required in the application phase and the certification body may rely on the written declaration, provided it is clear and not ambiguous.

However, it should be clear from the requirements in section 6.2 and 5.8 that seeking evidence to continuously confirm (non-) product design responsibility / certification profile is required for stage 1 readiness assessments and every regular audit. Evidence obtained during onsite activities may require the certification body to re-determine the client's design responsibility.

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Section 6.2 – Initial Audit

Question:

In case of a Stage 1 to be done in 2024 and the Stage 2 in 2025, shall we plan and conduct the Stage 1 according to Rules 5th Edition and plan and conduct the Stage 2 according to Rules 6th Edition?

Answer:

Yes. In this case the certification body shall apply the requirements in the IATF Rules 5th Edition for the Stage 1 in 2024 (with closing meeting date of the Stage 1 in 2024) and the IATF Rules 6 Edition requirements for the Stage 2 in 2025.

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Section 6.2.1 – Stage 1 Readiness Assessment – Certification Body Preparation

Question:

There is no mention about key indicators and performance trends for the previous 12 months.

A new client at a Stage 1 readiness assessment is not required to provide the key indicators and performance trends for the previous 12 months like is required in Rules 5th, 6.5.1c)?

Answer:

The requirement for relevant performance data over 12 months still applies. It will be covered by the items in the mandatory fields in the revised IATF CARA Stage 1 Assessment Report.

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Section 6.2.1 – Stage 1 Readiness Assessment – Certification Body Preparation

Question:

Are certification bodies now responsible for writing Stage 1 audit plans? Clause 6.2.1 b) seems to imply that the certification body is responsible for developing Stage 1 audit plans - is that the case?

Answer:

Yes. Although not explicitly stated in Rules 5th Edition, the certification body was expected to develop and issue a Stage 1 plan to the client as the output of Stage 1 planning and to be used as the basis to conduct the assessment.

This has been clearly stated and clarified in Rules 6th Edition, section 6.2.1.

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Section 6.2.2 – Stage 1 Readiness Assessment, Part 1 – System and Structure Review

Question:

Is it the intent that Stage 1, Part 1 may take place offsite? The separation of Part 1 and Part 2 of the Stage 1 Readiness Assessment does not make sense to us. Is Part 1 supposed to be performed offsite possibly by the certification body?

Answer:

No. The requirement does not intend for Part 1 of the Stage 1 Readiness Assessment to be conducted "offsite".

The Stage 1 Readiness Assessment was only divided into two parts to emphasize the different nature and focus of the assessment parts during the consecutive sections of the stage 1 readiness assessment.

Both parts of the Stage 1 Readiness Assessment are expected to be conducted onsite at the audited location.

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Section 6.2.3 – Stage 1 Readiness Assessment, Part 2 – Operational Review

Question:

Where can we find the “relevant contents” for the Stage 1 Readiness Assessment for the CARA Stage 1 audit report?

Answer:

The list of requirements, which was originally included in the Rules 6 draft shared with certification bodies, was removed from the final IATF Rules 6th Edition.

The “relevant contents” will be reflected in the items required in the mandatory fields in the revised IATF CARA Stage 1 Assessment Report.

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Section 6.2.5 – Identifying Concerns

Question:

Can the IATF show us more examples of "certification body's responsibility" for concerns found in a Stage 1 Readiness Assessment?

Answer:

The following points are further examples for permitted exceptions according to the IATF Rules 6th Edition, clause 6.2.5, (Point 2):

- Missing final audit reports, that were never provided to the client, pertaining to remote support locations previously audited by the same certification body.
- Impartiality issues discovered onsite, that require a change of the assigned audit team.
- Assumptions made to determine certification feasibility proved to be wrong once onsite, and the certification body cannot serve the client anymore (e.g., no auditor available having the relevant sector code).
- Missing stage 1 audit at a newly discovered central location where the client's quality systems management support function resides.

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Section 6.2.5 – Identifying Concerns

Question:

The last paragraph of this clause indicates that an auditor can judge a Stage 1 concern as having "no impact or negligible impact." Will CARA provide a place for such explanations to be provided?

