Public Summary Report for
Forest Management
2018 Annual audit
Report for:

Syndicat des Producteurs de
Bois de la Gaspésie
in
New Richmond, Quebec, Canada

Report Finalized: December 17, 2018
Audit Dates: October 8-11, 2018
Audit Team: Ugo Lapointe

Certificate code(s): RA-FM/COC-007302
Certificate issued: October 14, 2015
Certificate expiration: October 13, 2020

Organization Contact: Olivier Côté
Address: 172, boulevard Perron Est
New Richmond, Québec
G0C 2B0

The only official version of this report is the French version.
The report below is a translation of the required portions of the
French report.
NOTE: More detailed public summary available in
French at http://info.fsc.org/
1. AUDIT PROCESS

1.1. Auditors and qualifications

<table>
<thead>
<tr>
<th>Auditor Name</th>
<th>Ugo Lapointe</th>
<th>Auditor role</th>
<th>Responsible for environmental and socio-economic aspects</th>
</tr>
</thead>
</table>

Qualifications:
Ugo joined the Rainforest Alliance team in 2011. Until December 2013, he held the position of coordinator of FSC certification in Quebec before working with the Rainforest Alliance as a consultant. He had previously worked 4 years overseeing the collection and data analysis and writing reports and articles within the framework of research projects carried out in the boreal forests in Quebec. Holder of a Master’s degree in forest ecology on the impact of forest management on wildlife in the boreal forest, Ugo completed the Rainforest Alliance FSC auditor training for the forest management and for the Chain of Custody as well as the Lead auditor ISO 14001 training. He is fluent in English and French.

1.2. Overview of sites visited

<table>
<thead>
<tr>
<th>Type of site</th>
<th># of Sites Visited</th>
</tr>
</thead>
<tbody>
<tr>
<td>Head office</td>
<td></td>
</tr>
<tr>
<td>□ Forest districts</td>
<td></td>
</tr>
<tr>
<td>☑ Forest sites</td>
<td>9</td>
</tr>
<tr>
<td>□ Other sites:</td>
<td></td>
</tr>
</tbody>
</table>
2. AUDIT FINDINGS AND RESULTS

2.1. Changes in the forest management of the Forest Management Enterprise (FME) and/or standard and stakeholder issues

<table>
<thead>
<tr>
<th>Issue</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Changes in the forest management of the FME have occurred since the last audit</td>
<td>Since the last audit, 2 new lots of less than 1,000 ha were added to the scope of the certificate. The capacity of the applicant to maintain its certificate was assessed according to the requirements of the forest management standard and the group standard (FSC-STD-30-005). The Regulation on sustainable forest for crown forest land (RADF) came into effect on 1 April 2018 and must be applied on intramunicipal public lands (TPI). No non-conformance regarding the applicant’s capacity to maintain its certificate was identified by the audit team.</td>
</tr>
<tr>
<td>Updates to group member list (if yes, see section 2.5 below)</td>
<td></td>
</tr>
<tr>
<td>Changes in the forest management standard used for audit have occurred since the last audit</td>
<td></td>
</tr>
<tr>
<td>Stakeholder comments on the forest management of the FME were received</td>
<td>Comment summary and RA response: See below</td>
</tr>
</tbody>
</table>

P | Stakeholder Comment: | RA Response: |
---|----------------------|--------------|
P4 | The manager of an organization collaborating with SPBG mentioned they are collaborative and accessible. | No response needed. |
P5 | Two stakeholders mentioned that the commercialization, for timber from private forests except for quality sawn timber, is a problem in the Gaspé Region | Indeed, the competition with public forest, the distance and the lack of diversity of local buyers in Gaspé lead to difficulties, in particular with the pulp wood quality. However, the SPBG makes efforts to diversify buyers and this aspect is in compliance. |

Pesticide Use
- FME does not use pesticides. (delete rows below)

2.2. Excision of areas from the scope of certificate

- Not applicable. Check this box if the FME has not excised areas from the FMU(s) included in the certificate scope as defined by FSC-POL-20-003. (delete the rows below if not applicable)

2.3. Conformance with applicable nonconformity reports

The section below describes the activities of the certificate holder to address each applicable non-conformity report (NCR) issued during previous evaluations. For each NCR a finding is presented
along with a description of its current status using the following categories. Failure to meet NCRs will result in non-conformances being upgraded from minor to major status with conformance required within 3 months with risk of suspension or termination of the Rainforest Alliance certificate if Major NCRs are not met. The following classification is used to indicate the status of the NCR:

