



## Corrective Action Verification Audit (CVA) Report

Organization:	Nova Scotia Landowners and Forest Fibre Producers Association
Cert/Ver/Val Code:	SW-FM/COC-001753
Report Date:	February 12, 2013.

### I. AUDIT PROCESS

Auditor, Qualifications:	<p>Keith Moore</p> <p>Keith is a registered professional forester (RPF in BC) and has an M.A. in Geography. He has been working in forestland management and environmental assessment in Canada and other countries since 1976. From 1995 to 2000, Keith was the Chair of British Columbia's Forest Practices Board. Since 2000, he has been a team member or team leader with RA-Cert/SmartWood on nearly 80 different FSC forest management assessments, annual audits, pre-condition and major CAR verification audits in five provinces of Canada, in Russia, Australia, Indonesia, Guatemala, the US and Cameroon. He is very familiar with three of the regional FSC standards in Canada and has also been involved in the development of regional standards in Russia, Montenegro, Kenya and Australia. He participated in the recent process to revise the FSC Principles and Criteria. He is an RA trained FSC Forest Management lead auditor and has ISO 9001 Lead Auditor certification. Keith has led or been a team member on several previous FSC assessments and annual audits in the Maritimes using the Maritime Regional Standard. This is his second annual audit of NSLFFPA.</p>
Audit Date(s):	January 18, 2013 to February 12, 2013.
CVA Type:	Desk review <input checked="" type="checkbox"/> On-site <input type="checkbox"/> Location(s):
Audit Overview:	<p>This was a desk audit. NSLFFPA provided Rainforest Alliance (RA) with evidence of their activities to address the Major NCRs on Friday, January 18, 2013 using DropBox. The evidence consisted of a 5 page explanatory cover note detailing the NSLFFPA responses to each of the 3 Major Cars, and separate folders containing evidence related to each of the Major NCRs. In total, 20 separate documents were provided as evidence. The auditor reviewed the evidence package and determined that it was thorough and complete and fully addressed each Major NCR. A draft report was reviewed by RA, and by NSLFFPA. The final report was submitted to the RA task manager on February 12, 2013.</p>
Changes to Scope since last Audit:	No changes.

