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EHQMS GUIDANCE

Gap Analysis Questions & Action Plan Guide

How to plan and run an integrated ISO 9001, ISO 14001, and ISO 45001 gap analysis, turn the gaps into a tracked action plan, and report progress from the dashboard.

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1 Introduction

This guide explains how to use the IMS Gap Analysis Questions and Action Plan workbook in folder 5.0 Gap Analysis. It takes you from planning the gap analysis, through answering the questions and building the action plan, to reporting progress from the dashboard.

You do not need the rest of the EHQMS package to use the workbook. Where a package procedure or form would help, the guide mentions it so that EHQMS users can follow the link through.

1.1 What a Gap Analysis Is For

A gap analysis compares what your organization does today with what the standards require. Requirements that are partly met or not met are the gaps, and closing them becomes your implementation plan. It gives you:

- a baseline against ISO 9001:2026, ISO 14001:2026 and ISO 45001:2018 + Amd 1:2024;
- a list of what already works, so you do not rebuild it;
- a scheduled list of actions that management can approve and resource;
- a repeatable measure that shows the gaps closing over time.

A gap analysis is not an internal audit. An audit samples evidence against an established system and reports conformity. A gap analysis is a structured self-assessment, usually done before the system is complete, and its main output is a plan.

1.2 When to Use It

Use the workbook whenever you need a clear picture of where your system stands. Common situations:

Situation	How to use the workbook
Transition to the 2026 editions	Filter Column J (New / changed) and answer the 28 flagged questions first, then confirm the rest still comply.
New implementation	Answer every question. The action plan becomes your implementation project plan.
Adding a standard	Concentrate on questions covering the new standard, including its tagged wording in shared questions.
Pre-certification check	Run the analysis two to three months before the audit, leaving time to close NCs and collect evidence.

> **2026 CHANGE**
> Column J flags 28 questions that cover requirements that are new or changed in ISO 9001:2026, ISO 14001:2026 or ISO 45001 Amd 1:2024, such as climate change in context, risks and opportunities treated separately, planning of changes and quality culture. The 2026 Changes — Comply tile on the Dashboard shows the share of the answered flagged questions that you already meet.

1.3 What Is in the Workbook

The workbook has three tabs, which you complete in order. The banner under each title shows the step: Step 1 of 3, Step 2 of 3, and Step 3 of 3.



Figure 1 *How the gap analysis workbook fits together: findings on the questions tab feed the action plan, and both feed the Dashboard.*

Tab	What it does	What you do
Integrated Gap Questions	136 questions that integrate the requirements of the three standards, grouped by clauses 4 to 10. Each row shows the clauses covered in each standard and the wording of each standard's requirement.	Select a finding, record evidence, and describe the action needed.
Gap Analysis Action Plan	Lists every OFI and NC automatically, in question order, with a 52-week Gantt chart.	Assign owners, priorities, and dates, and update progress.
Dashboard	Ten KPI tiles and five charts, calculated from the other two tabs.	Nothing. Read it, print it and present it.

The 136 questions merge 358 source questions (159 from ISO 9001, 83 from ISO 14001 and 116 from ISO 45001). Where standards require the same thing, one question covers them; 67 questions apply to more than one standard. Requirements unique to one standard, such as design and development, environmental aspects or worker consultation, keep their own questions.

1.4 Who Should Take Part

One person can keep the workbook, but the findings are only as good as the people who supply the evidence.

Role	Contribution
EHQMS manager or implementer	Leads the analysis, owns the workbook, conducts the interviews, and records the findings.
Top management sponsor	Agrees the scope and timetable, answers the leadership questions (clause 5), and approves the action plan and its resources.
Process owners	Answer the questions for their processes and show the evidence: operations, purchasing, sales, design, maintenance and HR.
Environmental and H&S coordinators	Answer the aspects, compliance obligation, hazard, emergency and incident questions.
Workers and their representatives	ISO 45001 requires participation of non-managerial workers. Include them in the hazard, consultation and incident questions.
An internal auditor	Optional. Someone independent of the area tests the evidence and keeps the findings honest.

> **TIP**
> If an external consultant leads the interviews, keep one of your own staff on the workbook. Whoever records the findings usually ends up driving the actions.

Status	When it shows
Closed	A Completed on date is entered, whatever the other columns say.
Not planned	Planned start or planned finish is blank.
Overdue	Today is after the planned finish and the action is not closed.
In progress	% complete is above 0, or today is on or after the planned start.
Not started	The planned start is still in the future and % complete is 0 or blank.

Column Q, Days late, counts working days. For an open action past its planned finish, it counts working days after the planned finish up to today. For a closed action, it counts working days the completion date fell after the planned finish. Otherwise, it is 0. Values above 0 show in bold red.

Setting % complete to 100% does not close an action. Until you enter a Completed on date, the action stays In progress or turns Overdue.

