## ISO 9001:2026 Implementation Plan

52-week programme for establishing, implementing and certifying a Quality Management System to ISO 9001:2026

**Start Date (Monday):** Mon 4 May 2026 **Status Date:** Tue 22 Sep 2026 **Target Finish:** Fri 26 Mar 2027 **Overall Progress:** 4.6%

### Instructions

1. Set the Project Start Date in cell C4 — must be a Monday. All Gantt week dates and default task dates derive from this anchor.
2. Review each task's planned Start (column H) and Finish (column I) dates and adjust to your organization's circumstances. Duration (column J) and the Gantt bars update automatically.
3. Assign an Owner (column E) to each task and confirm Predecessors (column F).
4. As work progresses, update Progress % in column K. Status (column L) and Gantt bar colour update automatically (grey=not started, blue=in progress, amber=at risk, green=complete, red=overdue).
5. The Implementation Checklist filenames (column G) can be hyperlinked to the corresponding .docx files in your project folder. Milestones (column M) are flagged with Y.

| Step | Phase | Activity | Clause (ISO 9001:2026) | Owner | Predecessors | Implementation Checklist | Start Date | Finish Date | Duration (days) | Progress % | Status | Milestone | Notes |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | Initiate | Top management commits to the QMS, assigns resources, appoints QMS Lead and forms QMS Implementation Team | 5.1, 5.3, 7.1 | Top Management | | Step 01 - Assign Resources and Form QMS Team.docx | 4 May 2026 | 15 May 2026 | 10 | 100% | Complete | N | Top management commitment is the foundation. QMS Lead must have authority and protected time. |
| 2 | Initiate | Obtain ISO 9001:2026 and build core team knowledge of the standard | 7.2, 7.3 | QMS Lead | 1 | Step 02 - Adopt ISO 9001-2015.docx | 11 May 2026 | 29 May 2026 | 15 | 75% | Overdue | N | Current edition is ISO 9001:2026. The ISO 9001:2026 Clause 4.1 added climate context to clauses 4.1 and 4.2. |
| 3 | Plan | Determine external and internal issues, including climate context (per Clause 4.1) | 4.1 | QMS Lead | 2 | Step 03 - Determine Context.docx | 18 May 2026 | 12 Jun 2026 | 20 | 50% | Overdue | N | Implement P0410-01 Context Analysis. Output feeds Risks & Opportunities (step 8) and Scope (step 5). |
| 4 | Plan | Identify interested parties, their relevant needs and expectations, and which are tracked as requirements | 4.2 | QMS Lead | 3 | Step 04 - Interested Parties.docx | 25 May 2026 | 19 Jun 2026 | 20 | 25% | Overdue | N | Implement P0420-01 Interested Party Analysis. Customer requirements receive most attention; consider regulators, suppliers, employees, owners. |
| 5 | Plan | Determine and document the QMS scope, boundaries, applicability, and process architecture | 4.3, 4.4 | QMS Lead | 3,4 | Step 05 - Define QMS Scope.docx | 8 Jun 2026 | 19 Jun 2026 | 10 | 2% | Overdue | N | Implement P0434-01 QMS Scope and Process Architecture. Document any 9001 requirements deemed not applicable, with justification. |
| 6 | Plan | Deliver QMS awareness briefing to all personnel within scope (purpose, policy, contributions) | 7.3 | QMS Lead | 5 | Step 06 - QMS Awareness.docx | 15 Jun 2026 | 3 Jul 2026 | 15 | 0% | Overdue | N | Awareness is a 7.3 requirement and must reach all personnel — not just QMS team. Refresh annually. |
| 7 | Plan | Conduct gap analysis against ISO 9001:2026 requirements to identify priority remediation | 9.3 input | QMS Lead | 5 | Step 07 - Gap Analysis.docx | 22 Jun 2026 | 17 Jul 2026 | 20 | 0% | Overdue | Y | Gap analysis output drives 'Close Priority Gaps' (step 13). MILESTONE — feeds 1st Management Review. |
| 8 | Plan | Determine risks and opportunities from context, interested parties and key processes | 6.1 | QMS Lead | 3,4,7 | Step 08 - Risks and Opportunities.docx | 13 Jul 2026 | 7 Aug 2026 | 20 | 0% | Overdue | N | Implement P0611-01 Risks and Opportunities. Risk-based and opportunity-based thinking are core to ISO 9001:2026; integrate with quality objectives. |
