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EQMS GUIDANCE

Integrated Clause-by-clause Guidance

How to understand and implement each requirement of ISO 9001:2026 and ISO 14001:2026 using the EQMS4 templates.

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1 Using This Guide

This guide accompanies the EQMS4 Complete Solution. It takes you through ISO 9001:2026 and ISO 14001:2026 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 and environmental performance together. The two standards share a common structure, so most requirements can be met once rather than twice. Where they differ, for example on environmental aspects and compliance obligations, the package provides a dedicated procedure and form.

The guide is written for the person who has to make the system work, usually an EQMS manager or an implementer. It assumes you know your business but may not have worked with both 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 EQMS4 package folders

Folder	Contents	How you use it
1.0 Integrated Manual	EQMS Integrated System Manual (EQMS-MAN-01), 8 chapters and appendices A to D; EQMS System Policy Template	Describes context, scope, leadership, and processes; approves the policy
2.0 Integrated Procedures	25 procedures, EQMS-PR-01 to EQMS-PR-25, each with the same ten sections	Tailor the method, RACI, triggers, and records to your organization
3.0 Reports & Forms	Forms 01 to 51, including the Excel registers and Form 51 Change Request & Plan	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

Folder	Contents	How you use it
5.0 Gap Analysis	IMS Gap Analysis Questions and Action Plan workbook: 119 integrated questions, an action plan with a Gantt chart, and a dashboard	Measure your starting position and plan the work
6.0 Guidance	This guide, the Internal Audit Guidance, the RCA & Corrective Action Guidance, the Gap Analysis Questions & Action Plan Guide, and the Internal Audit Programme Guide	Understand the requirements and the templates
7.0 IMS Training	Seven-clause decks, one for each of clauses 4 to 10	Build awareness of the system requirements
8.0 Auditor Training	Internal auditor course in six modules, Modules 1 to 6	Develop competent internal auditors
9.0 Problem Solving Training	7 Basic Quality Tools & Techniques; Problem Solving 1 Five Whys; Problem Solving 2 Effective 8D	Train investigators and improvement teams

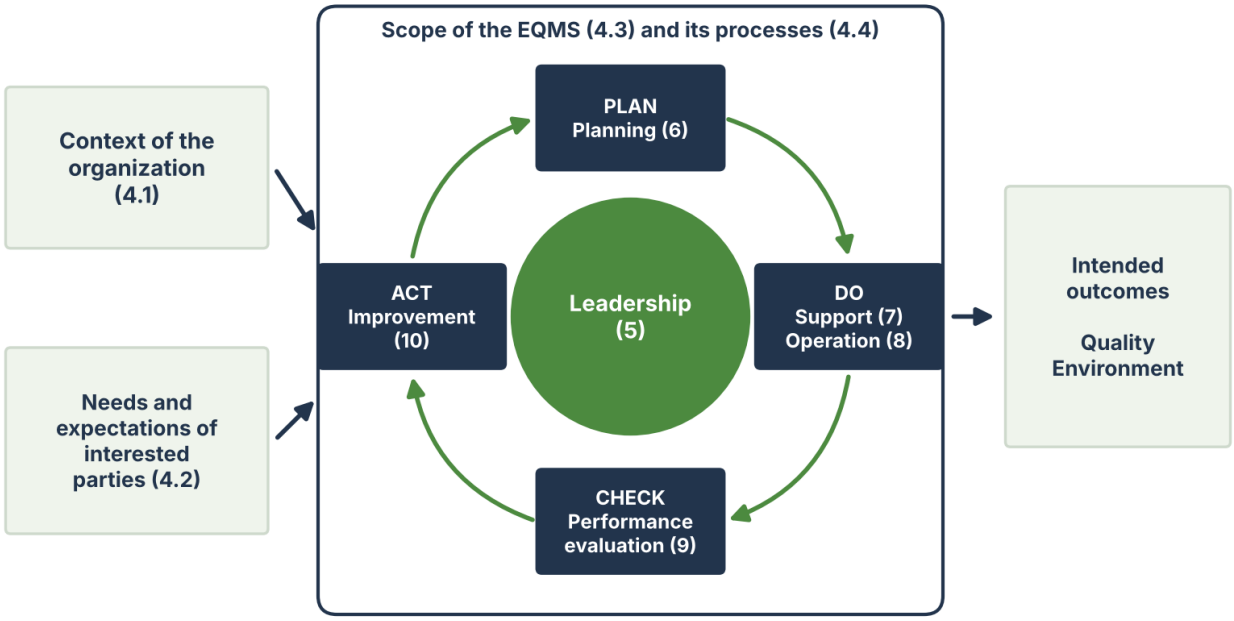


Figure 1 *The integrated management system model: clauses 4 to 10 in a Plan-Do-Check-Act cycle, with context and interested parties as inputs and intended outcomes as outputs.*

Context and interested parties (clause 4) feed leadership and planning (clauses 5 and 6), which drive support and operation (clauses 7 and 8). Performance evaluation (clause 9) checks the results and improvement (clause 10) acts on them. The manual chapters follow the same flow, from chapter 2 Our Organization and Its Context to chapter 8 Improvement, and appendix A correlates the clauses of the two standards.

> **TEMPLATE TIP**
> Keep the package numbering when you tailor it. Procedure codes and form numbers are cross-referenced in the manual, the procedures, the audit checklist and this guide, and broken cross-references are a common document control finding.

1.3 How Each Clause Chapter Is Organized

From chapter 3 onward, each chapter covers one clause and each section one sub-clause. Section titles use the ISO 9001:2026 number; where another standard numbers the requirement differently, the requirements table says so. Every clause section has the same layout:

Layout of a clause section

Element	What it gives you
What the standards require	A table paraphrasing the requirement in each standard, including the 2026 changes
What it means in practice	The intent in plain terms, with examples and the decisions you need to make
How to do it with EQMS	The procedure, forms and manual sections to use, and how to complete them
Evidence an auditor will look for	The records, interviews and observations an auditor is likely to sample
2026 change	A highlighted note where a requirement is new or changed
Procedures	The EQMS procedure numbers that give the detail, printed at the end

Terminology differs between the standards. ISO 14001 speaks of compliance obligations and ISO 9001 of statutory and regulatory requirements. This guide uses the term from the relevant standard when the difference matters, and EQMS when it does not.

1.4 What Changed in 2026

ISO 9001:2026 and ISO 14001:2026 replace the 2015 editions. A dash means no change at that clause; clauses not listed have no change of substance.

Summary of 2026 changes

Clause	ISO 9001:2026	ISO 14001:2026
4.1 Context	Determine whether climate change is a relevant issue; monitor and review information about issues	Issues include environmental conditions: pollution levels, natural resource availability, climate change, biodiversity or ecosystem health
4.2 Interested parties	NOTE: climate-related requirements	NOTE 1: needs and expectations related to environmental conditions
4.3 Scope	—	Consider control or influence over the life cycle
5.1.1 Leadership	Promote quality culture and ethical behavior, the process approach, and risk-based and opportunity-based thinking	—
5.2 Policy	Takes context into account and supports strategic direction; commitment to meet applicable requirements	Commitment to meet compliance obligations
6.1 Risks and opportunities	6.1.1 Determining risks and opportunities; 6.1.2 Actions to address risks (proportionate); 6.1.3 Actions to address opportunities	6.1.2 Aspects (including potential emergencies, normal and abnormal conditions, planned changes); 6.1.3 Compliance obligations; 6.1.4 Risks and opportunities; 6.1.5 Planning action
6.3 Planning of changes	Seven considerations, from purpose and consequences to reviewing results	New clause: changes planned and managed

Clause	ISO 9001:2026	ISO 14001:2026
7.1.4 Process environment	Culture is a NOTE only	—
7.1.6 Knowledge	Retained, applied and shared	—
7.3 Awareness	Quality culture and ethical behavior	—
7.5 Documented information	"Available as documented information" replaces maintain and retain	—
8.1 Operational control	Externally provided processes, products and services relevant to the QMS are controlled	Externally provided processes, products or services controlled or influenced; type and extent defined
8.2	8.2.1: contingency information, including disruptions	Emergencies are those determined in 6.1.2
8.7 Nonconforming outputs	8.7.1 and 8.7.2 (numbered, untitled)	—
9.1.2 Customer satisfaction	Monitor customer satisfaction; NOTE lists sources including complaints and social media	—
9.1.3 Analysis and evaluation	Actions on risks and on opportunities evaluated separately	—
9.2.2 Audit programme	Audit objectives, criteria and scope for each audit	Audit objectives for each audit
9.3 Management review	New input on changes in interested party needs; 9.3.3 Management review results	9.3.3 Management review results
10 Improvement	10.1 Continual improvement (2015's 10.1 and 10.3 merged); 10.2.1 and 10.2.2 retained; complaints in a NOTE	10.1 Continual improvement; 10.2 Nonconformity and corrective action