Answer:

Yes, the IATF CARA will be modified accordingly and allow for these explanations.

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Section 6.2.8 – Repeated Stage 1 Readiness Assessment

Question:

If the Stage 1 Readiness Assessment does not meet the 6.2.8 c), shall the client submit a new application and make a contract?

Answer:

IATF Rules 6th Edition, section 6.1 states, “the certification body has the discretion to determine whether or not a new application is required in cases where an applicant organization reapplies with the same certification body for certification within six (6) months after {…} a “not ready” decision from a technical reviewer for a stage 1 readiness assessment {…}”

If a repeat Stage 1 Readiness Assessment is conducted more than six (6) months after a “not ready” decision from a technical reviewer for a previously failed stage 1 assessment, a new application is required – even if it is with the same certification body. The certification body cannot waive requirements for a new application to be submitted in this scenario.

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Section 6.2.8 – Repeated Stage 1 Readiness Assessment

Question:

Do past failed Stage 1 concerns "go away" after 6 months? The second paragraph of this clause indicates that a repeat Stage 1 assessment shall also include onsite verification of all actions taken to resolve concerns from past failed Stage 1 assessments. Based on the language provided in 6.1.1 n), the time limit for this should only be the prior 6 months, correct?

Answer:

Yes, this is the intent. After 6 months, previous Stage 1 Readiness Assessment reports (including concerns) do not have to be considered during a (full) repeat Stage 1 assessment.

IATF Rules 6th Edition, section 6.1.1 n) states, “any audit reports from any failed stage 1 readiness assessments and/or stage 2 certification audits conducted within the last six (6) months, regardless of the certification body that conducted the previous audit(s)” shall be provided with the application information.

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Section 6.2.8 – Repeated Stage 1 Readiness Assessment

Question:

Will there be an option to select “remote audit” for a Stage 1 Readiness Assessment in the IATF Database?

Answer:

Yes.

The remote auditing method is permitted for the central location where the client’s quality systems management support function resides or for “limited scope and duration”- repeat Stage 1 Readiness Assessments.

Please refer to the IATF Rules 6th Edition, clause 5.2.1c) and clause 6.2.8 - last paragraph.

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Section 7.1 – Transfer Audit

Question:

7.1.b) states that an Initial audit (Stage 1 and 2) is required if the transferring standalone remote support location (SA-RSL) is not referenced on a valid manufacturing site certificate or only has a letter of conformance.

Does this mean that if in the certification scope and the application there is a SA-RSL that is not currently listed on a valid manufacturing site certificate, an Initial audit (not a transfer audit) would have to be conducted? If a transferring client tells its new certification body that it has a new support location that they want added - the certification body has no choice but to do a full initial audit?

Answer:

7.1 b) intends to state that if a SA-RSL is transferring to your certification body and the SA-RSL is not included in an issued IATF 16949 certificate or referenced on a LoC, an initial audit must be conducted at the SA-RSL.

However, the manufacturing site can have a transfer audit provided it has an issued IATF 16949 certificate.

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Section 7.1.2 – Transfer Audit Pre-Conditions

Question:

Does the note in this section mean that transfer pre-conditions may change in between the use of the transfer confirmation feature in the IATF Database and the transfer audit?

Answer:

Yes, the conditions for the client that is transferring may change up to the day the transfer audit starts, potentially preventing the transfer audit from being conducted.

The certification body is responsible for ensuring that all pre-conditions are met for the location under transfer at the start of the transfer audit.

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Section 7.1.2 – Transfer Audit Pre-Conditions

Question:

After the initial certification audit, is it possible to transfer to a different certification body in the next year?

Answer:

Yes, this is possible.

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Section 7.1.2 – Transfer Audit Pre-Conditions

Question:

Clause 7.1.2 a) seems to indicate that it is now possible for a standalone remote support location (SA-RSL) to have an independent certification contract with a certification body - is this the intent of the language?

Answer:

No, this is not the intent.