| 9 | Plan | Establish, communicate, and approve the quality policy | 5.2 | Top Management | 3,7 | Step 09 - Quality Policy.docx | 27 Jul 2026 | 14 Aug 2026 | 15 | 0% | Overdue | N | Quality policy is a top management responsibility. Must be appropriate to context, support strategic direction, and commit to satisfying applicable requirements and continual improvement. |
| 10 | Plan | Set quality objectives at relevant functions and levels; develop action plans to achieve them | 6.2 | QMS Lead | 8,9 | Step 10 - Quality Objectives.docx | 3 Aug 2026 | 28 Aug 2026 | 20 | 0% | Overdue | N | Implement P0620-01 Quality Objectives. Objectives must be measurable, monitored, communicated and updated. Track via objectives workbook (e.g. F0620-01). |
| 11 | Plan | Define roles, responsibilities and authorities across the QMS | 5.3 | Top Management | 5 | Step 11 - Roles and Authorities.docx | 27 Jul 2026 | 7 Aug 2026 | 10 | 0% | Overdue | N | Implement P0530-01 Roles, Responsibilities and Authorities. Document on org chart and in role descriptions; ensure communication. |
| 12 | Plan | 1st Management Review and Certification Body selection | 9.3 | Top Management | 7,9,10,11 | Step 12 - Management Review 1.docx | 24 Aug 2026 | 4 Sep 2026 | 10 | 0% | Overdue | Y | Implement P0930-01 Management Review. MILESTONE — review readiness and select CB. Begin CB shortlisting process. |
| 13 | Do | Close priority gaps identified in gap analysis and early planning | 10.1 | QMS Lead | 7,12 | Step 13 - Close Priority Gaps.docx | 24 Aug 2026 | 27 Nov 2026 | 70 | 0% | At Risk | N | Track each gap as a Corrective Action via P1020-01. Close-out evidence retained with audit records. |
| 14 | Do | Establish competence requirements, training programme and awareness records | 7.2, 7.3 | HR / QMS Lead | 11 | Step 14 - Competence and Training.docx | 17 Aug 2026 | 16 Oct 2026 | 45 | 0% | At Risk | N | Implement P0723-01 Competence and Awareness. Define competence per role; gap-train as needed; maintain training records. |
| 15 | Do | Establish internal and external communication processes (what, when, with whom, how) | 7.4 | QMS Lead | 9 | Step 15 - Communication.docx | 31 Aug 2026 | 16 Oct 2026 | 35 | 0% | At Risk | N | Implement P0740-01 Communication. Define communications matrix; include regulator and customer notification routes. |
| 16 | Do | Establish control of documented information (creation, update, access, distribution, retention, disposal) | 7.5 | QMS Lead | 11 | Step 16 - Documented Information.docx | 31 Aug 2026 | 23 Oct 2026 | 40 | 0% | At Risk | N | Implement P0750-01 Documented Information. Maintain Master Document List (e.g. F0750-01). Define retention periods aligned to legal and contractual obligations. |
| 17 | Do | Establish QMS resources — infrastructure, work environment, monitoring and measuring resources | 7.1.3, 7.1.5 | Operations | 12 | Step 17 - QMS Resources.docx | 7 Sep 2026 | 30 Oct 2026 | 40 | 0% | At Risk | N | Implement P0713-01 Facilities and Infrastructure and P0715-01 Calibrated Test Equipment. Calibration required for monitoring/measurement equipment used to verify product conformity. |
| 18 | Do | Establish process for planning of changes to the QMS (purpose, consequences, integrity, resources) | 6.3 | QMS Lead | 12 | Step 18 - Planning of Changes.docx | 14 Sep 2026 | 16 Oct 2026 | 25 | 0% | At Risk | N | Implement P0630-01 Change Management. Each significant QMS change must be planned, with owner, schedule, and verification of effectiveness. |
| 19 | Do | Establish operational planning and control — process inputs, controls, outputs, criteria, records | 8.1 | Operations | 12,17 | Step 19 - Operational Planning.docx | 21 Sep 2026 | 20 Nov 2026 | 45 | 0% | At Risk | N | Implement P0810-01 Operational Control. Define process maps, criteria, controls, and records for each process in scope. |
| 20 | Do | Establish order/contract review and product design management (where applicable) | 8.2, 8.3 | Sales / Engineering | 19 | Step 20 - Order Review and Design.docx | 5 Oct 2026 | 27 Nov 2026 | 40 | 0% | Not Started | N | Implement P0820-01 Order and Contract Review and (if applicable) P0830-01 Product Design Management. 8.3 may be excluded if no design responsibility — document the exclusion. |
| 21 | Do | Establish supplier evaluation, selection, re-evaluation and purchasing/procurement controls | 8.4 | Procurement / Quality | 19 | Step 21 - Supplier Evaluation and Purchasing.docx | 5 Oct 2026 | 20 Nov 2026 | 35 | 0% | Not Started | N | Implement P0840-01 Supplier Evaluation and P0840-02 Purchasing and Procurement Control. Risk-based supplier categorisation; supplier corrective action via P1020-02. |
| 22 | Do | Establish production/service provision, inspection and testing, and control of nonconforming outputs | 8.5, 8.6, 8.7 | Operations / Quality | 19,20,21 | Step-22 - Production Inspection and NC Control | 26 Oct 2026 | 18 Dec 2026 | 40 | 0% | Not Started | N | Implement P0850-01 Product Provision, P0860-01 Inspection and Testing, P0870-01 Nonconforming Product Outputs. Identification, traceability, preservation, post-delivery, and NC handling. |
| 23 | Check | Establish monitoring, measurement, analysis and evaluation of QMS performance | 9.1.1, 9.1.3 | QMS Lead | 10,19,22 | Step 23 - Monitoring and Measurement.docx | 9 Nov 2026 | 25 Dec 2026 | 35 | 0% | Not Started | N | Implement P0913-01 Analysis and Evaluation. KPI dashboard, process performance, trend analysis. Output feeds Management Review. |
| 24 | Check | Establish customer satisfaction monitoring (perception, feedback, complaints, returns) | 9.1.2 | Sales / QMS Lead | 20 | Step 24 - Customer Satisfaction.docx | 23 Nov 2026 | 25 Dec 2026 | 25 | 0% | Not Started | N | Implement P0912-01 Customer Satisfaction. Multiple sources (surveys, complaints, on-time delivery, returns) — not surveys alone. |
| 25 | Check | Train internal auditors; establish audit programme; conduct 1st cycle of internal audits and corrective actions | 9.2, 10.2 | QMS Lead / Internal Auditor | 14,22 | Step 25 - Internal Audit Programme.docx | 7 Dec 2026 | 29 Jan 2027 | 40 | 0% | Not Started | N | Implement P0920-01 Internal Auditing and P1020-01 Corrective Action. Auditors must be independent of activities being audited. Reference: T0921-01 to T0921-06 auditor training decks. |
| 26 | Check | 2nd Management Review — suitability, adequacy, effectiveness of the QMS | 9.3 | Top Management | 23,24,25 | Step 26 - Management Review 2.docx | 8 Feb 2027 | 19 Feb 2027 | 10 | 0% | Not Started | Y | MILESTONE. Per P0930-01 Management Review. Required inputs: status of actions from prior MR, changes, performance data, audit results, customer feedback, NCRs, R&O effectiveness, improvement opportunities. |
| 27 | Certify | Readiness review / pre-assessment against ISO 9001:2026 | 9.3 | QMS Lead | 26 | Step 27 - Readiness Review.docx | 15 Feb 2027 | 26 Feb 2027 | 10 | 0% | Not Started | N | Internal pre-assessment using ISO 9001 audit checklist. Close any residual findings before CB Stage 1. |
| 28 | Certify | Certification Body Stage 1 audit and close-out of findings | External | Certification Body | 27 | Step 28 - Stage 1 Audit.docx | 22 Feb 2027 | 12 Mar 2027 | 15 | 0% | Not Started | N | Stage 1 = documentation review and readiness assessment. CB checks scope, policy, objectives, gap analysis, MR records, internal audit programme. |
| 29 | Certify | Certification Body Stage 2 audit, close-out of findings, award of certification | External | Certification Body | 28 | Step 29 - Stage 2 Audit and Certification.docx | 8 Mar 2027 | 26 Mar 2027 | 15 | 0% | Not Started | Y | MILESTONE. Stage 2 = on-site assessment of QMS implementation. Closure of any major NCs required for certificate award. |