4.5 The Weekly Gantt Chart

To the right of the table, Columns T to BS show 52 weeks starting from the Timeline from date. Each column is one week; the heading shows the Monday's date, and the dark band above shows the month name at the first week of each month.

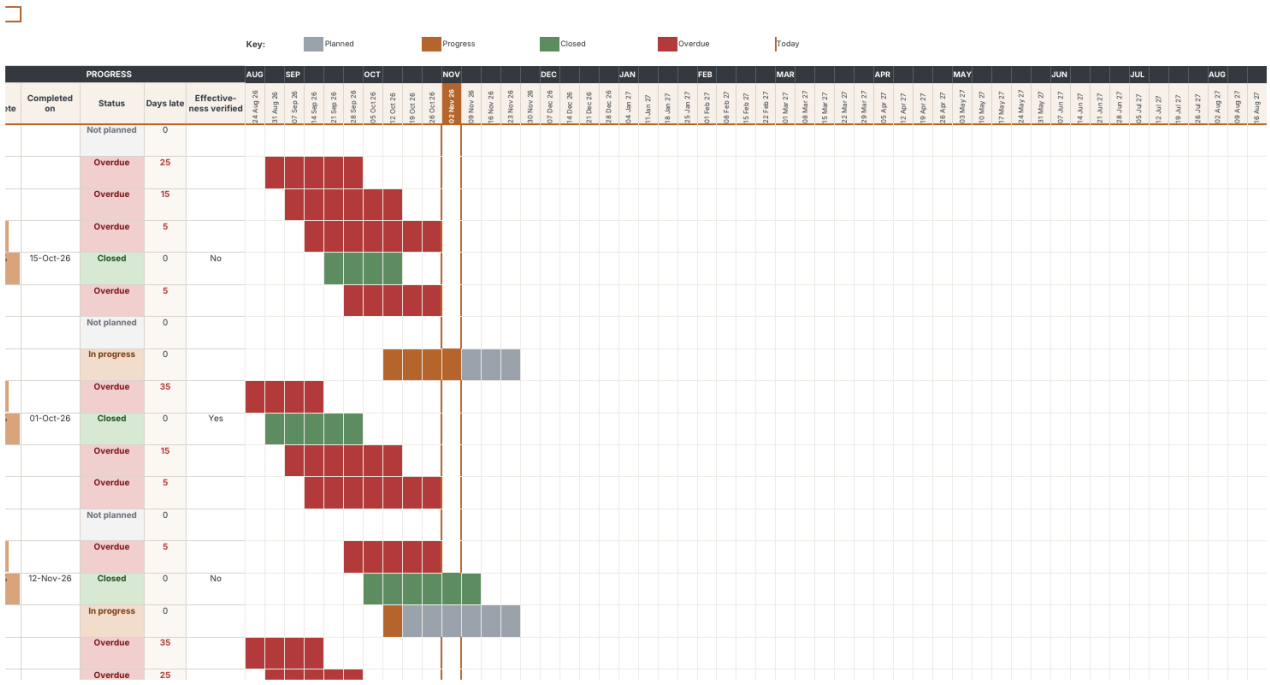


Figure 5 *The weekly Gantt chart: planned, in-progress, closed and overdue bars, with the current week outlined.*

A week is filled for an action when the action has both dates and the week overlaps the period from planned start to planned finish. The color follows these rules, in this order:

Color	Meaning
Green	The action is closed (a Completed on date is entered). The whole bar turns green.
Red	Today is after the planned finish and the action is not closed. The whole bar turns red.
Copper	The completed share of the bar. The copper part covers the same fraction of the planned period as % complete; a 50% complete action has its first half copper.

Color	Meaning
Grey	The remaining planned period.

The current week is highlighted in copper in the date heading and outlined down the rows that hold actions. A key above the chart repeats the colors.

Bars always show the planned dates, so an action finished early keeps its planned bar, in green. Dates more than 52 weeks after the Timeline fall outside the chart, although the status is still calculated.

4.6 When Action Plan IDs Shift

Action Plan IDs are assigned in question order, counting the OFI and NC findings from the top. The white cells you complete on the plan are typed into fixed rows; they do not move with the gap.

So changing a finding above an existing gap moves every gap below it. If you add a new NC to question 5 after planning, the gap that was ID 3 becomes ID 4, and every later ID moves up one, but the owner and dates you entered for the old ID 3 stay on row 3, now beside the new question 5 gap. Changing an OFI to Comply moves later gaps down one, leaving the last row's entries beside a blank ID, where they are ignored.

> IMPORTANT
> Complete and review all the findings before you start planning. If you must change a finding afterwards, check the plan rows below it and move the white entries to the right rows (cut and paste Columns H to L, N, O and R). Alternatively, record a gap found late as a note in the evidence and action text of the nearest related question, rather than changing a finding.

