ISO 9001:2026 Gap Analysis Plan

Programme for implementing gap closure actions when certifying a Quality Management System to ISO 9001:2026

Start Date (Monday): Mon 4 May 2026 **Status Date:** Tue 22 Sep 2026

Overall Progress: 0.0% **Target Finish:** Fri 16 Oct 2026

Instructions

1. Set the Start Date in cell C4 — must be a Monday. All Gantt week dates and default task dates derive from this anchor.
2. Review each gap closure action's planned Start (column G) and Finish (column H) dates and adjust to your organization's circumstances. Duration (column I) and the Gantt bars update automatically.
3. Transfer the identified gaps into single rows below, from Cell C20 onwards
4. As work progresses, update Progress % in column J. Status (column K) and Gantt bar colour update automatically (grey=not started, blue=in progress, amber=at risk, green=complete, red=overdue).

Gap Ref.	Clause (ISO 9001:2026)	Description of Gap Identified	Proposed Remedial Action	Responsibilities & Resources	Deliverables & Outputs	Start Date	Finish Date	Duration (days)	Progress %	Status	Milestone	Notes
1	4.1	Climate-relevant external/internal issues are not considered in context analysis (per Clause 4.1).	Refresh context analysis to address climate change as both an external issue and a relevant interested-party requirement; update the context register.	QMS Lead (lead); Top Management; Sustainability Lead. Resources: half-day workshop, climate-risk reference data.	Updated context register (per P0410-01); meeting minutes; Management Review input.	2026-05-04	2026-05-15	10	0%	Overdue	N	ISO 9001:2026 Clause 4.1 explicitly requires climate consideration in clause 4.1.
2	4.2	Interested parties' relevant requirements (incl. climate-related expectations) not formally assessed.	Update interested-parties register (P0420-01); for each party, evaluate relevant requirements, including climate-related expectations.	QMS Lead (lead); Sales; Procurement; HR; Communications.	Revised interested-parties register flagging climate-relevant requirements.	2026-05-11	2026-05-22	10	0%	Overdue	N	ISO 9001:2026 Clause 4.1 requires climate consideration in clause 4.2 alongside other relevant requirements.
3	4.3	QMS scope statement does not specify products, services, or sites; non-applicable clauses (e.g. 8.3) lack documented justification.	Revise QMS scope to specify products, services, sites, and any non-applicable 9001 clauses with formal justification (per P0434-01).	Top Management (approve); QMS Lead (draft); Operations.	Approved QMS Scope Statement; documented exclusion justifications; communication to staff.	2026-05-18	2026-05-22	5	0%	Overdue	Y	Milestone — must be approved before QMS Manual finalisation.
4	4.4	QMS processes and their interactions are not documented; process map outdated or absent.	Map QMS processes; define inputs, outputs, sequence, interactions, controls, and KPIs (per P0434-01).	QMS Lead (lead); Process Owners.	QMS process map; process interaction matrix; KPI register.	2026-05-18	2026-06-05	15	0%	Overdue	N	Use turtle diagrams per QMS suite pattern.
5	5.1	Top management commitment not visibly demonstrated; leadership-and-commitment evidence weak.	Establish leadership-commitment communication plan covering policy, objectives, customer focus, and continual improvement; communicate via internal channels.	Top Management; Communications; QMS Lead.	Documented leadership commitment statement; all-staff communication; meeting minutes.	2026-05-25	2026-05-29	5	0%	Overdue	N	Clause 5.1 (a)–(j) — visible commitment is required.
6	5.2	Quality Policy does not include all required commitments (satisfy applicable requirements; continual improvement) and is not aligned with strategic direction.	Revise Quality Policy to include all 5.2.1 commitments; ensure availability, communication, and accessibility per 5.2.2.	Top Management (approve); QMS Lead (draft); Communications.	Revised Quality Policy signed by Top Management; published internally and to interested parties.	2026-06-01	2026-06-12	10	0%	Overdue	Y	Milestone — gates the rest of the QMS document set.
7	6.1	Risk-based thinking methodology absent; no R&O register linked to context and interested parties.	Implement P0611-01 Risks and Opportunities; build R&O register linked to context (4.1), IPs (4.2), and key processes; integrate climate-related risks.	QMS Lead (lead); Heads of Department; Process Owners.	R&O register (F0611-01); risk methodology document; treatment action plans.	2026-06-08	2026-07-03	20	0%	Overdue	N	Risk-based and opportunity-based thinking are core to ISO 9001:2026; replaces the formal preventive action requirement.
8	6.2	Quality objectives are not measurable, monitored, or supported by action plans.	Set SMART objectives at relevant functions and levels; for each objective define what/resources/who/when/how-evaluated (per P0620-01).	QMS Lead (lead); Top Management (approve); Functional Managers.	Updated F0620-01 Quality Objectives workbook with measurable KPIs and action plans.	2026-06-15	2026-07-03	15	0%	Overdue	N	Use SMART criteria; align with risks and opportunities (Step 8).