**Legend:** Not Started At Risk **Programme totals** 750 4.6%

SAMPLE

## RACI Matrix — 29 Implementation Steps × 9 Roles

R = Responsible (does the work) · A = Accountable (owns the outcome — one per row) · C = Consulted (gives input) · I = Informed (kept aware). Step / Activity / Clause auto-update from the master sheet.

| Step | Activity | Clause | Top Mgmt | QMS Lead | Internal Audit | Operations | Sales / Eng. | Procurement | HR | All Staff | Certif. Body |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | Top management commits to the QMS, assigns resources, appoints QMS Lead and forms QMS Implementation Team | 5.1, 5.3, 7.1 | A | R | | C | C | | C | I | |
| 2 | Obtain ISO 9001:2026 and build core team knowledge of the standard | 7.2, 7.3 | A | R | | | | | | I | |
| 3 | Determine external and internal issues, including climate context (per Clause 4.1) | 4.1 | A | R | | C | C | C | | I | |
| 4 | Identify interested parties, their relevant needs and expectations, and which are tracked as requirements | 4.2 | A | R | | C | C | C | C | I | |
| 5 | Determine and document the QMS scope, boundaries, applicability, and process architecture | 4.3, 4.4 | A | R | | C | C | C | | I | |
| 6 | Deliver QMS awareness briefing to all personnel within scope (purpose, policy, contributions) | 7.3 | A | R | | C | C | C | C | R | |
| 7 | Conduct gap analysis against ISO 9001:2026 requirements to identify priority remediation | 9.3 input | A | R | | C | C | C | | I | |
| 8 | Determine risks and opportunities from context, interested parties and key processes | 6.1 | A | R | | C | C | C | C | I | |
| 9 | Establish, communicate, and approve the quality policy | 5.2 | R | C | | C | C | | | I | |
| 10 | Set quality objectives at relevant functions and levels; develop action plans to achieve them | 6.2 | A | R | | C | C | C | C | I | |
| 11 | Define roles, responsibilities and authorities across the QMS | 5.3 | R | C | | C | C | C | C | I | |
| 12 | 1st Management Review and Certification Body selection | 9.3 | R | C | | I | I | I | I | I | I |
| 13 | Close priority gaps identified in gap analysis and early planning | 10.1 | A | R | | C | C | C | C | I | |
| 14 | Establish competence requirements, training programme and awareness records | 7.2, 7.3 | A | C | | C | C | C | R | I | |
| 15 | Establish internal and external communication processes (what, when, with whom, how) | 7.4 | A | R | | C | C | C | C | I | |
| 16 | Establish control of documented information (creation, update, access, distribution, retention, disposal) | 7.5 | A | R | | C | C | C | C | I | |
| 17 | Establish QMS resources — infrastructure, work environment, monitoring and measuring resources | 7.1.3, 7.1.5 | A | C | | R | C | C | | I | |
| 18 | Establish process for planning of changes to the QMS (purpose, consequences, integrity, resources) | 6.3 | A | R | | C | C | C | | I | |
| 19 | Establish operational planning and control — process inputs, controls, outputs, criteria, records | 8.1 | A | C | | R | C | C | | I | |
| 20 | Establish order/contract review and product design management (where applicable) | 8.2, 8.3 | A | C | | C | R | C | | I | |
| 21 | Establish supplier evaluation, selection, re-evaluation and purchasing/procurement controls | 8.4 | A | C | | C | C | R | | I | |
| 22 | Establish production/service provision, inspection and testing, and control of nonconforming outputs | 8.5, 8.6, 8.7 | A | C | | R | C | C | | I | |
| 23 | Establish monitoring, measurement, analysis and evaluation of QMS performance | 9.1.1, 9.1.3 | A | R | | C | C | C | | I | |
| 24 | Establish customer satisfaction monitoring (perception, feedback, complaints, returns) | 9.1.2 | A | C | | C | R | | | I | |
| 25 | Train internal auditors; establish audit programme; conduct 1st cycle of internal audits and corrective actions | 9.2, 10.2 | A | R | R | I | I | I | I | I | |
| 26 | 2nd Management Review — suitability, adequacy, effectiveness of the QMS | 9.3 | R | C | | I | I | I | I | I | I |
| 27 | Readiness review / pre-assessment against ISO 9001:2026 | 9.3 | A | R | C | C | C | C | | I | |
| 28 | Certification Body Stage 1 audit and close-out of findings | External | I | C | | I | I | I | I | I | R |
| 29 | Certification Body Stage 2 audit, close-out of findings, award of certification | External | I | C | | I | I | I | I | I | R |

| Legend | |
|---|---|
| R | Responsible — does the work |
| A | Accountable — owns the outcome (one per row) |
| C | Consulted — gives input |
| I | Informed — kept aware |

**Note** Rows shaded gold are programme-level milestones (Steps 7, 12, 26, 29). Treat their R and A assignments as immovable — escalation is direct to Top Management.

SAMPLE