Auditing Upstream
Holding Leadership Accountable to ISO 9001:2026

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What We Will Cover Today

1. About QMII
2. Why Are We Here?
3. Auditing Leadership Commitment
4. Q & A

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About QMII

- QMII has provided best in industry process improvement consulting, auditing, and training since 1986
- Headquartered in Ashburn, Virginia
- ISO 9001:2015-certified
- DBE-certified
- Minority-owned business
- GSA MAS holder

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About QMII

US Coast Guard	Crowley
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Why Are We Here?



To ascertain the commitment of leadership in system effectiveness beyond records



To audit the top management against objective evidence



To determine the “quality culture” of the organization

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Why Upstream?

- Most newer auditors look through procedures and records (documented information).
- What often gets skipped:
  - *Resourcing Decisions*
  - *Approval Delays*
  - *Leadership Interviews*
  - *Extension without justification*



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Why?
Clause 5.1 in audit scope

- Requires leadership to:
  - **B**e accountable for system effectiveness
  - **A**lign the QMS to business processes and align policy to objectives to processes and resources.
  - **E**xplain why quality matters and support people in improving the system.

A new requirement under 5.1.1.(i) requires leadership to promote quality culture and ethical behavior.

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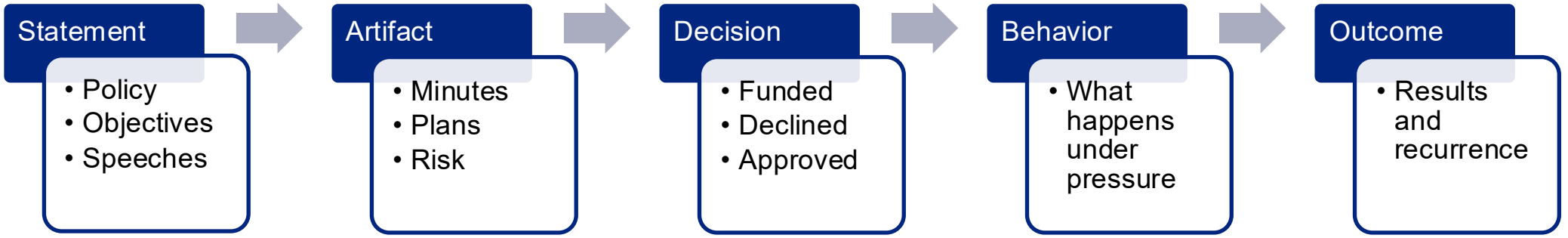
Why?
Commitment claims without evidence



- Auditors often stop at the first or second box
- Moving further assess accountability and culture
- Confirm if involved in reviews
- Check how they address system failures
- Connect Clause 4 --> 6 --> 8

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Why?
ISO 9001:2026 Changes for Leadership

Area	In 2015	In 2026	Audit angle
5.1.1 Leadership	Quality culture implied	Top management promotes quality culture and ethical behavior (new item i)	Ask for examples, observe decisions
7.3 Awareness	Policy, objectives, own contribution	Adds awareness of quality culture and ethical behavior	Ask staff what leaders expect
6.1 Risks and opportunities	Addressed together	Restructured into separate sub-clauses	Trace each one separately

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How?
Add Leadership to the Audit Program

- This is a session with the leadership not the QHSE manager
- Make it a separate session
- Prepare a checklist after reviewing system inputs, just as for any other processes
- Questions should assess resourcing decision, risk priorities, effectiveness of communication

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How?
Interview Question Sample

Weak question	Evidence-seeking question
Are you committed to quality?	How do you ensure continual improvement of the system? Can you provide me with three concrete examples?
Have you reviewed the risk Register for contextual issues?	What are the top four risks currently being faced by the organization and what actions are you taking to address them?
Do you support the audit program?	What did you do the last time a repeat finding reached you?
Is the team aware of quality expectations?	How to personnel evidence your commitment to system effectiveness?

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Check?
Management Review

- × Minutes restate KPIs without decisions
- × Resource needs are “noted”, never approved or declined
- × The same actions roll forward each cycle
- × Attendance is delegated down

- √ Every output has an owner, a date and a resource
- √ Requests get a recorded yes, no or deferred
- √ Top management attends and challenges
- √ Prior actions close with evidence

Check resource request against a yes decision (PO issued) and no decisions (documented justification)

