EHQMS GUIDANCE

Integrated Clause-by-clause Guidance

How to understand and implement each requirement of ISO 9001:2026, ISO 14001:2026, and ISO 45001:2018+A1:2024 using the EHQMS4 templates.

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1 Using This Guide

This guide accompanies the EHQMS4 Complete Solution. It takes you through ISO 9001:2026, ISO 14001:2026 and ISO 45001:2018+A1:2024 one clause at a time, explains what each requirement asks of your organization, and shows which part of the package helps you meet it.

Read this chapter first. Chapter 2 then helps you plan the implementation, and the clause chapters give the detailed guidance.

1.1 Purpose of This Guide

An integrated management system is one set of processes that manages quality, environmental performance and occupational health and safety together. The three standards share a common structure, so most requirements can be met once rather than three times. Where they differ, for example on environmental aspects, hazard identification or worker participation, the package provides a dedicated procedure and form.

The guide is written for the person who has to make the system work, usually an EHQMS manager or an implementer. It assumes you know your business but may not have worked with all three standards. Requirements are paraphrased so that you can see the intent quickly; keep your licensed copies of the standards to hand for the exact wording.

- **As a project guide.** Chapter 2 covers planning, the gap analysis and certification.
- **As a reference while you tailor templates.** Check the matching clause section to see what a procedure or form must achieve.
- **As an audit preparation aid.** Use the evidence lists to test your own records before an internal or certification audit.

The templates are a starting point. Adapt every procedure and form to the way your organization actually works. Auditors compare what documents say with what people do, and a short procedure that is followed is worth more than a long one that is not.

1.2 How the Package Fits Together

The package follows the usual documentation hierarchy. The manual describes the system and points to the procedures. The procedures define who does what, when and how. The forms capture the records that prove the procedures work. The audit and gap tools check the whole system against the standards.

The EHQMS4 package folders

Folder	Contents	How you use it
1.0 Integrated Manual	EHQMS Integrated System Manual (EHQMS-MAN-01), 8 chapters and appendices A to D; EHQMS System Policy Template	Describes context, scope, leadership, and processes; approves the policy
2.0 Integrated Procedures	26 procedures, EHQMS-PR-01 to EHQMS-PR-26, each with the same ten sections	Tailor the method, RACI, triggers, and records to your organization
3.0 Reports & Forms	Forms 01 to 54, including the Excel registers, Form 53 Change Request & Plan and Form 54 Permit to Work	Record the results of each process
4.0 Auditing	Integrated Internal Audit Checklist, Internal Audit Programme, Process Audit Template, Supplier Audit Checklist, Supplier Self-Evaluation (all Excel workbooks)	Plan and run internal and supplier audits

2 Planning Your Implementation

Implementing an integrated management system is a project with a budget and an end date, and it changes how people work. This chapter covers commitment, the team, the gap analysis, the timeline and certification.

Most organizations already do much of what the standards require. Orders are reviewed, equipment is maintained, accidents are reported and waste is collected. The task is to make these practices consistent, fill the genuine gaps and produce evidence that the system works. Start from what you have.

2.1 Managing the Change

A certified system tightens how processes run. People may be asked to follow a defined method, record what they kept in their heads, or report near misses that once went unmentioned. Some will see bureaucracy. Show them that the system protects them, the customer and the business, and keep it lean.

- **Explain the reason.** A customer requirement, a tender condition or a safety record that needs improving is the best answer to "just paperwork".
- **Involve the people who do the work.** Process owners and operators should help write the procedures for their areas. They know the real risks, and they follow methods they helped design.
- **Consult workers on OH&S.** ISO 45001 requires consultation and participation of non-managerial workers. Use your safety committee or worker representatives to review hazards, controls and the OH&S procedures.
- **Expect revisions.** Invite feedback in the first months and revise quickly. A Form 21 Document Change Request from a user is a sign of engagement.
- **Show early results.** A fixed recurring defect or an eliminated hazard builds support faster than a presentation.

> COMMON PITFALL
> Writing the system alone at a desk. The result describes how work should happen, not how it does. Auditors interview the people doing the job, and the gap shows up as nonconformities.

2.2 Top Management Commitment

All three standards hold top management accountable for the effectiveness of the system. There is no management representative who carries it on everyone's behalf. Tasks can be delegated, but certification auditors will interview senior managers to test their leadership.

Before you commit significant effort, confirm that top management will:

1. State why the organization is implementing the system and communicate that mandate.
2. Approve a budget for people's time, external support, training and certification fees.
3. Release the right people to the implementation team.
4. Take part in the context review, approval of policy and objectives, and management reviews.
5. Discuss EHQMS performance in the same meetings as sales, cost and delivery.

