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EQMS GUIDANCE

Gap Analysis Questions & Action Plan Guide

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

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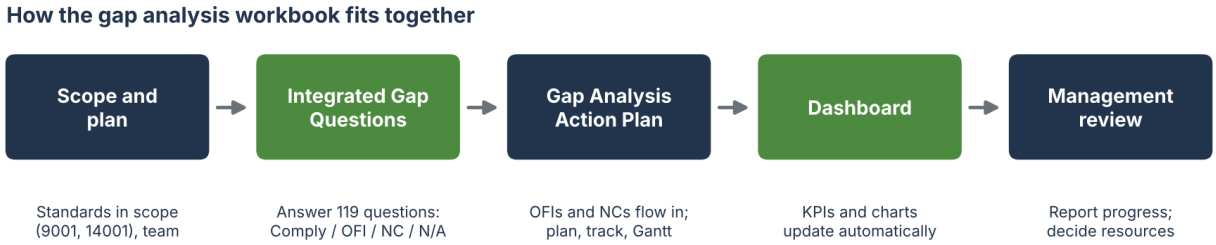


Figure 1 *How the gap analysis workbook fits together: findings on the questions tab feed the action plan, and both feed the Dashboard.*

Tab	What it does	What you do
Integrated Gap Questions	Questions that integrate the requirements of both 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 questions merge the source checklist questions for ISO 9001 and ISO 14001. Where both standards require the same thing, one question covers them. Requirements unique to one standard, such as design and development or environmental aspects, 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
EQMS 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 coordinator	Answers questions about aspects, compliance obligations, and emergency 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.

Weak evidence	Good evidence
Everyone knows the policy.	Policy on 3 notice boards and the intranet; 4 of 5 operators interviewed could explain what it means for their job.
Calibration is done.	Calibration log shows 46 of 48 instruments in date; 2 overdue gauges still in use on Line 2.

Good evidence names the record, gives a date or count, and notes exceptions, so someone else can check the finding later.

2.4 Opening the Workbook

1. Save a copy of the supplied file before you start, with a name that identifies the cycle, for example IMS Gap Analysis – first assessment.xlsx. Keep the original unused for the next cycle.
2. Open the copy. If Excel shows a Protected View bar, click Enable Editing; the calculated cells can show blanks or zeros until you do.
3. Check that calculation is automatic (Formulas > Calculation Options > Automatic). If it is set to manual, press F9 to recalculate.
4. Start on the Integrated Gap Questions tab, which opens first. The headings and the first two columns are frozen so they stay in view.

> **IMPORTANT**
> Do not insert or delete rows or columns on any tab. The links between the tabs, the totals and the charts rely on fixed ranges, and an inserted row can silently drop a question from the results.

3 The Integrated Gap Questions Tab

This is Step 1. You answer each question here, and everything else in the workbook is calculated from your answers. Appendix A lists every column.

3.1 Layout of the Sheet

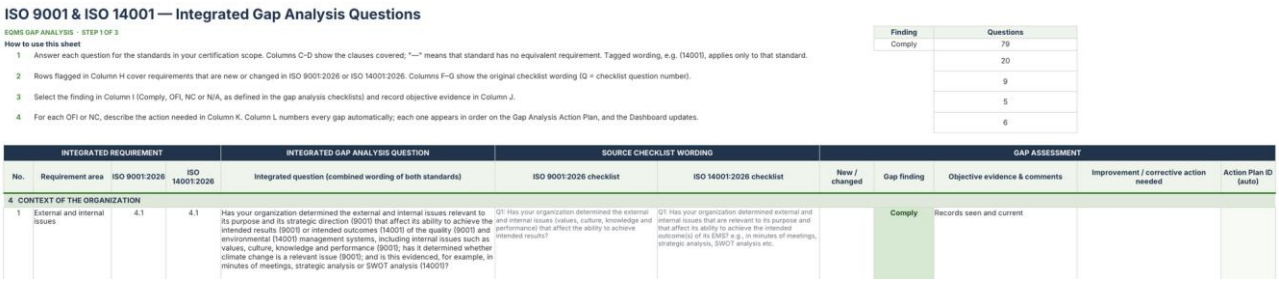


Figure 2 *The top of the Integrated Gap Questions tab: instructions, the summary box and the column headings.*

The top of the sheet has three parts:

- Rows 4 to 7 hold four numbered instructions under the heading in row 3;
- A summary box in i2:j7 counts the questions answered comply, ofi, nc and n/a, and those not answered;
- Row 9 is a banner grouping the columns into integrated requirement, integrated gap analysis question, source Checklist Wording, and Gap Assessment; row 10 holds the headings.

Below the headings, the questions are grouped by clause under shaded heading rows, such as 4 Context of the Organization, and numbered 1 to 119 in Column A. The heading rows are not counted.

3.2 Reading a Question

Columns A to H are reference information. Read them; do not change them.

- Column B gives a short requirement area, such as Planning of changes. Consecutive questions can share an area.
- Columns C and D give the clause the question covers in ISO 9001:2026 and ISO 14001:2026. A dash (—) means that standard has no equivalent requirement.
- Column E is the integrated question. Wording tagged with a standard, such as compliance obligations (14001), applies only to that standard. Untagged wording applies to all the standards in the row.
- Columns F and G show the ISO 9001 and ISO 14001 wording of each requirement, with its question number (Q1, Q2 …), so you can see exactly which requirements a question covers.



INTEGRATED REQUIREMENT				INTEGRATED GAP ANALYSIS QUESTION	SOURCE CHECKLIST WORDING		GAP ASSESSMENT				
No.	Requirement area	ISO 9001:2026	ISO 14001:2026	Integrated question (combined wording of both standards)	ISO 9001:2026 checklist	ISO 14001:2026 checklist	New / changed	Gap finding	Objective evidence & comments	Improvement / corrective action needed	Action Plan ID (auto)
4 CONTEXT OF THE ORGANIZATION											
1	External and internal issues	4.1	4.1	Has your organization determined the external and internal issues relevant to its purpose and its strategic direction (9001) that affect its ability to achieve the intended results (9001) or intended outcomes (14001) of the quality (9001) and environmental (14001) management systems, including internal issues such as values, culture, knowledge and performance (9001); has it determined whether climate change is a relevant issue (9001); and is this evidenced, for example, in minutes of meetings, strategic analysis or SWOT analysis (14001)?	Q1: Has your organization determined the external and internal issues (values, culture, knowledge and performance) that affect the ability to achieve intended results?	Q1: Has your organization determined external and internal issues that are relevant to its purpose and that affect its ability to achieve the intended outcome(s) of its EMS? e.g., in minutes of meetings, strategic analysis, SWOT analysis etc.		Comply	Records seen and current		
2	External and internal issues	4.1	—	Has your organization considered international, national, regional or local issues arising from the effects of climate change and from the legal, technological, competitive, market, cultural, social and economic environments?	Q2: Has your organization considered international, national, regional, or local issues arising from the effects of climate change, legal, technological, competitive, market, cultural, social, and economic environments?	—	NEW 2026 (9001)	OFI	Partly in place; not consistently applied	Update procedure and brief process owners	1
3	Issues as inputs to scope and risk	—	4.1	Have the external and internal issues been considered as inputs to determining the scope and the risks and opportunities, and do they include environmental conditions being affected by, or capable of affecting, your organization, such as pollution levels, availability of natural resources, climate change, biodiversity or ecosystem health?	—	Q3: Have issues been considered as inputs to determine scope and risks and opportunities, and do they include environmental conditions being affected by, or capable of affecting, your organization, such as pollution levels, availability of natural resources, climate change, biodiversity or ecosystem health?	NEW 2026 (14001)	Comply	Records seen and current		
4	Monitoring and review of context	4.1	4.1	Does your organization monitor and review information about its external and internal issues on a regular basis, and how often (9001); and is information on changes in the context systematically presented at the management review (14001)?	Q3: Are these issues reviewed and monitored on a regular basis, how often does your organization review these issues?	Q2: Is information on changes in the context systematically presented at the Management Review?		OFI	Partly in place; not consistently applied	Update procedure and brief process owners	2

Figure 3 *Question rows: clauses per standard, the integrated question, the wording of each standard's requirement and the gap assessment columns.*

Column H flags questions that cover requirements that are new or changed in ISO 9001:2026 or ISO 14001:2026.

Flag in Column H	Meaning
NEW 2026 (9001)	New or changed in ISO 9001:2026
NEW 2026 (14001)	New or changed in ISO 14001:2026
NEW 2026 (9001, 14001)	New or changed in both 2026 editions

3.3 Choosing the Finding

Select the finding in Column I from the drop-down list. Comply, OFI and NC record how well the requirement is met, and N/A covers requirements outside your scope.

Finding	Meaning	Use it when
Comply	Complies with stated requirements	You have objective evidence that the requirement is met and, where needed, a documented procedure or process.
OFI	Improvement actions are needed to comply	There is evidence but the process needs improvement; or there is evidence but no documented process; or there is a documented process but some evidence is missing.
NC	Nonconformance	There is no objective evidence, or the documented process is missing, or the evidence does not support compliance.
N/A	Not applicable	The requirement does not apply within your scope, or the question covers only a standard you are not implementing.

No.	Finding	Evidence (Column J)	Action needed (Column K)	ID (L)
3	Comply	Context register lists issues used to set scope and risks.		
4	Comply	Context reviewed at each management review; last minutes seen.		
5	NC	Interested parties register omits environmental interested parties such as neighbors and the regulator.	Extend the interested parties register to cover 14001, including neighbors and the regulator.	3

Questions 1, 2 and 5 now appear as rows 1, 2 and 3 on the Gap Analysis Action Plan, with their evidence and actions already filled in. The summary box shows Comply 2, OFI 2, and NC 1, and Not answered has fallen by 5.

4 The Gap Analysis Action Plan Tab

This is Step 2. Every OFI and NC appears here automatically. You turn each one into a planned action with an owner and dates, then track it to closure. The sheet is laid out for A3 landscape so that the table and the Gantt chart print together.

4.1 How Gaps Flow In

Columns A to G are linked to the questions tab and are shaded grey. Row 1 of the plan holds gap 1, row 2 holds gap 2, and so on, in question order. For each gap, the sheet shows the ID, the finding (OFI in amber or NC in red), the question number, the clauses in each standard (for example 9001 4.4; 14001 4.4), the requirement area, and your evidence and action text from Columns J and K.



Gap Analysis Action Plan

EQMS GAP ANALYSIS · STEP 2 OF 3 · Gaps flow in automatically from the Integrated Gap Questions sheet

1 Columns A–G are linked: every OFI and NC appears here in question order. Do not type in the grey columns.
2 Assign an owner, resources and priority, then enter planned start and finish dates. Status, duration and days late calculate automatically.
3 Update % complete as work progresses; enter the completion date when the action is closed, then confirm the effectiveness check.

Plan start date
Timeline from 24-Aug-26
Status date 07-Nov-26

GAP — LINKED FROM INTEGRATED GAP QUESTIONS							PLANNING						PROGRESS				
ID	Finding	Q No.	Clause ref.	Requirement area	Gap identified (evidence)	Proposed remedial action	Owner	Resources & deliverables	Priority	Planned start	Planned finish	Work days	% complete	Completed on	Status	Days late	Effectiveness verified
1	OFI	2	9001 4.1	External and internal issues	Partly in place; not consistently applied	Update procedure and brief process owners	EQMS Manager		High						Not planned	0	
2	OFI	4	9001 4.1; 14001 4.1	Monitoring and review of context	Partly in place; not consistently applied	Update procedure and brief process owners	Operations Manager		Medium	31-Aug-26	05-Oct-26	26	25%		Overdue	24	
3	NC	5	9001 4.2; 14001 4.2	Interested parties and their requirements	No documented evidence available	Establish and implement the requirement	Environmental Coordinator		Low	07-Sep-26	19-Oct-26	31	50%		Overdue	14	
4	OFI	13	9001 4.3	Scope statement and justification	Partly in place; not consistently applied	Update procedure and brief process owners	HR Manager		High	14-Sep-26	12-Oct-26	21	75%		Overdue	19	
5	OFI	15	14001 4.4	Use of context knowledge	Partly in place; not consistently applied	Update procedure and brief process owners	EQMS Manager		Medium	21-Sep-26	26-Oct-26	26	100%	23-Oct-26	Closed	0	No
6	NC	16	9001 4.4	Process criteria, resources and responsibilities	No documented evidence available	Establish and implement the requirement	Operations Manager		Low	28-Sep-26	09-Nov-26	31	0%		In progress	0	
7	OFI	22	9001 5.2; 14001 5.2	Policy	Partly in place; not consistently applied	Update procedure and brief process owners	Environmental Coordinator		High	05-Oct-26	02-Nov-26	21	25%		Overdue	4	
8	NC	27	9001 6.1; 14001 6.1.4	Determining risks and opportunities	No documented evidence available	Establish and implement the requirement	HR Manager		Medium						Not planned	0	
9	OFI	28	14001 6.1.4	Determining risks and opportunities	Partly in place; not consistently applied	Update procedure and brief process owners	EQMS Manager		Low	19-Oct-26	30-Nov-26	31	75%		In progress	0	
10	OFI	31	9001 6.1	Actions on risks and opportunities	Partly in place; not consistently applied	Update procedure and brief process owners	Operations Manager		High	26-Oct-26	23-Nov-26	21	100%	20-Nov-26	Closed	0	Yes
11	NC	38	14001 6.1.3	Compliance obligations	No documented evidence available	Establish and implement the requirement	Environmental Coordinator		Medium	02-Nov-26	07-Dec-26	26	0%		In progress	0	
12	OFI	40	14001 6.1.5	Planning action	Partly in place; not consistently applied	Update procedure and brief process owners	HR Manager		Low	09-Nov-26	21-Dec-26	31	25%		In progress	0	
13	OFI	41	9001 6.2; 14001 6.2.1	Objectives	Partly in place; not consistently applied	Update procedure and brief process owners	EQMS Manager		High	24-Aug-26	21-Sep-26	21	50%		Overdue	34	
14	OFI	49	9001 6.3	Planning of changes	Partly in place; not consistently applied	Update procedure and brief process owners	Operations Manager		Medium	31-Aug-26	05-Oct-26	26	75%		Overdue	24	
15	OFI	54	9001 7.1.5.1	Monitoring and measuring resources	Partly in place; not consistently applied	Update procedure and brief process owners	Environmental Coordinator		Low						Not planned	0	

Figure 4 *The Gap Analysis Action Plan: linked gap columns in grey, planning and progress columns in white, with automatic status.*

The table has one row per question, so it cannot run out of space. Edit evidence and action text on the questions tab, not here; the grey cells hold formulas.

4.2 Plan Start, Timeline and Status Date

Three cells at the top right, in M3 to M5, control the timeline.

Status	When it shows
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.

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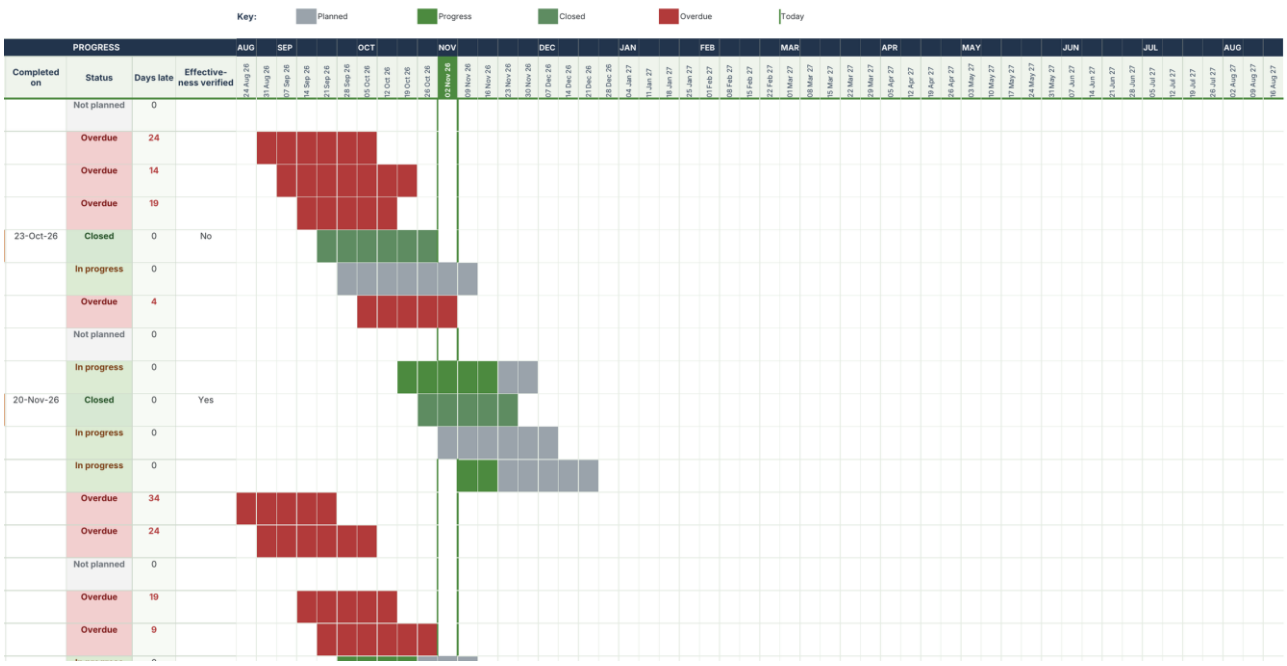


Figure 5 *The weekly Gantt chart: planned, in-progress, closed and overdue bars, with the current week outlined.*

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.
Dark green	The completed share of the bar. The dark green part covers the same fraction of the planned period as % complete; a 50% complete action has its first half dark green.
Grey	The remaining planned period.

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

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.

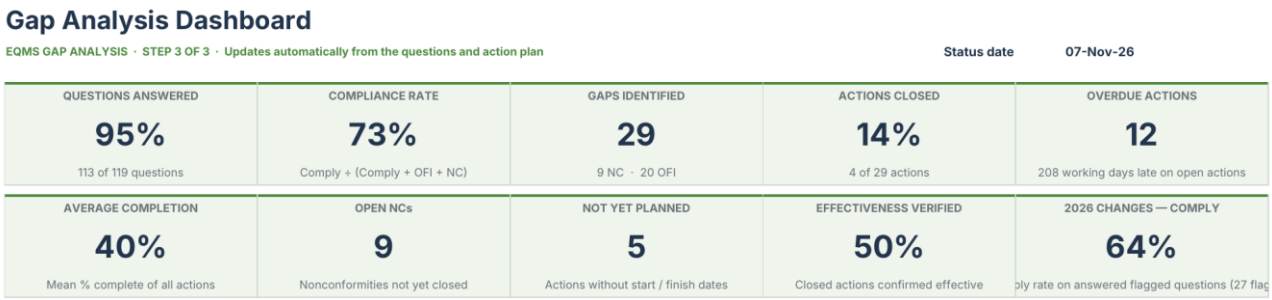


Figure 6 *The ten KPI tiles on the Dashboard.*

Tile	How it is calculated	Line underneath
Questions Answered	Questions with any finding (including N/A) ÷ total questions	x of y 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 flagged questions (Column H): Comply ÷ (Comply + OFI + NC). N/A and blanks are excluded. Shows – until a flagged question is answered.	Comply rate on answered flagged questions

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

5.2 Charts

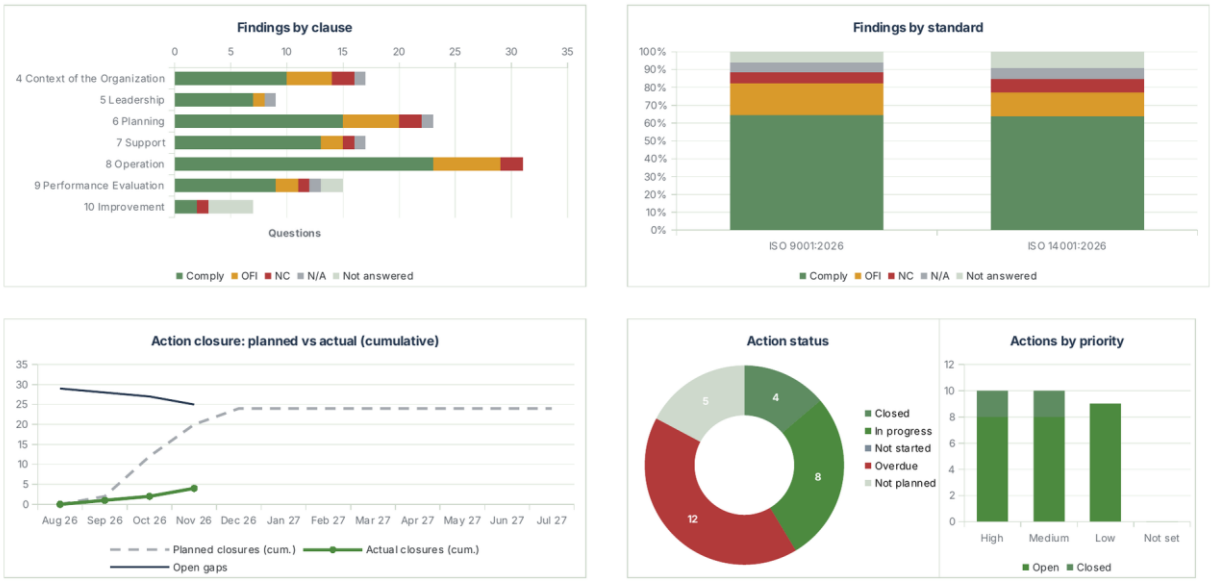


Figure 7 *Dashboard charts: findings by clause and by standard, planned versus actual closures, action status and actions by priority.*

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 green 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 green 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 every question, finding 26 OFIs and 12 NCs. Two months into the plan, 9 actions are closed, 5 are overdue and 4 are not yet planned.