## II. NON-CONFORMITY REPORT (NCR) EVALUATION

<b>MAJOR NCR#:</b>	01/13	<b>NC Classification:</b>	Major <b>X</b>	Minor
Standard & Requirement:	FSC-STD -30-005, Requirement 3.1v			
Report Section:	Section 2.5, NCR 01/12 and NCR 02/12, and Appendix VII, Group Management Checklist 3.1.			
<p><b>Description of Non-conformance and Related Evidence:</b> NSLFFPA does have policies and procedures for addressing non-conformances by members (Section 4.5 of Policy Manual, pages 19-21). However, the specified timelines to review the four CARs were not implemented and there is a lack of policy to address the situations where CARs are not completed or cannot be closed because of extenuating circumstances.</p> <p>These are a non-conformance with requirement 3.1v of the FSC Group Management Standard (FSC-STD – 30-005). This is a “Group Failure” on the part of NSLFFPA, not a “Member Failure”. It involves a failure to meet a group requirement identified by RA-Cert as a critical requirement in RA guidance documents (FSC Forest Management Supplementary Guide to Evaluation, FM-01, pages 83 and 84). This is a single non-conformity that was identified in three situations - NCR 01/12, NCR 02/12 and Section 3.1 of the Group Management Checklist, Appendix VII. The MAJOR NCR also requires NSLFFPA to address the incomplete CARs that are identified in both NCR 01/12 and 02/12.</p>				
Corrective Action Request:	<p>Organization shall implement corrective actions to demonstrate conformance with the requirement(s) referenced above.            Note: Effective corrective actions focus on addressing the specific occurrence described in evidence above, as well as the root cause to eliminate and prevent recurrence of the non-conformance.</p>			
<b>Timeline for Conformance:</b>	One month from finalization of report. Due date: January 21, 2013.			
Evidence Provided by Organization:	<p>NSLFFPA provided Rainforest Alliance with the following evidence about work undertaken to address Major NCR 01/13:</p> <ul style="list-style-type: none"> <li>• A written summary of steps taken to address Major CAR 01/13;</li> <li>• A copy of revised sections of the Policy and Procedures Manual re issuance, tracking and closure of NCRs;</li> <li>• A copy of an environmental monitoring program implemented for each of the 2 woodlots with CARs outstanding at the time of the annual audit;</li> <li>• Email correspondence with a soils expert regarding the best way to mitigate the soil compaction problem that led to one of the internal CARs.</li> </ul>			
Findings for Evaluation of Evidence:	<p>In response to the Major NCR 01/13, NSLFFPA took the following actions:</p> <ul style="list-style-type: none"> <li>• Revised the Policy and Procedures Manual (Sections 4.5.1 and 4.5.2 ) in regard to issuing, tracking and closing internal CARs;</li> <li>• Established procedures to address CARs that are not met by member woodlot by the closure date;</li> <li>• Created and implemented an improved tracking system for internal CARS so that inspections are recorded and dates for required follow-up inspection and CAR closure are highlighted;</li> <li>• Inspected each of the 2 woodlots with outstanding CARs and took action to initiate action sufficient to close those CARs;</li> <li>• Posted a note about one of these situations on the NSLFFPA website so that other members could learn from the experience; and,</li> <li>• Established a procedure in the Policy and Procedures manual to annually review all CARs to identify trends and root causes of any recurring incidents.</li> </ul> <p>The revisions to Sections 4.5.1 and 4.5.2 of the Policy and Procedures Manual update the NSLFFPA procedures for issuing CARs to members</p>			

	<p>found in non-conformance with Group requirements, including FSC requirements. The revised procedures require that CARs must state the actions agreed to address the non-conformance and must establish the date for close out following inspection by NSLFFPA staff. Revised Section 4.5.2 establishes a tracking procedure (NSLFFPA Monitoring Tracker Nov 16, 2012) that records and highlights the dates for follow-up and inspection by NSLFFPA staff. The new procedures clearly establish the actions required to be taken in the event that the actions agreed-to in the CAR are not met by member woodlot by the required date. These include procedures for the removal of the member from the NSLFFPA in situations where there is no adequate reason for failure to close the CAR or there is an immediate threat to the environment or personal safety.</p> <p>Following the annual audit, NSLFFPA staff took action to address the two woodlots where the outstanding and overdue CARs were identified in the annual audit report. In one situation, the site was visited with the member and a plan to mitigate the rutting and ephemeral stream damage was agreed. The circumstances leading to the CAR are posted on the NSLFFPA Woodbox site in a short article titled "Don't Let this Happen to You" for all members to read and learn from. In the second situation, a soils expert has been engaged to review the plans for mitigation. In both cases the CARs have been closed based on member action, and remedial work is underway or is planned during appropriate weather.</p> <p>As of January 21, 2013, NSLFFPA has established new procedures for following up on CARS and for addressing CARs that are not met by the established date. NSLFFPA has also addressed the two specific woodlots with outstanding CARs at the time of the annual audit and has closed those CARs. These address the non-conformities identified and Major NCR 01/13 is met and closed.</p>
<b>NCR Status:</b>	CLOSED.
Comments (optional):	None.