After any change, read down Columns C and H together and check that each owner still matches the question they agreed to.

4.7 Worked Example: Planning and Tracking

> WORKED EXAMPLE
> Gap 3 is the NC on question 5: the interested parties register does not cover ISO 45001. The EHQMS manager plans and tracks it as follows.

#	Action	Owner	Output/record
1	Enter Owner: H&S Coordinator. Resources: 1 workshop with the H&S committee; revised interested parties register. Priority: High.	EHQMS manager	Row 3 planned
2	Enter planned start Monday 1 March and planned finish Friday 26 March. Work days show 20.	EHQMS manager	Status: Not started, then In progress from 1 March
3	Update % complete to 50% after the workshop. The first half of the Gantt bar turns copper.	H&S Coordinator	Progress visible on Gantt
4	On Monday 29 March, the register is still in draft. The status turns Overdue, Days late shows 1 and the bar turns red.	Automatic	Overdue Actions tile increases
5	The register is approved on Wednesday 31 March. Enter Completed on and set % complete to 100%. Status shows Closed, the bar turns green, and Days late shows 3.	H&S Coordinator	Closed, 3 working days late
6	Six weeks later, check that the register is used in the risk review. Set Effectiveness verified to Yes.	EHQMS manager	Effectiveness Verified tile updates

5 The Dashboard

This is Step 3. The Dashboard is fully automatic, has no input cells, and prints on one A4 landscape page.

5.1 KPI Tiles

The Status date at the top right shows today's date. The tiles sit in two rows of five; each shows a large value with a short explanation underneath.



Figure 6 *The ten KPI tiles on the Dashboard.*

Tile	How it is calculated	Line underneath
Questions Answered	Questions with any finding (including N/A) ÷ 136	x of 136 questions
Compliance Rate	Comply ÷ (Comply + OFI + NC). N/A and blanks are excluded. Shows – until a finding is entered.	Comply ÷ (Comply + OFI + NC)
Gaps Identified	OFI + NC	Number of NC and OFI
Actions Closed	Actions with status Closed ÷ gaps identified	x of y actions
Overdue Actions	Actions with status Overdue	Working days late on the overdue (open) actions
Average Completion	Sum of % complete for all gaps ÷ gaps identified. A blank % complete counts as 0%.	Mean % complete of all actions
Open NCs	Actions with finding NC that are not closed	Nonconformities not yet closed
Not Yet Planned	Actions with status Not planned	Actions without start/finish dates
Effectiveness Verified	Closed actions marked Yes ÷ all Closed actions. Shows – until one is closed.	Closed actions confirmed effective
2026 Changes — Comply	Among the 28 flagged questions (Column J): Comply ÷ (Comply + OFI + NC). N/A and blanks are excluded. Shows – until a flagged question is answered.	Comply rate on answered flagged questions (28 flagged, incl. AMD 1)

The 2026 Changes tile is calculated on the same basis as the Compliance Rate, but only for the flagged questions, so you can compare the two directly. The 28 flagged questions include the 2 that cover ISO 45001 Amendment 1:2024.

The line under Overdue Actions totals Days late for the overdue actions only; actions that were closed late are not included.