ISO 9001:2026 also asks top management to promote quality culture and ethical behavior, the process approach, and risk-based and opportunity-based thinking. In practice, people see senior managers asking about root causes rather than blame, and treating a reported problem as useful information.

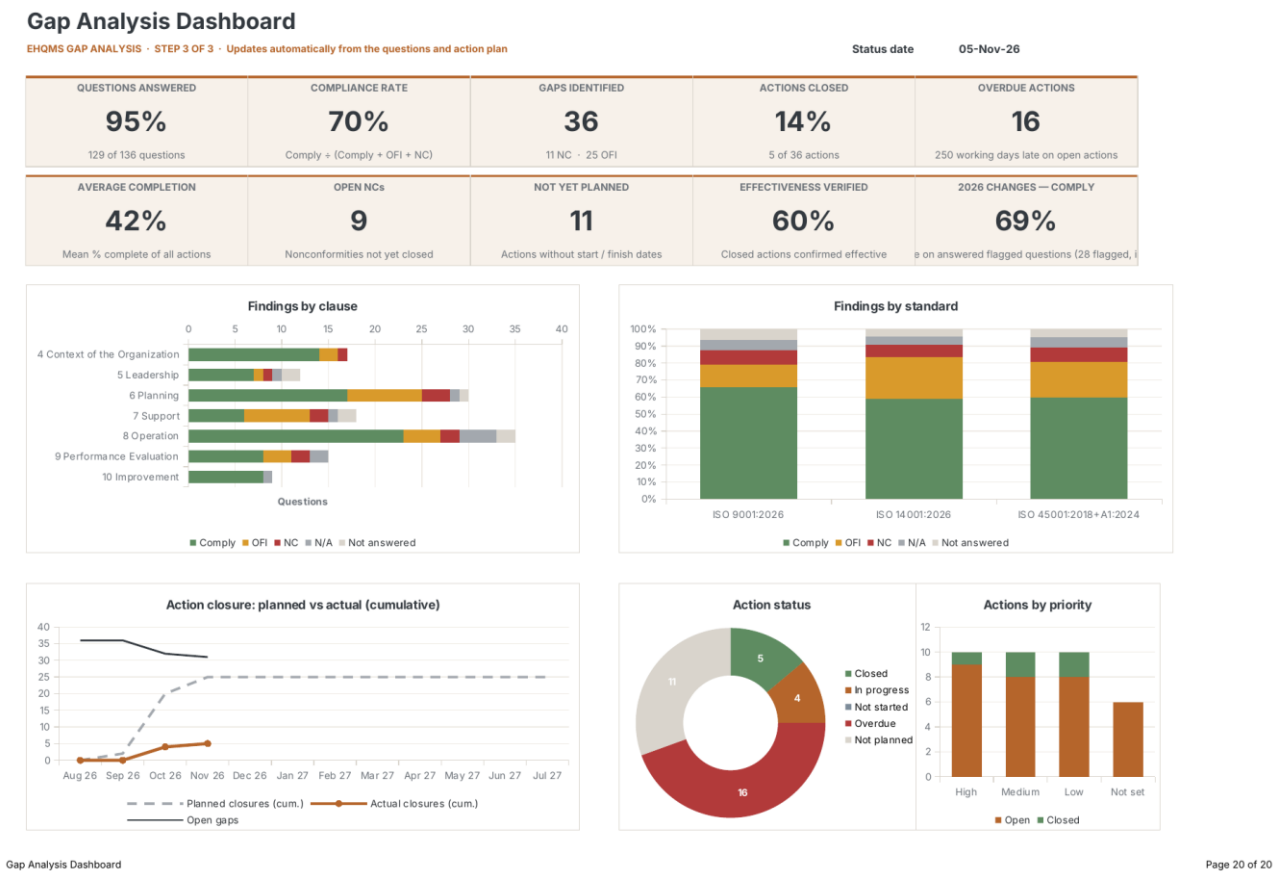


Figure 4 *The gap analysis Dashboard: KPI tiles and charts of findings and action progress.*

Make the dashboard the standing item at project reviews. Watch overdue actions and actions not yet planned; if either rises, the project is losing momentum and the sponsor should intervene.

> **TEMPLATE TIP**
> Do not record an action as effective just because it is complete. Check a sample of records a few weeks later to confirm the procedure is followed. This habit prepares you for corrective action effectiveness checks.

SEE ALSO Procedure 01 Organizational Context

2.6 The Implementation Timeline

Duration depends on the size of the gaps, the complexity of operations and the time the team can give. A small service organization might be ready in four to six months; a multi-site manufacturer starting from little may need twelve or more. Base the timeline on the gap analysis, not on a date chosen in advance.