<b>MAJOR NCR#:</b>	02/13	<b>NC Classification:</b>	Major X	Minor
Standard & Requirement:	FSC-STD-CAN-Maritimes-2008, Indicators 4.2.1 and 4.2.2			
Report Section:	Appendix IV, Criterion 4.2			
<b>Description of Non-conformance and Related Evidence:</b>				
<p>In this annual audit, there were two situations in which woodlot owners were not aware of the health and safety requirements pertaining to themselves and their contractors and employees engaged in work on the woodlot. This involved both lack of understanding about the applicability of safety laws and programs generally to contractors and employees on the woodlot, and lack of understanding about the specific requirements for working alone, and for using chainsaws.</p> <p>Based on observations in the field and interviews with NSLFFPA staff, NSLFFPA is not currently in conformance with Indicators 4.2.1 and 4.2.2 in regard to safety. Non-conformance with Criterion 4.2 is a Major NCR because this non-conformance is a re-occurrence of a non-conformity that was previously identified within the last 2 years.</p>				
Corrective Action Request:	<p>Organization shall implement corrective actions to demonstrate conformance with the requirement(s) referenced above.</p> <p>Note: Effective corrective actions focus on addressing the specific occurrence described in evidence above, as well as the root cause to eliminate and prevent recurrence of the non-conformance.</p>			
<b>Timeline for Conformance:</b>	One month from finalization of report. Due date: January 21, 2013.			
Evidence Provided by	NSLFFPA provided Rainforest Alliance with the following evidence about			

<p>Organization:</p>	<p>work undertaken to address Major NCR 02/13:</p> <ul style="list-style-type: none"> <li>• A written summary of steps taken to address Major CAR 02/13;</li> <li>• A certificate of membership in the Nova Scotia Forest Safety Society;</li> <li>• Copy of new NSLFFPA Policy on Working Alone;</li> <li>• Copy of remote location and working alone plan templates for members;</li> <li>• Copy of emergency response procedures for members;</li> <li>• Copy of safety checklist to be used by NSLFFPA staff at start-up inspections;</li> <li>• Copy of email of Jan 3, 2013 to members regarding the deficiencies identified in the annual audit and the new safety audit procedures being implemented by NSLFFPA;</li> <li>• Copy of notification about courses in basic first aid and chainsaw use available for members in January 2013; and,</li> <li>• Copy of Monitoring Tracker showing 11 safety inspections, using the new safety checklist since annual audit in November.</li> </ul>
<p>Findings for Evaluation of Evidence:</p>	<p>In response to the Major NCR 02/13, NSLFFPA took the following actions:</p> <ul style="list-style-type: none"> <li>• Reviewed and revised the NSLFFPA Health and Safety Policy to ensure all policies and work procedures were consistent with policies established in Nova Scotia in "The Forest Professional;</li> <li>• Developed a new policy, specific to NSLFFPA members for working alone including specific reference to use of chainsaws in work-alone situations;</li> <li>• Developed Remote Location and Work Alone plan templates for use by members;</li> <li>• Established and implemented procedures for NSLFFPA staff to conduct safety inspections on members at the time of start-up of operations using a standardized inspection checklist, and based on new notification requirements (see (Major CAR 03/13);</li> <li>• Advised members of a NSLFFPA requirement that any non-landowner workers on the woodlot require personal liability insurance to work on the woodlot;</li> <li>• Revised the emergency response procedures for injuries, accidental spills, lost workers;</li> <li>• Took out lifetime associate membership in the Nova Scotia Forest Safety Society (FSS);</li> <li>• Arranged for courses in basic first aid and chainsaw safety for members through the FSS to be conducted in January 2013;</li> <li>• Informed all members by email and/or mail of the results of the annual audit and of the new safety policies and procedures established and implemented as a result; and,</li> <li>• Advised members of the high priority on safety and the availability of NSLFFPA staff to provide advice or to organize courses through the FSS.</li> </ul> <p>In response to this Major NCR, NSLFFPA has developed two new requirements. First, that NSLFFPA staff is performing "safety audits" using a new safety checklist at start-up of members operation and on regular inspections. The "safety checklist" includes first aid and personal safety equipment (including clothing and equipment), machine safety, fire safety and environmental safety (spill kits). Members are expected to be aware of all safety requirements. Second, NSLFFPA has instituted a requirement that any non-landowner workers working on the woodlot require personal liability insurance to work on the woodlot.</p>