5.2 Charts

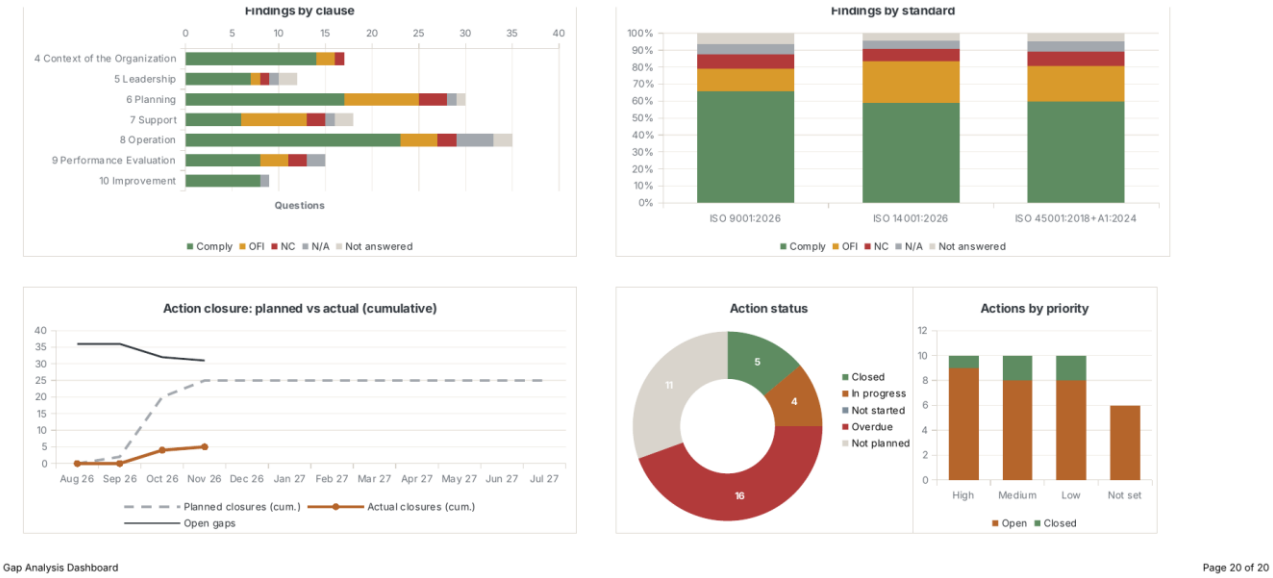


Figure 7 *Dashboard charts: findings by clause and by standard, planned versus actual closures, action status and actions by priority.*

Chart	What it shows
Findings by clause	Stacked bars for clauses 4 to 10 showing Comply, OFI, NC, N/A and Not answered. Each question counts once, under the clause of the first standard it covers.
Findings by standard	100% stacked columns for each standard, with the same five series. A question counts for every standard whose clause column is not a dash, so shared questions count more than once.
Action closure: planned vs actual (cumulative)	Twelve months starting from the month of the Timeline from date, or of the earliest planned start if that is earlier. The dashed line counts actions due by each month end (by planned finish). The copper line counts actions actually completed by each month end; it stops at the current month. The dark line shows gaps still open (all gaps less actual closures).
Action status	Doughnut of Closed, In progress, Not started, Overdue and Not planned, with counts.
Actions by priority	Open and closed actions for High, Medium, Low and Not set (no priority chosen).

On a healthy plan, the copper closure line tracks the dashed planned line and the red Overdue segment of the doughnut shrinks.

5.3 The Chart Data Area

Below the charts, from row 43, a band headed CHART DATA (calculated — do not edit) holds the tables behind the charts. Use them for exact figures, such as the compliance percentage for each standard, which appears in the table but not in a chart. The print area stops above this band. Months after the current month show #N/A in pale grey on purpose, so the actual line does not drop to zero.

5.4 Worked Example: Reading the Dashboard

> **WORKED EXAMPLE**
>
> After three weeks of interviews, the fabrication company has answered all 136 questions: 88 Comply, 26 OFI, 12 NC and 10 N/A. Two months into the plan, 9 actions are closed, 5 are overdue and 4 are not yet planned.

The tiles read: Questions Answered 100%; Compliance Rate 70% (88 ÷ 126); Gaps Identified 38 (12 NC, 26 OFI); Actions Closed 24% (9 of 38). The manager notices that Open NCs show 10, so only 2 of the 12 NCs have been closed, while 7 OFIs have. The plan is to close the easy gaps first.

Findings by clause show most NCs in clause 6, from the ISO 45001 hazard assessment questions, and Actions by priority show 3 actions with no priority. The manager sets those priorities, schedules the 4 unplanned actions, and asks top management to free time for the H&S coordinator, who owns most of the overdue clause 6 actions.

6 Using the Results

This chapter covers what to do with the gaps: deciding what comes first, getting resources, reporting to top management and repeating the analysis.

6.1 Prioritizing the Gaps

Set the priority in Column J of the plan using a consistent rule. A simple one that works for most organizations:

Priority	Use for
High	NCs that affect legal compliance, worker safety or product conformity; NCs on requirements a certification body will check at stage 1, such as scope, policy, objectives, internal audit and management review; anything else that blocks other actions.
Medium	Remaining NCs, and OFIs where the process exists but is not applied consistently.
Low	OFIs that only need documenting or minor improvement of a process that already works.

Then sequence the actions. Some gaps depend on others: OH&S objectives need assessed hazards, and a process must be defined before it can be audited. Start the foundation actions in clauses 4 and 6 first.

If you use the EHQMS package, link each gap to the procedure that closes it: for example, Procedure 02 for risks and opportunities, 03 for aspects, 04 for hazards and 12 for planning of changes.

> COMMON PITFALL
> Marking everything High. When every action is urgent, owners pick the easiest ones. Aim for no more than a quarter of the actions at High.

6.2 Resourcing and Scheduling

Use Column I to record what each action needs: time, training, equipment, external help or money. The total is the cost of closing the gaps, usually top management's first question.

- Spread actions across owners; overload shows on the Gantt chart as a stack of bars in the same weeks.
- Set the plan start date in M3 once the plan is approved, to fix the timeline.
- If you are heading for certification, schedule the internal audit and management review actions last, so they test the finished system.

6.3 Connecting the Actions to Your System

Once your management system is running, move longer-lived gaps into its normal processes so they are not managed twice. If you use the EHQMS package: