



**BUREAU  
VERITAS**

**Bureau Veritas Certification  
North America, Inc.  
SFI Forest Management Audit Report**

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PQC Code	E01E
Contract Number	US 2734518

Certification Audit:	X	Re-Certification Audit:		Surveillance Audit:		#	Scope extension audit:	
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**Audit Summary**

**Introduction**

This report summarizes the results of the initial audit conducted on the Arkansas Forestry Commissions (AFC's) SFI program for forest management on the Poison Springs State Forest. The audit was conducted by Mr. Richard Boitnott, Bureau Veritas Certification lead auditor. Mr. Boitnott is an SAF certified forester, a Texas accredited forester, and has wildlife management expertise.

**Audit Scope, Objectives and Process**

The scope of this audit is "Forest management conducted by the Arkansas Forestry Commission on the Poison Springs state forest". The audit was conducted against the SFI 2015-2019 Standard Forest Management Edition. All SFI Objectives were covered during the audit. There was no substitution or modification of indicators. Specifically, two objectives of the SFI audit were to verify that the Program Participant's SFI Program is in conformance with the SFI Objectives, Performance Measures, and Indicators, and any additional indicators that the Program Participant chooses, and verify whether the Program Participant has effectively implemented its SFI Standard program requirements on the ground. Standard Bureau Veritas Certification protocols and forms were applied throughout the audit as provided by the most recent version of the Bureau Veritas Certification SFI Auditor Handbook available on the auditor access website.

**Audit Plan**

The stage 1 audit was conducted for one day at the Camden Arkansas office on August 18, 2017. The stage 2 field audit was conducted for one day on October 16, 2017. A closing meeting was conducted at the end of the day on the 16<sup>th</sup>. An audit plan was developed and is on file with Bureau Veritas Certification

**Company Information**

The Arkansas Forestry Commission is a public entity tasked with conducting forest management activities on 23,506 acres within the Poison Springs State Forest. The state forest is used for public recreation, and serves as a demonstration forest for a variety of forest and wildlife management activities. The forest type consists primarily of natural stands of mixed pine/hardwood, along with some loblolly plantations on land purchased from adjoining timber companies. Most stands are managed under an uneven-aged management system. There is some clearcutting and use of

herbicides, but it is limited. Most stands are thinned or select harvested.

## **Multi-Site Requirements**

N/A

### **Audit Results**

The stage 1 audit was conducted to determine if the AFC's system documentation met the requirements of the SFI 2015-2019 Standard Forest Management Edition. The field audit consisted of a review of four harvest sites (three thinnings and one clearcut). Two prescribed burns, one herbaceous weed control, and one regeneration/chemical site prep tract.

#### **Objective 1-Forest Management Planning:**

The AFC has an inventory system. It conducts cruises across the entire property every 5 years. The organization is using T-Cruise to determine growth and yield. The organization is aware of potential impact of climate change on forest inventory. A general site description provides a land classification system. The agency is harvesting well below the estimated growth rate of 3%.

The AFC only conducts conversions to achieve restoration objectives. It has not defined what it considers to be a conversion, and has not explicitly defined the process for making sure it meets the requirements of PM 1.2. An opportunity for improvement was issued. The agency does not convert land to non-forest uses.

#### **Objective 2-Forest Health and Productivity:**

Stands are designated for artificial regeneration on a stand-by-stand basis. If a stand has sufficient natural regeneration, then it is not designated for artificial regeneration. AFC does an excellent job of monitoring and diligently managing its forest to prevent impacts from pests.

The AFC does not conduct a lot of regeneration cuts requiring the use of herbicides. When it does, it uses very low rates of herbicides typical for this region of the country. The two herbicide projects reviewed during the audit demonstrated implementation of application BMPs. There was no off-target spray observed. The agency does not use any WHO Type 1A or 1B pesticides, nor does it use any banned under the Stockholm Convention.

Soil productivity was very well protected in all resource units. No rutting or soil compaction was observed during the audit. The soils on Poison Springs State Forest are very sandy, lending itself to wet-weather logging.

#### **Objective 3-Protection and Maintenance of Water Resources:**

Compliance with the Arkansas BMPs was evident on all harvest sites reviewed during the audit. Streamside management zones were very well established, generally wider than required. Erosion control measures were in place on roads and skid trails. Logging contracts contain a requirement for compliance to BMPs. Only one stream crossings was observed during the audit. Interviews with employees indicated the AFC designs timber sales to avoid crossing stream courses.