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9	6.3	No formal change-management procedure for QMS changes; ad-hoc handling of process changes.	Develop and implement P0630-01 Change Management; define change request, assessment, authorisation, and verification workflow.	QMS Lead (lead); Process Owners; Top Management.	P0630-01 Change Management procedure; F0630-01 change request form; change log.	2026-06-22	2026-07-17	20	0%	Overdue	Y	Milestone — gates control of subsequent QMS evolution.
10	7.1.5	Monitoring and measuring resources are not calibrated, traceable, or identified; calibration register absent.	Establish calibration programme per P0715-01; identify all M&M equipment used to verify product conformity; ensure traceability.	Operations; Quality; Maintenance.	Calibrated equipment register; calibration certificates traceable to recognised standards.	2026-06-29	2026-07-24	20	0%	Overdue	N	Calibration must be traceable to international/national standards (or basis recorded where none exist).
11	7.2, 7.3	Competence requirements not defined per role; awareness of policy, objectives, and contributions weak across personnel.	Build competence matrix per role; deliver awareness briefing to all personnel (per P0723-01); maintain training records.	HR; QMS Lead; Heads of Department.	Competence matrix; training plans; training records (F0723-01); awareness briefing material.	2026-07-06	2026-07-31	20	0%	Overdue	N	Awareness reaches ALL personnel within scope, not just QMS team.
12	7.4	Internal and external communication processes ad-hoc; no communications matrix mapping what/when/whom/how/who.	Develop communications matrix per P0740-01; cover internal channels (briefings, intranet) and external (customer, regulator, CB).	Communications Lead; QMS Lead.	P0740-01 Communication procedure; communications matrix; reporting templates.	2026-07-13	2026-07-31	15	0%	Overdue	N	Clause 7.4 (a)–(e) — what, when, with whom, how, and who communicates.
13	7.5	Document control workflow weak; no Master Document List; retention periods not defined; obsolete documents not controlled.	Implement P0750-01 Documented Information; build Master Document List (F0750-01); define retention periods; configure access controls.	QMS Lead (lead); Document Controller; IT.	F0750-01 Master Document List; document control workflow; retention schedule.	2026-07-20	2026-08-14	20	0%	Overdue	N	Cover creation, identification, format, review/approval, distribution, access, retrieval, retention, change control, and disposition (Clause 7.5.3).
14	8.2	Customer requirements not formally reviewed before commitment; changes to orders not consistently re-reviewed or communicated.	Implement P0820-01 Order and Contract Review; establish formal review point before commitment; define change re-review trigger.	Sales; Engineering; Quality.	P0820-01 Order and Contract Review procedure; review records; change communication route.	2026-08-03	2026-08-28	20	0%	Overdue	N	Clause 8.2.3 requires review before commitment; covers customer, statutory, and post-delivery requirements.
15	8.4	Supplier evaluation criteria absent or inconsistently applied; approved supplier list (ASL) outdated; no risk-based supplier categorisation.	Implement P0840-01 Supplier Evaluation and P0840-02 Purchasing and Procurement Control; build risk-categorised ASL; define re-evaluation cadence.	Procurement; Quality; Engineering.	Approved Supplier List with risk categorisation; supplier evaluation records; updated PO terms.	2026-08-17	2026-09-11	20	0%	Overdue	N	Critical suppliers receive more rigorous evaluation than low-risk; supplier corrective action via P1020-02.
16	9.2, 9.3	Internal audit programme not established; auditors untrained; management review inputs incomplete (no customer satisfaction, R&O effectiveness, or audit data).	Train internal auditors (T0921-01..06); establish audit programme per P0920-01; conduct first cycle; populate full 9.3.2 management review inputs.	QMS Lead; Internal Auditors; Top Management.	Audit programme schedule; audit reports; corrective actions closed (P1020-01); 2nd MR minutes (P0930-01).	2026-08-31	2026-10-16	35	0%	At Risk	Y	Milestone — readiness gate before CB Stage 1 audit.

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Legend: Not Started | In Progress | At Risk | Complete | Overdue

Programme totals 260

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