Typical implementation phases

Phase	Typical timing	Main activities	EHQMS templates	Outputs
1 Mobilize	Weeks 1 to 4	Confirm commitment; form the team; set up document control; run the gap analysis	Gap analysis tools; Form 19	Mandate; gap list; action plan

Phase	Typical timing	Main activities	EHQMS templates	Outputs
2 Context and planning	Months 2 to 3	Context, interested parties, scope, processes; risks, aspects, hazards and compliance; policy and objectives	Procedures 01 to 06; Forms 01 to 11; policy template	Approved policy, scope, registers, objectives
3 Build controls	Months 3 to 6	Tailor support and operational procedures	Procedures 07 to 21; related forms	Issued procedures and forms
4 Operate and record	Months 5 to 8	Train people; run processes as documented; build two to three months of records	Forms 13 to 15; operational forms	Training and operating records
5 Check and improve	Months 7 to 9	Full internal audit cycle; act on findings; management review	Audit checklist and programme; Forms 43, 46, 47, 48	Audit reports; corrective actions; review results
6 Certify	Months 9 to 12	Stage 1 and stage 2 audits; close nonconformities	Forms 47 and 48	Certificate

The phases overlap, but the system must run and produce records before it can be audited. Certification bodies generally expect internal audits and a management review to have taken place before stage 2. Enter the main milestones in the Gap Analysis Action Plan so the Gantt reflects the real plan.

> TIP
> Leave four to six weeks between the management review and stage 2, so you can close review actions and show that internal audit corrective actions work.

2.7 Management Reviews During Implementation

Clause 9.3 sets no frequency, but frequent reviews during implementation keep top management involved and give a formal place for decisions on resources and priorities. Consider a review after the gap analysis, once context, scope, policy and registers are complete, after the first internal audit cycle, and before stage 2. The last is the one the certification auditor will examine most closely, so cover every required input.

A member of top management should chair, with the project lead preparing inputs and minutes. Invite process owners and internal auditors, and worker representatives for OH&S matters. Record each review on Form 46 Management Review Agenda & Minutes, and show the decisions and actions, since ISO 9001:2026 and ISO 14001:2026 now title clause 9.3.3 Management review results. Take the current Form 01 Context & Interested Parties to each review to cover the new ISO 9001 input on changes in interested party needs and expectations.

SEE ALSO Procedure 23 Management Reviews

2.8 Choosing a Certification Body

The certification body audits your system and issues the certificate. You will work with it for years, so check:

- **Accreditation.** It should be accredited for each standard by a recognized national accreditation body. Customers and tenders often refuse unaccredited certificates.

- **Sector scope.** Confirm accreditation for your sector under each standard, and auditors with relevant experience.
- **Integrated audits.** Ask whether it audits all three standards together with one team and plan. Integrated audits usually take less time, depending on how integrated your system really is.
- **Coverage.** For several sites or countries, confirm local auditors and the right language.
- **Cost.** Compare total cost over the three-year cycle, not just the initial audit.
- **Transition.** If you hold 2015-edition certificates, ask how it will handle the transition.

Agree the scope of certification early. It must match the scope you set under clause 4.3 and describe accurately the activities, products and services covered, because customers read it.

> COMMON PITFALL
> Choosing on price alone. A low quote often means too few audit days, which leads to added days later or an audit of little value. Ask each body how it calculated the duration.

2.9 The Certification Process

The certification cycle

Stage	What happens	What you should have ready
Application	You describe sites, headcount, activities and standards; the body proposes audit days and a quotation	Draft scope; site list; headcount
Stage 1 audit	Readiness review of documented information, scope, site conditions, compliance status and planning	Manual, procedures, policy, Forms 01 and 04 to 09, objectives, internal audit and management review records
Stage 2 audit	Evaluation of implementation and effectiveness through interviews, observation and record sampling	Two to three months of operating records; corrective actions from internal audits
Certification decision	Major nonconformities corrected and verified before issue; minors need an accepted action plan	Forms 47 and 48
Surveillance	At least annually, sampling parts of the system; the first within twelve months of certification	Continued records; audits and reviews on schedule
Recertification	Full audit before the three-year certificate expires	Evidence of performance and improvement over the cycle

Address any concerns raised at stage 1 before stage 2; left open, they tend to become findings. Treat certification audit findings like internal ones: raise a Form 47 Corrective Action Report, log it on Form 48 Corrective Action Log with the external audit as the source in How was it identified?, analyze the root cause and verify effectiveness before closing. Procedure 24 targets 30 days for a major finding and 60 days for a minor one; if your certification body sets an earlier deadline, work to that.

> TIP
> Prepare people, not just paperwork. Brief staff on the policy, their objectives and the hazards and aspects in their area. "I would check the procedure" is an acceptable answer when someone is unsure.

SEE ALSO Procedure 22 Internal Audits | Procedure 23 Management Reviews | Procedure 24 Non-conformity & Corrective Action

3 Context of the Organization (Clause 4)

Clause 4 is where the system starts. Before setting policy, objectives or controls, you need to understand your situation, who has an interest in your performance, where the system's boundaries lie and which processes make it up.