#### **Objective 4-Conservation of Biological Diversity:**

The AFC operates a wildlife management and biodiversity program appropriate to the scale of its operations. There are no known occurrences of T&E species. The agency has received information from The Nature Conservancy and the Arkansas Heritage Commission on the potential occurrences

of FECVs and significant species of concern. The AFC does an excellent job of restoring and maintaining native habitat, converting pine/hardwood stands to hardwood, which is the opposite of the practice of many of the surrounding timber companies. The agency also replants clearcut areas to shortleaf pine and a variety of hardwood species, and has an aggressive prescribed burning program. The AFC was issued a notable practice for their contribution to habitat diversity

Most harvesting is through thinning, with good retention of snags. The one clearcut observed during the audit retained some snags, but was a small cut that did not require a lot of retention. Clearcuts tend to be quite small, not requiring a lot of retention.

The AFC employees are aware of significant occurrences of non-native invasive species; the two most prevalent being kudzu and Chinese privet. Both are treated with herbicides.

AFC has contacts with the University of Arkansas at Monticello and the Arkansas Game & Fish Commission to incorporate research results into management planning. This is evidenced by the establishment of food plots to benefit pollinators.

#### Objective 5-Management of Visual Quality and Recreational Benefits:

The AFC places a lot of emphasis on visual quality. 80% of the forest is uneven-aged. The primary visual impact is dealing with White Oak Lake. The one clearcut conducted last year was 56 acres. Most clearcuts are around 40 acres. The one clearcut observed during the audit complied with green-up requirements.

#### Objective 6-Protection of Special Sites:

The AFC had identified the special sites that could be on its property. The potential presence of these resources is examined during activity planning processes

#### Objective 7-Efficient Use of Fiber Resources:

Harvest operations demonstrated an appropriate level of utilization. While a lot of material is left on the ground, this is due to hardwood sales, which result in a lot of slash.

#### Objective 8: Recognize and Respect Indigenous People's Rights:

The AFC has a policy in place to respect the rights of indigenous peoples. No known federally recognized tribes exist in Arkansas, but the agency has a process to respond to public inquiries.

#### Objective 9-Legal and Regulatory Compliance:

The AFC's system to achieve compliance consists of contract language, pre-activity planning processes, training, and monitoring. AFC has a written policy in place to comply with social laws. The agency has received no communication from interested parties concerning it or its supplier's performance relative to ILO core conventions.

#### Objective 10-Forestry Research, Science and Technology:

The AFC has conducted progeny tests, and has a 319 grant to evaluate the road design alternative. The state forest is often used as a demonstration forest. The AFC has access to information on the potential impacts of climate change on forest health and productivity, and wildlife and wildlife habitat.

#### Objective 11-Training and Education:

The agency has a statement of commitment to the SFI standard that is available to all employees. All employees are now required to receive training specific to their SFI responsibilities. Prior to stage 1, the agency conducted training according to the requirements of all state employees, which did not address SFI. A non-conformance was issued, but the AFC implemented corrective action by developing an SFI specific training plan. Training records verified training has occurred as required by the agency's procedures. The agency requires loggers to have at least one person on each job who maintains current training status. The AFC's written agreement with loggers contains a requirement for the use of qualified loggers. The logger training program contains all the requirements of 11.2.1.

#### Objective 12-Community Involvement and Landowner Outreach:

The AFC is a member of the Arkansas SIC. Member do not pay dues to the SIC, but provide support to the Arkansas Timber Producers Association and the Arkansas Forestry Association education fund. The agency provides technical assistance to landowners. The management plan includes information on T&E species, invasive species, species of concern, and special sites. The AFC is the lead agency for Forest Legacy. The agency participates in a forestry education class, and puts on landowner workshops. The Arkansas SIC has a process to respond to reports of inconsistent practices. The AFC has a process to respond to public inquiries.

#### Objective 13: Public Land Management Responsibilities:

The agency is required to get input from the public as part of its overall management planning process.

#### Objective 14-Communications and Public Reporting:

Since this is the agency's initial audit, it has not yet provided an audit report to SFI, Inc. or completed an annual progress report. However, it has the GIS and record-keeping capabilities to provide information to complete the report.