7.1.2 a) aligns with the language in Rules section 1.0, Eligibility, which states that the certification body contracted with a SA-RSL shall also have a contract with at least one manufacturing site receiving support from the SA-RSL.

SA-RSL locations cannot receive independent certification so they cannot have an independent contract with a certification body.

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Section 7.1.2 – Transfer Audit Pre-Conditions

Question:

Will standalone remote support locations (SA-RSLs) that transfer have activities associated in the IATF Database?

Answer:

Yes, but the activities for the SA-RSLs are very limited. The programming for this is currently being discussed.

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Section 7.2 – Special Audits

Question:

The opening paragraph of this clause mentions that special audits may be conducted "…at the discretion of the certification body to…"

Does this apply for 7.2 e) - even for 100% resolved nonconformities?

Answer:

No, it does not apply to 100% resolved nonconformities.

Section 5.11.3.1 requires a special audit to be scheduled to verify the effectiveness of the systemic corrective actions based on the accepted systemic action plan timing but no less than 90 calendar days before the next regular audit BEFORE a nonconformity can be considered 100% resolved.

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Section 7.3 – Using the Remote Auditing Method

Question:

Do certification bodies need to conduct a connection test before the audit or just assess that the remote technology (e.g., Teams, ZOOM) is suitable for conducting the remote audit?

Answer:

It is a good practice to perform a technology test, however, the IATF decided to allow the certification bodies use their own defined processes for assessing the remote technology suitability for using the remote auditing method.

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Section 7.3 – Using the Remote Auditing Method

Question:

1) Can senior management attend an audit remotely from another location during the management process audit?

2) Is it possible to attend the audit remotely by auditees working at the audited location because of space limitations?

Answer:

1) No. This does not permit employees working at other locations to participate in audits remotely. Remote participation in an audit is only permitted for "remote working employees" which are defined in section 10.0 as "employees whose regular worksite … is the location being audited but may perform his or her duties for the audited location from the employee's home office".

2) No. Auditees that are located at the site being audited, should be audited in person.

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Section 7.3 – Using the Remote Auditing Method

Question:

1) Do we need to increase the audit days by 5% when auditing remotely?

2) Is the procedure of remote audit same as the one under COVID-19?

Answer:

1) No increase to audit days is required for using the remote auditing method; however, if the certification body chooses to add additional time, the Rules do not prohibit it.

2) The remote auditing procedure in the IATF Waivers and Measures for COVID-19 document was considered standard practice. The document is now obsolete.

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Section 7.3 – Using the Remote Auditing Method

Question:

Do the requirements in section 7.3 allow the remote auditing method to be used in every surveillance audit if no product or material handling occurs at the location?

Answer:

No.

The remote auditing method may only be used for conducting surveillance audits at standalone remote support locations (SA-RSLs) where no product or material handling occurs (see Annex 2 – List of Support Functions)

Once a SA-RSL is in continuous surveillance audit mode (SA-RSLs do not have a three-year audit cycle, [5.5.1]), the SA-RSL shall be audited onsite at every other surveillance audit, excluding special audits.

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Section 7.3 – Using the Remote Auditing Method

Question:

Is a “blended” audit possible if a standalone remote support location’s (SA-RSL’s) support functions include eligible and non-eligible activities according to Annex 2?

Answer:

No.

If a SA-RSL has functions that handle product and material and some that do not, the audit shall be conducted completely onsite.

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Section 8.0 – Decertification Process

Question:

Why is there no statement about the maximum suspension period?

Answer:

The language and timing has changed, but the intent is the same.

Rules 5th, section 8.3, stated the certificate suspension is a temporary status not exceeding 110 calendar days from the start of the certificate decertification process which results in either reinstatement or withdrawal.

Rules 6th, section 8.5, states a decision to reinstate or withdraw the certificate shall be made within 120 calendar days after the start of the decertification process and before the certificate expiration date. Section 8.0 states certificate suspension is a temporary status and will result in certification reinstatement or withdrawal.