<table>
<thead>
<tr>
<th>Status Categories</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Closed</td>
<td>Operation has successfully met the NCR.</td>
</tr>
<tr>
<td>Open</td>
<td>Operation has either <strong>not met</strong> or has <strong>partially met</strong> the NCR.</td>
</tr>
<tr>
<td>NCR #</td>
<td>01/17</td>
</tr>
<tr>
<td>---------</td>
<td>-------</td>
</tr>
<tr>
<td>Standard &amp; indicator:</td>
<td>Rainforest Alliance Locally adapted Standard for Assessing Forest Management in the Great Lakes/Saint- Lawrence region (April 2014), Indicator 6.3.10</td>
</tr>
<tr>
<td>Report section:</td>
<td>Appendix IV, Section 6.3</td>
</tr>
</tbody>
</table>

**Description of Nonconformance and Related Evidence:**

**Standard Requirement:**
Forest roads, skid trails and landings are well planned and designed to minimize soil erosion and loss of productive area. Forest roads, landings and skid trails are designed to:

a. reduce soil and road embankment erosion, soil compaction and rutting, […]

d. ensure the protection of aquatic habitat quality during construction and use.

**Finding:**
On a large private property visited by the audit team, the talus came down in the path slope that spanned over a stream, a tributary of a salmon river. At the time of the audit, the manager did not have an action plan to remedy the situation.

**Evidence:**
- Field visits
- Interviews with the applicant

**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 nonconformance.

**Timeline for conformance:**
Within 12 months of report finalization.

**Evidence provided by organization:**
- Non-conformance and CAR form including a complete report
- Interviews with SPBG staff
- Interviews with staff of the management organization
- Pictures of the repairs
- Field verification of watercourse crossings

**Finding after reviewing evidence:**
Following the issuance of this NCR and at the time of the 2017 FSC audit, an internal corrective action request was opened by SPBG so that prompt corrective measures be carried out.

As of October 18, 2017, SPBG management visited the sites and noticed that corrective work was carried out to repair the embankment that dropped in the landing of the road spanning a tributary stream of salmon river. Pictures and a monitoring report were presented which describe the state of the areas at the time of the visit. On that basis, the internal corrective action request was closed.

The actions taken by SPBG and the evidence of the corrective measures taken allow for the closure of this NCR.

**NCR Status:** CLOSED

**NCR #** | 02/17 | **Classification of NC :** | Major | Minor X |
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>Standard &amp; indicator:</td>
<td>Rainforest Alliance Locally adapted Standard for Assessing Forest Management in the Great Lakes/Saint- Lawrence region (April 2014),</td>
<td></td>
<td></td>
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</tbody>
</table>

Rainforest Alliance Forest Management Annual Audit Report - this version is a translation. The official version of this report is the French version.
### Description of Nonconformance and Related Evidence:

**Standard Requirement:**
The manager conducts regular monitoring of the forest in order to highlight changes to important habitat characteristics.

**Finding:**
The hare, marten and moose habitat suitability indexes calculated in 2016 for TPIs and large private properties identify important habitat characteristics. These habitat sustainability indexes are not considered in the applicant’s monitoring program. Consequently, the applicant has not defined a monitoring to assess impact of forest management activities on these TPIs.

**Evidence:**
- HCVF identification, the establishment of their management and monitoring protocol terms and conditions (SPBG 2014 version)
- Interviews with staff

**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 nonconformance.

**Timeline for conformance:**
Within 12 months of report finalization

**Evidence provided by organization:**
- Quantitative analysis of the habitats of the American marten, American moose and hare for the territories of Gestion Madeleine and Trois-Couronnes as well as the intramunicipal lots of the MRC de Côte-de-Gaspé, Rocher-Percé, Bonaventure and Avignon (updated in 2018 by Olivier Côté)
- INS-07-10 residual structure and wildlife habitat
- FOR-08-03 Formulaire d’évaluation de chantier 1.1.pdf
- Interviews with the staff of joint management group (OGC) and SPBG
- Validation of the use of forms in the field

**Finding after reviewing evidence:**
The SPBG has updated its forest characteristics monitoring approach and plans to update the Habitat suitability index (IQH) calculations to verify the changes by using the data of the fifth decadal.

The document “Analyse quantitative des habitats” indicates on page 3: “In order to evaluate the effect of the last 10-years management work on these IQH, a second calculation wave will be carried out in 2026 with the inventory data of the fifth decadal (deposit planned in 2020). These analyses are mainly to inform on the present quality level of some wildlife habitats and find, if applicable, changes in term of habitat quality between the update of inventory data. These comparisons, carried out periodically, will shed some light on the evolution of wildlife habitats and make adjustments if the habitat quality of a species should show a downward trend.”