#### Objective 15-Management Review:

The AFC conducted management review prior to stage 1. However, it had not described the system for collecting information to present to management to determine the agency's progress towards achieving SFI Objectives. AFC was issued a non-conformance during stage 1, but has since developed a set of procedures to describe its management review process and the data needed to present to management.

### **Findings**

#### **Previous non-conformances:**

Three minor non-conformances were issued during stage 1. Corrective actions were properly implemented prior to stage 2.

#### **Non-conformances:**

No non-conformances were issued during stage 2.

#### **Opportunities for Improvement:**

No opportunities for Improvement were issued during stage 2.

**Notable Practices:**

One notable practice was observed during the audit:

1. PM 4.1, Ind. 1: The AFC does an excellent job of restoring native habitat. Clearcut areas are not automatically planted to loblolly pine, as others do in this region of the country. The agency plants a mixture of shortleaf pine and a variety of oak species to contribute to habitat diversity. AFC also has an aggressive controlled burning program to promote wildlife habitat, and does an excellent job of managing natural hardwood stands, and even converting some pine/hardwood to hardwood to promote species diversity across the landscape.

**Logo/label use:**

AFC has not yet used the SFI logo, but may do so, and knows to contact SFI to obtain approval before doing so. It does not intend to use the BVC logo.

**SFI reporting:**

This is AFC's initial audit, so no audit reports have yet been submitted.

**Review of Previous Audit Cycle**

N/A

**Conclusions**

AFC was issued three minor non-conformances during stage 1, which were closed prior to stage 2. None were issued during stage 2. Since the non-conformances issued during stage 1 are considered closed, the agency is recommended for immediate certification to the SFIS 2015-2019 FM Standard.

**SEE SF61s FOR AUDIT NOTES**

<b>Summary of Audit Findings:</b>									
Audit Date(s):		From: Aug. 18, 2017(stage 1) Oct. 16, 2016 (stage 2)				To: Aug. 18, 2017(stage 1) Oct. 16, 2017 (stage 2)			
Number of SF02's Raised:			Major:		0		Minor:		3
Is a follow up visit required:		Yes		No	X	Date(s) of follow up visit:			
Follow-up visit remarks:									
<b>Team Leader Recommendation:</b>									
Corrective Action Plan(s) Accepted		Yes	X	No		N/A		Date:	9/20/2017
Proceed to/Continue Certification		Yes	X	No		N/A		Date:	10/16/2017
All NCR's Closed		Yes	X	No		N/A		Date:	9/21/2017
Standard audit conducted against:									
1)	SFIS 2015-2019 FM Edition			3)					
2)				4)					
Team Leader (1):		Team Members (2,3,4...)							
Richard Boitnott; CF, TX AF		2)							
		3)							
		4)							
		5)							
Scope of Supply: (scope statement must be verified and appear in the space below)									
Forest management conducted by the Arkansas Forestry Commission on the Poison Springs state forest									
Accreditation's		ANAB							
Number of Certificates		1							
Proposed Date for Next Audit Event									
Date	Oct 1-2, 2017								
Audit Report Distribution									
AFC : Joe Fox-joe.fox@arkansas.gov									
BVC: Amanda Lujan-amanda.lujan@us.bureauveritas.com									
BVC: Lilianna Ramirez-lilianna/ramirez@us.bureauveritas.com									

Clause	Audit Report
Opening Meeting	Participants: Daniel Browne, Joe Pittman, Cory Bositck Discussions: <ul style="list-style-type: none"> <li>➤ Introductions</li> <li>➤ Scope of the audit</li> <li>➤ Audit schedule/plan</li> <li>➤ Nonconformance types – Major / Minor</li> <li>➤ Review of previous nonconformances – 3 (stage 1).</li> <li>➤ Process approach to auditing and audit sampling</li> <li>➤ Confidentiality agreement</li> <li>➤ Termination of the audit</li> <li>➤ Appeals process</li> <li>➤ Closing meeting timing</li> </ul>
Closing Meeting	Participants: Daniel Browne, Joe Pittman, Cory Bositck Discussions: <ul style="list-style-type: none"> <li>➤ Introductions and appreciation for selecting Bureau Veritas Certification.</li> <li>➤ Review of audit process - process approach and sampling.</li> <li>➤ Review of OFIs and System Strengths</li> <li>➤ Nonconformances – 0 (stage 2)</li> <li>➤ Date for next audit.</li> <li>➤ Reporting protocol and timing</li> </ul>