The additional time (120 days instead of 110 days) aligns the certificate reinstatement or withdraw decision with the timing of a regular certification decision.

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Section 8.1 – Initiation of the Decertification Process

Question:

Will there be instructions on which level of escalations (e.g., special status condition) is considered as a trigger for initiation of decertification process for both IATF OEM and Non IATF OEM?

Answer:

No, there will be no instructions for the level of escalation triggers the decertification process.

Special status conditions no longer automatically initiate the decertification process. If a complaint related to a special status condition is filed through the IATF CMS, the decertification process begins.

Rules 6th Edition no longer requires the client to tell their certification body of a special status condition from an IATF OEM.

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Section 8.2 – Analysis of the Situation

Question:

Where shall the information from a nonconformity be recorded (i.e., statement, requirement, objective evidence, client's response) now since a nonconformity cannot be issued due a performance complaint?

Answer:

Rules 6th states when a performance complaint is issued in the IATF Complaint Management System (CMS)…the certification body shall not issue a nonconformance to the client due to a complaint being filed.

The reason for this is because the complaint form in the IATF CMS is set up like a nonconformance and includes fields for a complaint statement (like the statement of nonconformity), identifies the IATF 16949 requirements violated, and includes objective evidence which is completed by the customer filing the complaint.

When the certification body decides to suspend the certificate, the client is notified and is required to submit their root cause analysis and corrective actions into the complaint form. The certification body is required to approve or reject the client's submitted response. The timing of the complaint aligns with the decertification process.

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Section 8.3 – Suspension Decision

Question:

Where the decertification process was initiated due to a performance complaint filed through IATF Complaint Management System (IATF CMS) and the client fails to provide additional information to complete the analysis of situation within deadline, can certification body suspend the certificate?

Answer:

If the client fails to provide the additional information required within the 15 calendar days from the start of the decertification process, the certification body should suspend the certificate.

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Section 8.3 – Suspension Decision

Question:

In case client fails to provide problem solving response within 20 calendar days in the IATF Complaint Management System (IATF CMS), will there be any action on client?

Answer:

If the client fails to provide a problem-solving response within 20 calendar days, the certification body should first reach out to the client to ensure they received the email notification of the certificate suspension (from the certification body and automatic notification from the IATF CMS system with the special access code and link to open the complaint).

Rules 8.4 states the certification body shall review the client's root cause analysis and systemic corrective action plan and decide on its acceptability before conducting the special audit.

If the client fails to upload their problem-solving response in the IATF CMS system, the special audit cannot be conducted, and the certificate is withdrawn.

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Section 8.3 – Suspension Decision

Question:

The Note in section 8.3 states the notification of suspension may occur through the issuance of the final audit report or through the IATF Complaint Management System (IATF CMS) . Does that mean the CARA report will have separate field for notification to the client and separate emails can be eliminated?

Answer:

The IATF CARA will be modified to include a field for the Technical Reviewer's decision to suspend the certificate; therefore, no additional notification is required from the certification body to the client once the final audit report with the Technical Reviewer's decision is provided to the client.

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Section 8.4 – Special Audit

Question:

If the certificate was suspended due to a nonconformity at a surveillance audit and the nonconformity was approved as 100% resolved (per 5.11.3.1), is it possible to perform the special audit remotely?

Answer:

No. The special audit to verify the implementation of systemic corrective actions for 100% resolved condition shall be onsite, stated clearly in each of the following clauses 8.4, 5.11.3.1 d), and 7.3 (Remote Auditing Method).

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Section 8.4 – Special Audit

Question:

If the outcome of the special audit for a performance complaint is that the result is 100% resolved, when shall this be conducted? The minimum 90 calendar days prior to the next regular audit (from the requirements in 5.11.3.1) to conduct the special audit may be too short.

Answer:

There are no current rules that allow the certification body to consider the corrective actions related to a performance complaint to be 100% resolved. This term is only used for nonconformances issued during audits.

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Section 8.7 – Actions after Certification Withdrawal

Question:

Is there any limit on the number of special audits that can be conducted to verify the effective implementation of systemic corrective actions which led to certificate withdraw before an initial audit?

Answer:

The client shall have as many additional special audits as necessary until the issues that resulted in certification withdrawal have been resolved and systemic corrective actions are found to be effectively implemented. The NOTE under 8.7 states a special audit is not required after 3 years of certification withdrawal.

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Section 9.1 – Certification Records

Question:

Can certification bodies approve the "application for audit day reduction”?

Answer:

The certification body–approved “Application for Audit Day Reduction” shall be entered into the IATF Database and forwarded to the relevant Oversight office with supporting evidence before the start of the audit (see section 5.2 h 2). Oversight approval is not needed.

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Section 9.1 – Certification Records

Question:

Clause 9.1 talks about waivers being approved by certification bodies - what type of waivers would a certification body be approving?

Answer:

There may be situations where the relevant Oversight office may require the certification body to use an internal waiver process and maintain records for the certification body internally approved waivers.

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Section 9.2 – Personnel Records

Question:

Regarding the requirements in 9.2 c) and f), no time scales are stated for periodic review. Is this expected to be per audit or annually?

Answer:

Basically, section 9.2 is requiring certification bodies to maintain up-to-date personnel records and information, so certification bodies must have a process to ensure this.

Regarding point f), section 5.6 of the Rules requires each member of the audit team and any technical expert to declare **before each audit,** any conflicts of interests with the client.

Additionally, section 5.12 requires the certification body to ensure Technical Reviewers are different from those who conducted the audit and have no conflicts of interest that may impact their ability to conduct an impartial review and/or make an impartial certification decision.

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Section 9.2 – Personnel Records

Question:

Can you explain which personnel are required to disclose training and consulting businesses in which internal or external personnel or their family members have ownership or involvement? Is it all members of a certification body or just auditors? How far back do we go relating to family members?

Answer:

All levels of the organization are required to disclose any conflicts of interest known to them; any family member with whom there is a relationship that may present a conflict of interest must be disclosed, regardless of their place or position in the family.

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Section 10.0 – Terms and Definitions

Question:

The definition of "soft grading" is missing one important point, i.e., purposely categorizing of a major as an "opportunity for improvement" missing in the definition.

Answer:

It was not deemed necessary to specify this possible situation as it because this case is to be considered soft auditing.

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Annex 1 – Audit Day Calculation Examples

Question:

Has the method for applying more than one discount changed? Annex 1 appears to show only one step in the method now? Is this correct?

Answer:

Yes. The method has been simplified to remove the "staged reduction" method of applying the discounts. Now, the discount percentages are combined (by adding them together) into one factor and then applying the discount.

OLD Method Example:

11.0 days*0.85 (non-design) = 9.35 9.35*0.85 (corporate scheme) = 7.9475 -> 8.0 days

NEW Method Example:

11.0 days*0.70 (non-design 15% + corporate scheme 15%) = 7.7 -> 8.0 days

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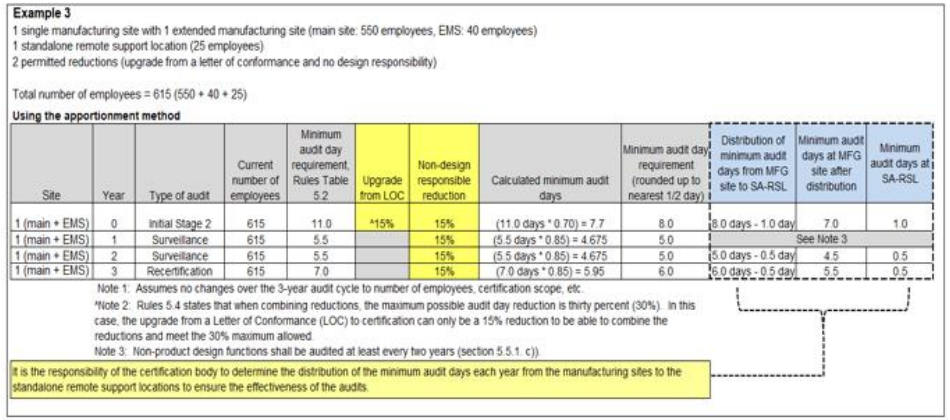
Annex 1 – Audit Day Calculation Example 3

Question:

Annex 1, example 3 shows minimum audit days of 8.0 the for initial audit stage 2, but the calculation for the distribution of minimum audit days from the manufacturing site to the standalone remote support location (SA-RSL) were not clear. Is it based on the apportion ratio of 25/615 = 0.04? How do you get one man-day for the SA-RSL?