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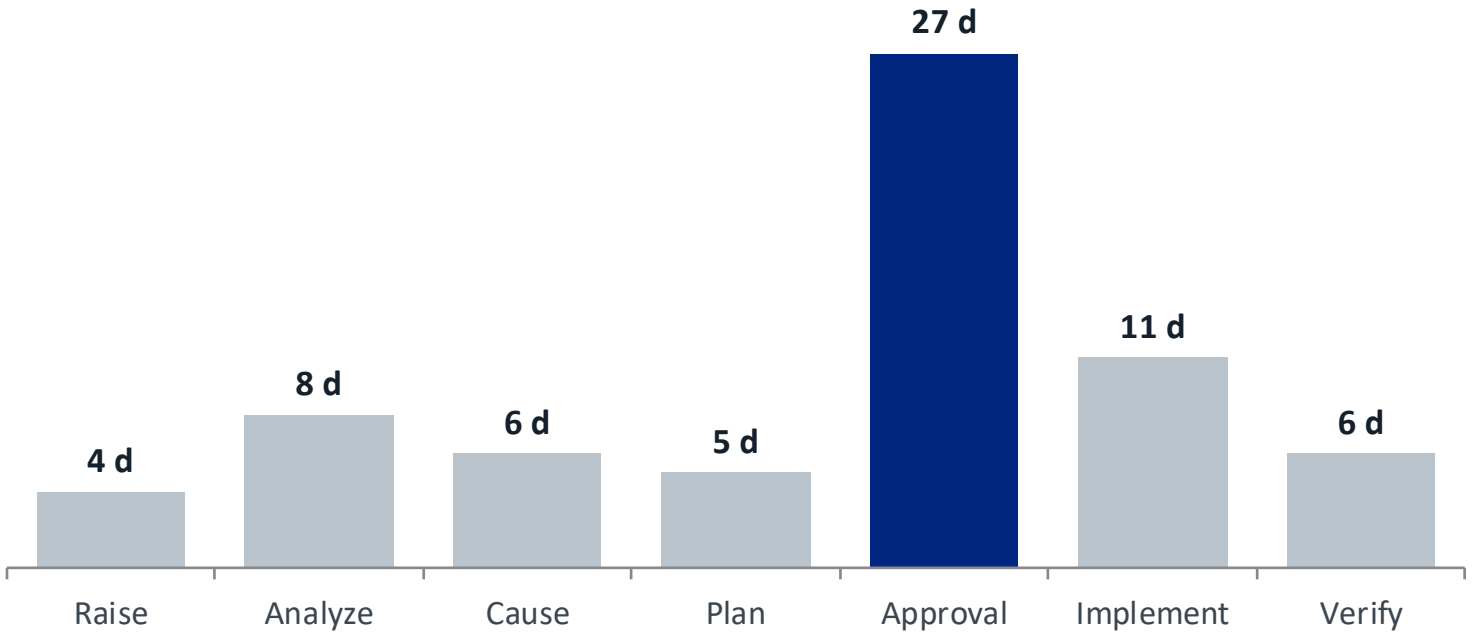
Check?
Corrective Action Status



Illustrative days in stage. Not benchmark data.

FOUR DATA PULLS (CLAUSE 10.2)

Approval timestamps
Submitted to approved, by approver

Aging queue
Who owns each overdue approval

Repeat root causes
This is an upstream signal

Parked or rejected
A recorded rationale, or silence

Pull time-in-stage from the CA system. The bar that towers is your finding.

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Check?
Contextual Risks

Context signal (clause)	Typical break	Audit question
Skilled labor shortage (7.1, 7.2)	Overtime, workarounds, no plan	What are the current identified risks from the shortage and what actions are you taking to reduce them?
Tariffs, supply risk (6.1, 8.4)	Cost known to finance only, longer lead times impacting on-time delivery	How are you managing the risks from the impact to the supply chain?
Cyber risk, plant systems (6.1)	IT owns it, leaders never decide	Who accepted the residual risk?
New automation or AI (6.3, 7.2)	Deployed without a change plan	Where is the change plan and what risks have been considered?
Changed customer or legal need	Legal knows, operations does not	How do the requirements flow down to operations?

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Check?
Quality Culture and Ethical Behavior

Quality is Well Embraced When...	Quality is Not Well Embraced When...
Quality initiatives are prioritized and supported by leadership.	Quality Initiatives receive little or no priority.
Staff are trained, engaged, and complete tasks on time.	Lack of interest, ownership, or accountability.
QMS is updated, used daily, and improved regularly.	Documents are incomplete or neglected.
Lessons learned drive ongoing improvement.	Learning and reviews are limited or ignored.
QMS adds value to operations and resilience.	Poor understanding of QMS true value.

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Data Red Flags

- Corrective actions extended without justification of awaiting approval
- No internal non-conformities raised. Only during audits
- No near-miss/risks/OFI raised by personnel
- Leadership involvement not evidenced by personnel
- Multiple repeat non-conformities although findings closed on time
- No management of change

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Disengaged Leadership

Escalating findings without burning bridges

- Confirm facts with process owners so objective evidence is clear
- No opinions or assumptions
- Well written non-conformities with requirement, evidence and nature
- Walk the leader through the NC prior the closing meeting so not an ambush

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Responding to leadership pushback

What you could hear	How to respond
“Quality is the quality department’s job.”	Clause 5.1 assigns accountability to top management. The standard makes it theirs.
“We don’t have time for this.”	Offer a short session built around one decision and one trace.
“I am part of the daily ops meeting.”	Determine involvement in system performance evaluation to continual improvement and resourcing.
“We prioritized resources by risk.”	Can you walk me through the process of how this was done, who was involved and when the next review will be conducted.
“Our certification body never raised this.”	Past audits are not evidence. I am testing what the records show today.

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What experienced auditors do differently

Common worry	Experienced habit
Fear of seniority	Anchor on the standard and evidence. Ask “show me” questions.
Not sure what to ask for	Arrive with data pulled and a hypothesis to test.
Damaging relationships	Pre-brief leaders. State what top management did not demonstrate.
Grading and escalating	Agree the escalation route in the audit program before the audit.
I’m not qualified to judge the business	You don’t judge strategy. You test whether decisions were made, recorded and followed through.

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In Conclusion - Five Takeaways

- Treat “we’re committed to quality” as a claim that needs evidence
- Test four things: reviews to resources, CA approvals, behavior after findings, and contextual risks
- Trace decisions rather than only reading records
- Speak leadership’s language: cost, delivery and risk
- Document objectively and escalate early. A blind spot is a nonconformity.

A leadership blind spot is a system nonconformity, too.

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Procurement Options

GSA MAS: 47QTCA20D0050
SAM UEI: E8KYQBSFJ6V6
CAGE: 1GFC9
STARS 8(a) III

SDVOSB Partners
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