## SF02/NA NONCONFORMITY REPORT

Company Name and Site:		<u>SF02#:</u>	
		SF02-01	
Contract #:	Type of audit (e.g., initial, surveillance):	Team Leader:	
US.2734518	Stage 1	Richard Boitnott	
Date:	Standard and Clause #:	Team Member:	
8/18/2017	SFIS Ind. 4.1.5		
Major	Minor	Other Documents (if applicable):	Company Representative:
	X		Joe Fox
<b>REQUIREMENT OF AUDITED STANDARD:</b>			
Indicator 4.1.5 requires the organization to have a program to address conservation of known sites with viable occurrences of significant species of concern			
<b>OBSERVED NONCONFORMITY:</b>			
During the audit there was no evidence the organization has evaluated the potential occurrences of significant species of concern			
<b>ROOT CAUSE ANALYSIS AND CORRECTIVE ACTION PLAN</b> (To be completed by the Company. Plan to be submitted in 30 days)			
Corrective Action Plan Date:	9/20/2017	Company Representative:	Joe Fox
Root Cause Analysis and Corrective Action			
Root Cause: Improper Training and knowledge of Forest of Exceptional Conservation Value(FECV) and other species of concern. We assumed previous contacts with TNC would have identified any occurrences. Corrective Action Plan: Contact TNC to receive documentation on Species on or near PSSF			
<b>ROOT CAUSE AND CORRECTIVE ACTION PLAN ACCEPTANCE REPORT</b> (To be completed by Bureau Veritas Certification – Verify effective identification of Root Cause and acceptance of Corrective Action Plan)			
Root Cause: Acceptable Corrective Action Plan: Acceptable			
Plan Accepted:	Yes	X	No
Comments:			
Auditor:	Richard Boitnott		Date: 9/21/2017
<b>CORRECTIVE ACTION IMPLEMENTATION</b>			
To be completed by Company – Provide objective evidence. Not to exceed: 90 Days <input checked="" type="checkbox"/> 1 Year <input type="checkbox"/>			
Corrective Action Completion Date:	9/20/2017	Company Representative:	Joe Fox
Corrective Action Implementation: Reviewed information obtained and scheduled training sessions with all effected employees. Method used to verify effectiveness of action taken: Documentation of training on FECV			
<b>CORRECTIVE ACTION IMPLEMENTATION ACCEPTANCE REPORT</b> (To be completed by Bureau Veritas Certification – Acceptance of Corrective Action taken)			
Accepted:	Yes	X	No
Nonconformance Closed:	Yes	X	No
Follow Up Comments:			
Auditor:	Richard Boitnott		Date: 9/21/2017



### SF02/NA NONCONFORMITY REPORT

Company Name and Site:		SF02#:	
		SF02-02	
Contract #:	Type of audit (e.g., initial, surveillance):	Team Leader:	
US.2734518	Stage 1	Richard Boitnott	
Date:	Standard and Clause #:	Team Member:	
8/18/2017	SFIS Ind. 11.1, Ind. 3		
Major	Minor	Other Documents (if applicable):	Company Representative:
	X		Joe Fox
<b>REQUIREMENT OF AUDITED STANDARD:</b>			
SFIS Ind. 11.1.3 requires the organization to ensure staff education and training is sufficient to their roles and responsibilities			
<b>OBSERVED NONCONFORMITY:</b>			
There is nothing in the management plan documenting what training is required to accomplish SFI objectives, and no training records are maintained for specific to SFI.			
<b>ROOT CAUSE ANALYSIS AND CORRECTIVE ACTION PLAN</b> (To be completed by the Company. Plan to be submitted in 30 days)			
Corrective Action Plan Date:	9/20/2017	Company Representative:	Joe Fox
Root Cause Analysis and Corrective Action			
Root Cause: Training guidelines were set for state wide employment, not taking into account any special needs to meet SFI Corrective Action Plan: Specific training for PSSF employees will be documented in the management plan and implemented			
<b>ROOT CAUSE AND CORRECTIVE ACTION PLAN ACCEPTANCE REPORT</b> (To be completed by Bureau Veritas Certification – Verify effective identification of Root Cause and acceptance of Corrective Action Plan)			
Root Cause: Acceptable Corrective Action Plan: Acceptable			
Plan Accepted:	Yes	X	No
Comments:			
Auditor:	Richard Boitnott	Date:	9/21/2018
<b>CORRECTIVE ACTION IMPLEMENTATION</b>			
To be completed by Company – Provide objective evidence. Not to exceed: 90 Days <input checked="" type="checkbox"/> 1 Year <input type="checkbox"/>			
Corrective Action Completion Date:	9/20/2017	Company Representative:	Joe Fox
Corrective Action Implementation: Incorporated training requirements in the management plan. Conducted training on FECV, SFI, Arkansas BMP Guidelines, Timber cruising and Marking Method used to verify effectiveness of action taken: Documentation of classes and attendees			
<b>CORRECTIVE ACTION IMPLEMENTATION ACCEPTANCE REPORT</b> (To be completed by Bureau Veritas Certification – Acceptance of Corrective Action taken)			
Accepted:	Yes	X	No
Nonconformance Closed:	Yes	X	No
Follow Up Comments:			
Auditor:	Richard Boitnott	Date:	9/21/2017