The sub-clauses form a chain. Issues (4.1) and interested party requirements (4.2) shape the scope (4.3), and the scope defines the processes the system (4.4) must include. The same information feeds the policy (5.2), risks and opportunities (6.1) and management review (9.3).

Procedure 01 Organizational Context covers the whole clause. Forms 01 Context & Interested Parties, 02 SWOT Analysis Template and 03 PESTLE Analysis Template capture context and interested parties, Form 04 Process Matrix & Application records processes, and manual chapter 2, Our Organization and Its Context, summarizes the results.

3.1 4.1 Understanding the Organization and Its Context

What the standards require

Standard	Requirement (paraphrased)
ISO 9001:2026	Determine external and internal issues relevant to your purpose and strategic direction that affect the intended results of the QMS. New: determine whether climate change is a relevant issue; monitor and review information about the issues.
ISO 14001:2026	Determine external and internal issues relevant to your purpose that affect the intended outcomes of the EMS. New: these include environmental conditions affected by or affecting the organization, such as pollution levels, natural resource availability, climate change, biodiversity or ecosystem health.
ISO 45001:2018+A1:2024	Determine external and internal issues relevant to your purpose that affect the intended outcomes of the OH&S management system. Amendment 1: determine whether climate change is a relevant issue.

WHAT IT MEANS IN PRACTICE

Clause 4.1 asks you to understand the conditions, inside and outside the organization, that could help or hinder the system in delivering its intended results: conforming products and satisfied customers, better environmental performance and compliance, and the prevention of work-related injury and ill health.

Issues can be positive or negative. External issues include markets, competitors, technology, legislation, the economy, the supply chain, social expectations and the physical environment. Internal issues include strategy, values, culture, resources, knowledge and performance. For example:

- A machining firm relies on one supplier for a specialist alloy, located in a flood-prone region.
- A facilities services company struggles to recruit qualified electricians, affecting both service quality and safe working.
- A food processor draws water from an aquifer the local authority has declared under stress.
- A logistics business is asked by customers for emissions data per delivery.
- An aging warehouse workforce raises musculoskeletal risk while holding most of the operational knowledge.

Many issues touch more than one discipline, which is the advantage of an integrated review: analyze once, and use the result for quality, environmental and OH&S planning.

Climate change can affect you physically, through heat, flooding or water shortage, and through transition effects such as new regulation or changing customer demands. For OH&S, heat stress in outdoor or poorly ventilated workplaces is often the most direct link.

HOW TO DO IT WITH EHQMS

1. Hold a context workshop with top management and function heads. Finance, HR, engineering and purchasing each see issues the EHQMS team would miss.
2. Use Form 03 PESTLE Analysis Template for external issues and Form 02 SWOT Analysis Template for internal strengths and weaknesses.
3. Transfer the relevant issues to Form 01 Context & Interested Parties, noting why each matters and which discipline it affects.
4. Record the climate change determination in Form 01, with reasons. For the EMS, record the environmental conditions you considered.
5. Carry issues that create risks or opportunities into Form 05 Risk & Opportunity Register under Procedure 02 Risks & Opportunities.
6. Summarize the context in manual chapter 2.

Set the review frequency in section 6 Triggers & Frequency of Procedure 01. An annual review before management review is common, with extra reviews after a new site, a major customer change, new legislation or a serious incident. ISO 9001:2026 explicitly requires you to monitor and review issue information, so record each review.

The standards do not require the context to be documented, but without a record you can only demonstrate it through interviews. Forms 01 to 03 give clear evidence and a baseline.

EVIDENCE AN AUDITOR WILL LOOK FOR

- A current Form 01, supported by Forms 02 and 03 or equivalent business planning documents.
- A recorded climate change determination with reasons and, for the EMS, the environmental conditions considered.
- Dated revisions of Form 01, or Form 46 minutes discussing changes in issues.
- Top managers who can describe the main issues and how they shape strategy.
- A visible link from issues to Form 05, the policy and the objectives in Form 10.

> **2026 CHANGE**
> Expect auditors to ask for the climate change determination under all three standards. Show that you considered effects on operations, supply chain, customers and workers, and record the outcome. Under ISO 14001, climate change is one of several environmental conditions your issues must include, not an optional determination.

SEE ALSO Procedure 01 Organizational Context | Procedure 02 Risks & Opportunities

3.2 4.2 Understanding the Needs and Expectations of Interested Parties

What the standards require

Standard	Requirement (paraphrased)
ISO 9001:2026	Determine relevant interested parties, their relevant requirements, and which will be addressed through the QMS; monitor and review this information. New: NOTE that interested parties can have climate-related requirements.