	<p>In addition, NSLFFPA has developed a specific policy for members working alone on woodlots, and with chainsaws, based on the experience of NSLFFPA foresters and extension staff. The policy references the Provincial code of practices outlined in "The Forest Professional". The NSLFFPA "Policy on Working Alone" strongly discourages members from working alone with chainsaws and requires anyone who must work alone on a woodlot to have a written work alone plan signed by the worker and the designated contact specifying the details of how check-in procedures and communication will be undertaken. A template of a work alone plan has been developed and provided to members.</p> <p>In an email and/or letter on December 17, 2012 NSLFFPA notified the members that "The 2012 annual audit (Nov 7-10) identified deficiencies in our health and safety requirements, both as members operating and as a group manager ensuring safe work practices". In a follow-up letter of January 3, 2013 NSLFFPA communicated the new safety requirements to their members and posted information on the NSLFFPA website in the "Safety" menu. NSLFFPA re-stated its commitment to safety, and to meeting safe work requirements established by "The Forest Professional" and by the Forest Safety Society (FSS) in both communications. Members are directed to review the documents related to these new procedures and requirements that are posted on the website.</p> <p>NSLFFPA is now undertaking safety audit inspections on its members as part of start-up inspections and regular inspections. This is facilitated by the notification requirements put in place to meet Major NCR 03/13. The Monitoring Tracker spreadsheet shows that 11 safety audits have been completed since November 19, 2012 using the safety audit checklist developed following the annual audit. Six of those inspections identified safety deficiencies – in regard to missing spill response kits, absence of work alone plans, absence of first aid kits or supplies, and deficient equipment. The Monitoring Tracker records 6 internal CARs issued to these members at the time of the inspection. As per the new CAR policy, the resolution required, completion date and the follow-up inspection by NSLFFPA staff are all documented in the Tracker. The Tracker indicates that all of these CARs have been addressed and closed or will be addressed and closed before any work re-commences.</p> <p>NSLFFPA has also joined the Forest Safety Society, which gives it and its members access to the resources of the FSS and to the safety courses that the Society offers. NSLFFPA has lined up courses on basic first aid and chainsaw safety for members in January and has promoted these to members through emails and or by mail.</p> <p>With these actions, NSLFFPA has addressed the lack of awareness by members on the safety issues identified in the audit – working alone, chainsaw use and liability through the new policies, and is offering training courses to members. The Association has developed and implemented new requirements and procedures and has communicated these to members and posted information on the website. Since late November, 2012, NSLFFPA has been implementing a safety audit on members at the start-up of activities and has been imposing CARs on members found in non-conformance. These address the non-conformities identified and MAJOR NCR 02/13 is met and closed.</p>
<b>NCR Status:</b>	CLOSED.
Comments (optional):	None.

<b>MAJOR NCR#:</b>	03/13	<b>NC Classification:</b>	Major <b>X</b>	Minor
Standard & Requirement:	FSC-STD -30-005, Requirement 3.2			
Report Section:	Appendix VII, Group Management Checklist 3.2			
<b>Description of Non-conformance and Related Evidence:</b>				
<p>In this annual audit period, there were several cases noted in the field or in inspection reports where woodlot members did not notify NSLFFPA about activities and where operations were completed before the NSLFFPA was aware of them. In at least one case, the harvesting that was undertaken was significantly different than the activity that was described in the forest management plan. The woodlot owner took advice from a neighbor/logging contractor to carry out harvesting that was quite different from the plan. This left the NSLFFPA without control of the members activity.</p> <p>It is not clear in all cases that the woodlot owners understand that following the forest management plan is a key component of meeting the FSC Principles and Criteria, and that the plan sets out stand prescriptions that meet FSC requirements. Some woodlot owners may feel that since they own their own woodlot, they are free to make decisions about harvesting activities in the plan, and that while the plan is useful, it does not necessarily guide what they do. Again in these situations, NSLFFPA does not have control of members activities and members may undertake activities on their woodlots that do not meet FSC requirements.</p> <p>To ensure that all FSC requirements are being met, NSLFFPA must demonstrate that they can ensure that all operations by all owners are meeting the requirements of the FSC standard. The apparent lack of an implemented and efficient internal control system is a significant non-conformance.</p>				
Corrective Action Request:	<p>Organization shall implement corrective actions to demonstrate conformance with the requirement(s) referenced above.  Note: Effective corrective actions focus on addressing the specific occurrence described in evidence above, as well as the root cause to eliminate and prevent recurrence of the non-conformance.</p>			
<b>Timeline for Conformance:</b>	Three months from finalization of report. Due date: March 21, 2013.			
Evidence Provided by Organization:	<p>NSLFFPA provided Rainforest Alliance with the following evidence about work undertaken to address Major NCR 03/13:</p> <ul style="list-style-type: none"> <li>• A written summary of steps taken to address Major CAR 01/13;</li> <li>• Copy of an email of December 17 to members in regard to the annual audit findings and notification requirements;</li> <li>• Copy of a page added to the front of the Forest Management Plan;</li> <li>• Copy of NSLFFPA internal annual audit procedure;</li> <li>• Copy of NSLFFPA internal audit checklist;</li> <li>• Copy of new Notification Tracker spreadsheet showing 51 notifications of activity since Nov 20, 2012</li> </ul>			
Findings for Evaluation of Evidence:	<p>In response to the Major NCR 03/13, NSLFFPA took the following actions:</p> <ul style="list-style-type: none"> <li>• Notified members by email and/or letter that the annual audit had found that NSLFFPA could not demonstrate that members were informing the Association when activity was about to begin. In the email the Association requests that members inform them about start-up of activities so that inspections, which are a requirement of certification, can be done.</li> <li>• Developed a new page at the front of the management plan so that members sign an acknowledgement that “all members are required to inform NSLFFPA prior to starting any forest management activities”;</li> <li>• Developed a “Notification Tracker” so that notice is documented and follow-up actions by NSLFFPA staff are recorded; and,</li> <li>• Developed a procedure for conducting an annual audit of randomly selected sample of members, separate from regular inspections, and developed a checklist for an annual audit.</li> </ul>			

	<p>NSLFFPA notified members in a December 17 e-mail and/or letter as follows:</p> <p>“An additional audit finding was that we weren't demonstrating that all members were informing us when activity is about to take place. We're here to serve our members by making ourselves available to do activity and safety inspections at job start-up which is a requirement of certification. Please phone or email when work is about to start or provide us with contractor contact info so we can arrange timely site visits.”</p> <p>In addition, NSLFFPA has added a statement regarding notification to the Executive Summary page of the Forest Management Plan immediately above the signatures of the Landowner and the Association. This requires all members signing forest management plans to acknowledge that:</p> <p>“All members are required to inform NSLFFPA prior to starting any forest management activities on a certified woodlot so further guidance can be provided. This triggers a pre- or active work inspection to ensure health and safety requirements are met. This also allows for a review of restoration objectives and management plan recommendations. NSLFFPA staff should be informed of any activities that differ from those in the plan.”</p> <p>To track notification of work and demonstrate their oversight, NSLFFPA created a new spread sheet “Notification Tracker” to record notifications of activity and to record field follow-up inspections. Since the first entry on Nov 20, 2012, there have been 51 notifications from members about various activities on their woodlots. The results of NSLFFPA inspections are recorded in the spreadsheet.</p> <p>These measures address the non-conformity identified in the annual audit and demonstrate that NSLFFPA has procedures in place to allow it to proactively review work plans to ensure conformity with FSC requirements.</p> <p>NSLFFPA also developed a procedure for conducting annual audits on a randomly selected sample of members. The procedure includes the process for selection, the number of member woodlots to be selected in each annual audit, the areas to be examined and the analysis and distribution of audit results. An audit checklist identifies subject items to be reviewed in the field to determine conformity with the management plan and with FSC requirements, including identification of HCVFs and conformity with management prescriptions for HCVFs.</p> <p>The changes implemented to require notification, track inspections, and to implement an annual audit procedure address the non-conformities and meet the requirements of the Major NCR. MAJOR NCR 03/13 is met and closed.</p>
<b>NCR Status:</b>	CLOSED.
Comments (optional):	None.