## SF02/NA NONCONFORMITY REPORT

Company Name and Site:		<u>SF02#:</u>	
		SF02-03	
Contract #:	Type of audit (e.g., initial, surveillance):	Team Leader:	
US.2734518	Stage 1	Richard Boitnott	
Date:	Standard and Clause #:	Team Member:	
8/18/2017	SFIS Ind. 15.1, Ind. 1, and 2		
Major	Minor	Other Documents (if applicable):	Company Representative:
	X		Joe Fox
<b>REQUIREMENT OF AUDITED STANDARD:</b>			
SFIS Ind. 15.1.1 requires the organization to have a system to review commitments, programs and procedures to evaluate effectiveness. and 15.1.2 requires the organization to have a system for collecting, reviewing, and reporting information to management regarding progress in achieving SFI 2015-2019 Forest Management Standard objectives and performance measures.			
<b>OBSERVED NONCONFORMITY:</b>			
While the organization conducts management review on a periodic basis, and uses its internal audit program to provide data for management to review, there is nothing in the management plan that describes the company's management review process, and no description of the system for collecting data beyond conducting an internal audit			
<b>ROOT CAUSE ANALYSIS AND CORRECTIVE ACTION PLAN</b> (To be completed by the Company. Plan to be submitted in 30 days)			
Corrective Action Plan Date:	9/20/2017	Company Representative:	Joe Fox
Root Cause Analysis and Corrective Action			
Root Cause: Improper Procedures for review. WE conduct periodic reviews, but failed to include SFI as part of our normal review process. We missed this requirement in the standard.			
Corrective Action Plan: Changing review process & conducting quarterly meetings on SFI standards			
<b>ROOT CAUSE AND CORRECTIVE ACTION PLAN ACCEPTANCE REPORT</b> (To be completed by Bureau Veritas Certification – Verify effective identification of Root Cause and acceptance of Corrective Action Plan)			
Root Cause: Acceptable			
Corrective Action Plan: Acceptable			
Plan Accepted:	Yes	X	No
Comments:			
Auditor:	Richard Boitnott		Date: 9/21/2017
<b>CORRECTIVE ACTION IMPLEMENTATION</b>			
To be completed by Company – Provide objective evidence. Not to exceed: 90 Days <input checked="" type="checkbox"/> 1 Year <input type="checkbox"/>			
Corrective Action Completion Date:	9/20/2017	Company Representative:	Joe Fox
Corrective Action Implementation: Do 3 Quarterly and 1 yearly review before yearly audit			
Method used to verify effectiveness of action taken: Copy of minutes from each meeting will be kept at PSSF office on Maul Rd			
<b>CORRECTIVE ACTION IMPLEMENTATION ACCEPTANCE REPORT</b> (To be completed by Bureau Veritas Certification – Acceptance of Corrective Action taken)			
Accepted:	Yes	X	No
Nonconformance Closed:	Yes	X	No
Follow Up Comments:			
Auditor:	Richard Boitnott		Date: 9/21/2017