Example 3

1 single manufacturing site with 1 extended manufacturing site (main site: 550 employees, EMS: 40 employees)
1 standalone remote support location (25 employees)
2 permitted reductions (upgrade from a letter of conformance and no design responsibility)

Total number of employees = 615 (550 + 40 + 25)

Using the apportionment method

Site	Year	Type of audit	Current number of employees	Minimum audit day requirement, Rules Table 5.2	Upgrade from LOC	Non-design responsible reduction	Calculated minimum audit days	Minimum audit day requirement (rounded up to nearest 1/2 day)	Distribution of minimum audit days from MFG site to SA-RSL	Minimum audit days at MFG site after distribution	Minimum audit days at SA-RSL
1 (main + EMS)	0	Initial Stage 2	615	11.0	^15%	15%	(11.0 days * 0.70) = 7.7	8.0	8.0 days - 1.0 day	7.0	1.0
1 (main + EMS)	1	Surveillance	615	5.5		15%	(5.5 days * 0.85) = 4.675	5.0	See Note 3		
1 (main + EMS)	2	Surveillance	615	5.5		15%	(5.5 days * 0.85) = 4.675	5.0	5.0 days - 0.5 day	4.5	0.5
1 (main + EMS)	3	Recertification	615	7.0		15%	(7.0 days * 0.85) = 5.95	6.0	6.0 days - 0.5 day	5.5	0.5

Note 1: Assumes no changes over the 3-year audit cycle to number of employees, certification scope, etc.
^Note 2: Rules 5.4 states that when combining reductions, the maximum possible audit day reduction is thirty percent (30%). In this case, the upgrade from a Letter of Conformance (LOC) to certification can only be a 15% reduction to be able to combine the reductions and meet the 30% maximum allowed.
Note 3: Non-product design functions shall be audited at least every two years (section 5.5.1. c)).

It is the responsibility of the certification body to determine the distribution of the minimum audit days each year from the manufacturing sites to the standalone remote support locations to ensure the effectiveness of the audits.

Answer:

The example in the Annex is only an example to demonstrate the meaning of “distribution of days”. There is no equation or calculation for the distribution of minimum audit days from the manufacturing site to the SA-RSL. The certification bodies must consider the requirements in section 5.2.3.items 1) - 6) when determining the number of days that are distributed from a manufacturing site to a SA-RSL and be able to justify it.

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Annex 1 – Audit Day Calculation Example 7

Question:

In Annex 1, Audit Day Calculation Example 7, in the second table, the calculation for the Stage 2 Audit is mentioned as Site 1 (Main & EMS); however, in the example the EMS is not mentioned. This is leading to confusion on how minimum audit days are derived for the Stage 2 as 8 minimum audit days.

Answer:

This is an error that will be corrected with an SI.

Example 7

Corporate certification structure
3 single manufacturing sites (site 1: 590 employees, site 2: 800 employees, site 3: 850 employees)
2 standalone remote locations, including a central location (Total of 125 employees)
2 permitted reductions (non-design responsibility and corporate certification structure)

Using the apportionment method

Site	Number of employees at site	Apportionment ratio (Employees at site / total number of employees [2240])	Number of employees apportioned from SA-RSLs (Total number of employees at SA-RSLs [125] * Apportionment ratio)	Total number of employees at audited entity used for minimum audit day calculation
1	590	26%	32	622
2	800	36%	45	845
3	850	38%	48	898
	Total = 2,240	Total = 100%	Total = 125	Total = 2,365