### III. CONCLUSIONS

NCRs Closed:	<input checked="" type="checkbox"/> No follow-up required related to closed NCRs
	<input type="checkbox"/> Original NCRs closed and new NCR(s) issued, see section IV below

NCRs Open:	<input type="checkbox"/> Certification/Verification/Validation not approved; conformance with NCRs required
	<input type="checkbox"/> Major NCRs not closed; suspension of certification/verification required
	<input type="checkbox"/> Minor NCRs are upgraded to Major; see section IV below
	<input type="checkbox"/> New NCR(s) issued, see section IV below
Comments/Follow-up Actions:	None

#### IV. OPEN NCRs

Existing NCRs (from 2013 annual audit):

<b>NCR#:</b>	04/13	<b>NC Classification:</b>	Major	Minor X
Standard & Requirement:	FM-35, 5.2.2			
Report Section:	Appendix V: Chain of Custody Conformance, Section 5.2.2			
<b>Description of Non-conformance and Related Evidence:</b>				
There have been instances in the past year, including an article submitted to a newspaper, of NSLFFPA making claims regarding FSC and RA, and using FSC and RA trademarks, without first submitting them to RA for approval.				
Corrective Action Request:	Organization shall implement corrective actions to demonstrate conformance with the requirement(s) referenced above.			
<b>Timeline for Conformance:</b>	By the next annual surveillance audit			
Evidence Provided by Organization:	PENDING			
Findings for Evaluation of Evidence:	PENDING			
<b>NCR Status:</b>	OPEN			
Comments (optional):				

<b>NCR#:</b>	05/13	<b>NC Classification:</b>	Major	Minor X
Standard & Requirement:	FSC-STD-30-005, Requirement 8.1 and 8.3.			
Report Section:	Appendix VII, Group Management Checklist.			
<b>Description of Non-conformance and Related Evidence:</b>				
Since the last annual audit, the amount of activity within the group has been limited because of the closure of the NewPage Port Hawkesbury mill, and the inspections by the foresters and extension staff provide some monitoring of all activities. However, these are visits or inspections. They are not part of an organized, structured, annual monitoring program that involves visits to a selected sample of group members to confirm conformance with the FSC Maritime standard, as required by Requirement 8.1 of the FSC 30-005 standard.				
Corrective Action Request:	Organization shall implement corrective actions to demonstrate conformance with the requirement(s) referenced above. Note: Effective corrective actions focus on addressing the specific occurrence described in evidence above, as well as the root cause to eliminate and prevent recurrence of the non-conformance.			
<b>Timeline for Conformance:</b>	By the next annual audit			
Evidence Provided by	PENDING			

Organization:	
Findings for Evaluation of Evidence:	PENDING
<b>NCR Status:</b>	OPEN
Comments (optional):	

Newly issued or upgraded NCRs: None

## V. AUDIT REPORT APPROVAL

*Note: a formal Q-09 Report Review and Approval (RRA) Checklist conducted by an independent, authorized reviewer is required when the CVA results in certificate/verification/validation issuance or suspension/termination, or when there is a change in scope. In all other cases, the report may be approved with the 2<sup>nd</sup> checkbox below by an authorized RRA reviewer which may be the CVA auditor, or by a Senior Auditor.*

Refer to separate Q-09 RRA Checklist

Report approved by way of this checkbox

Approved by: Krista West

Date: February 12, 2013

Salesforce has been completed with applicable files uploaded, and is updated based on any changes to the Organization details or other areas relevant to the CVA.