Most changes clarify or regroup existing requirements. The areas that usually need real work are the climate change determination in 4.1, the separate treatment of risks and opportunities in ISO 9001 clause 6.1, the planning of changes in 6.3, and the restructured ISO 14001 clause 6.1, which changes how your aspect and risk registers relate.

> **2026 CHANGE**
> If you hold certificates to the 2015 editions, ask your certification body how it will audit the transition. The gap analysis tools flag every new and changed requirement, so you can see the transition work in one place.

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, complaints are handled 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 problems 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 an environmental 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.
- **Expect revisions.** Invite feedback in the first months and revise quickly. A Form 19 Document Change Request from a user is a sign of engagement.
- **Show early results.** A fixed recurring defect or a cut in waste 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

Both 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 EQMS 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.

A short senior team briefing helps. Cover the reasons, what the standards expect from leaders, and current EQMS achievements. Energy savings, scrap reduction and fewer complaints are often recorded as cost savings, and seeing them as system results tends to turn a reluctant team into an engaged one.

> **TIP**
> Put the reasons and expected benefits on one signed page and bring it to every project review. When priorities compete, it reminds everyone why the work matters.

2.3 The Implementation Team and Roles

Except in very small organizations, share the work across a team that knows the processes, is respected, and has the authority to remove obstacles.

Implementation roles

Role	Typical holder	Main responsibilities
Sponsor	Managing director or general manager	Owns mandate and budget; resolves priority conflicts; chairs management reviews
Project lead	EQMS manager	Plans the project; runs the gap analysis; maintains the action plan; reports progress
Process owners	Heads of sales, design, purchasing, operations, HR	Tailor procedures and forms; train their teams; provide records
Environmental lead	Facilities or EHS specialist	Leads aspects (Form 06), compliance (Form 07) and environmental emergencies
Document controller	Quality coordinator	Sets up document control early; maintains Form 17 Master Document & Record Index
Internal auditors	Trained staff from different functions	Audit the system before certification; never their own work

Schedule meetings around the timeline. The document controller is needed first, so that drafts are controlled from the start; process owners are busiest in the middle phases; internal auditors become active once there is history to audit.

Consultants can help on specialist topics, but your own people must run the system, so they should do the core work. Record roles in the RACI table in section 5 of each procedure and in the organization chart in manual appendix D.

2.4 Running the Gap Analysis

A gap analysis compares what your organization does today with what the standards require. It sizes the job, sets a baseline and becomes the project work list. It is also your first internal audit of the new system.

Folder 5.0 Gap Analysis holds one tool, the IMS Gap Analysis Questions and Action Plan workbook. It combines the requirements of both standards into one integrated question set, flags new and changed requirements and takes a Comply, OFI, NC, or N/A finding, then turns findings into an action plan and dashboard.

Its Integrated Gap Questions sheet holds 119 questions, so a shared requirement such as document control is answered once. The same sheet serves a single-standard review, for example, for a site certified to ISO 14001 only: filter that standard's clause column (C for ISO 9001, D for ISO 14001) to hide the questions marked with a dash, and select N/A for anything outside your scope.

> **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	EQMS 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 17	Mandate; gap list; action plan
2 Context and planning	Months 2 to 3	Context, interested parties, scope, processes; risks, aspects and compliance; policy and objectives	Procedures 01 to 05; Forms 01 to 09; policy template	Approved policy, scope, registers, objectives
3 Build controls	Months 3 to 6	Tailor support and operational procedures	Procedures 06 to 20; 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 11 to 13; 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 41, 44, 45, 46	Audit reports; corrective actions; review results
6 Certify	Months 9 to 12	Stage 1 and stage 2 audits; close nonconformities	Forms 45 and 46	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