Calculation for Stage 2 Audit:

Site	Number of employees at site	Minimum audit day requirement, Rules Table 5.2	Non-design responsible reduction	Corporate certification structure reduction	Calculated minimum audit days	Minimum audit day requirement (rounded up to nearest 1/2 day)
1 (Main & EMS)	622	11.0	15%	15%	(11.0 days * 0.70) = 7.7	8.0
2	845	12.0	15%	15%	(12.0 days * 0.70) = 8.4	8.5
3	898	12.0	15%	15%	(12.0 days * 0.70) = 8.4	8.5
	Total = 2,365					

Calculation for Surveillance Audit 1 & 2:

Site	Number of employees at site	Minimum audit day requirement, Rules Table 5.2	Non-design responsible reduction	Corporate certification structure reduction	Calculated minimum audit days	Minimum audit day requirement (rounded up to nearest 1/2 day)
1 (Main & EMS)	622	5.5	15%	15%	(5.5 days * 0.70) = 3.85	4.0
2	845	6.0	15%	15%	(6.0 days * 0.70) = 4.2	4.5
3	898	6.0	15%	15%	(6.0 days * 0.70) = 4.2	4.5
	Total = 2,365					

Calculation for Recertification Audit:

Site	Number of employees at site	Minimum audit day requirement, Rules Table 5.2	Non design responsible reduction	Corporate certification structure reduction	Calculated minimum audit days	Minimum audit day requirement (rounded up to nearest 1/2 day)
1 (Main & EMS)	622	7.0	15%	15%	(7.0 days * 0.70) = 4.9	5.0
2	845	7.5	15%	15%	(7.5 days * 0.70) = 5.25	5.5
3	898	8.0	15%	15%	(8.0 days * 0.70) = 5.6	6.0
	Total = 2,365					

Note 1: Assumes no changes over the 3-year audit cycle to number of sites or SA-RSLs, number of employees, certification scope, etc.

It is the responsibility of the certification body to determine the distribution of the minimum audit days each year from the manufacturing sites to the standalone remote support locations to ensure the effectiveness of the audits.

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Annex 2 – List of Support Functions

Question:

Rules 6th provides no official definitions of the support functions and there are potentially duplicate support functions in the list.

Answer:

Yes, we are aware. There has been no change to the list of support functions.

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Annex 2 – List of Support Functions

Question:

1. What activities are part of the "Customer service"? What activities are "Servicing"?

2. What is the difference between “Laboratory” and “Testing”?

3. Automotive Supply Chain would appreciate that clear definition for support functions is added. What is the difference among “Process Design” and “Engineering”? Why there is “Finance”? And why there is no "Planning"?

Answer:

Currently, there is no plan to define support functions.

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Annex 2 – List of Support Functions

Question:

Is the list of support functions applicable to indirect support locations (a.k.a., “remote of the remote”)?

Answer:

The list of support functions is applicable for determining the names of support functions at indirect support locations; however, the list is not relevant for determining if an audit of an indirect support location is permitted to be audited remotely.

Section 5.5. allows the certification body to use its discretion in determining whether an onsite or remote audit is required to include an indirect remote support location in an audit for the standalone remote support location (SA-RSL).

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Annex 2 – List of Support Functions

Question:

Why is “product design” permitted to be audited remotely?

Answer:

Whilst it is permitted to audit product design remotely, it is not mandated. The certification body decides whether use of the remote auditing method is appropriate.

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Annex 3 – Table for Documenting the Output of the Audit Planning Process

Question:

Auditors for our certification body are allowed 0.5 days (paid) for audit planning and preparation time . What if the audit plan time recorded on the preplanning form is greater than 0.5 days?

Answer:

The Rules do not mandate that audit preparation and planning is paid time for auditors.

The Rules require the certification body to provide a minimum of ½ day for audit preparation and planning and enter this time into the IATF Database. If the certification body chooses to allocate more than ½ day, this will need to be entered into the IATF Database.

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