The fifth decadal analyses will update the information regarding the forest cover in much larger certified forests which contain a forest cover analysis at the landscape scale (i.e. for TPIs and the large private forest of Trois Couronnes).

Also note that a conformance monitoring before and after the work was
implemented before the 2018 audit, to demonstrate the effectiveness of forest management activities in achieving the maintenance of complex structure, ecological and wildlife attributes during the forestry interventions (residual structure and wildlife habitat).

This NCR is closed.

**NCR Status:** CLOSED

**Comments (optional):**

<table>
<thead>
<tr>
<th>NCR #</th>
<th>03/17</th>
<th>Classification of NC : Major</th>
<th>Minor X</th>
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<tbody>
<tr>
<td>Standard &amp; indicator:</td>
<td>Rainforest Alliance Locally adapted Standard for Assessing Forest Management in the Great Lakes/Saint- Lawrence region (April 2014), Indicator 9.4.1</td>
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<td></td>
</tr>
<tr>
<td>Report section:</td>
<td>Appendix IV, Section 9.4.1</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Description of Nonconformance and Related Evidence:**

**Standard Requirement:**
A system for continuous monitoring of HCVF values shall be incorporated into the FME’s planning, monitoring and reporting procedures.

**Finding:**
The applicant did not carry out all annual monitoring in its HCVF monitoring protocol (see section 6. HCVF monitoring protocol).

**Evidence:**
- HCVF identification, the establishment of their management and monitoring protocol terms and conditions (SPBG 2014 version)
- Interviews with staff

**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 nonconformance.

**Timeline for conformance:**
Within 12 months of report finalization

**Evidence provided by organization:**
- **INS-08-02** Interactive HCVF monitoring 2.0
- HCVF protocol
- **ENR-08-02** HCVF monitoring registry
- Interviews with the SPBG certification coordinator

**Finding after reviewing evidence:**
An update of the monitoring program was carried out.

The new monitoring program plans an annual update of the knowledge of the protection or improvement of HCV. This update seeks to incorporate knew knowledge implemented on the subject and concerns, among other things, governmental reports and of other research sectors. An update on intervention terms and conditions for threatened, vulnerable or susceptible fauna and flora species was carried out in conjunction with forest stakeholders.

A forestry operations monitoring register exists and identifies the presence of HCV. In 2017, SPBG carried out a monitoring of HCV “La Grande-Rivière (saumon)” in the Trois couronnes forest to validate conformance with the terms and conditions associated with the salmon.
2.4. New nonconformity reports issued as a result of this audit

<table>
<thead>
<tr>
<th>NCR #</th>
<th>01/18</th>
<th>Classification of NC :</th>
<th>Major</th>
<th>Minor X</th>
</tr>
</thead>
<tbody>
<tr>
<td>Standard &amp; indicator:</td>
<td>Rainforest Alliance Locally adapted Standard for Assessing Forest Management in the Great Lakes/Saint- Lawrence region (April 2014), Indicator 5.3.1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Report section:</td>
<td>Appendix IV, Section 5.3</td>
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</tbody>
</table>

**Description of Nonconformance and Related Evidence:**

**Standard Requirement:**
Within the framework of the silvicultural system used, all harvested merchantable and marketable timber is utilized unless left on-site to provide structural diversity and wildlife habitat or for cultural reasons.

**Finding:**
During the field visit, it was observed that quality saw logs were abandoned in two felling areas of community forests (TPI).

**Evidence:**
- Field visits
- Interviews with the applicant

**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 nonconformance.

**Timeline for conformance:**
Within 12 months of report finalization

**Evidence provided by organization:**
PENDING

**Finding after reviewing evidence:**
PENDING

**NCR Status:**
OPEN

**Comments (optional):**

<table>
<thead>
<tr>
<th>NCR #</th>
<th>02/18</th>
<th>Classification of NC :</th>
<th>Major</th>
<th>Minor X</th>
</tr>
</thead>
<tbody>
<tr>
<td>Standard &amp; indicator:</td>
<td>Rainforest Alliance Locally adapted Standard for Assessing Forest Management in the Great Lakes/Saint- Lawrence region (April 2014), Indicator 5.3.2</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Report section:</td>
<td>Appendix IV, Section 5.3</td>
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<td></td>
</tr>
</tbody>
</table>

**Description of Nonconformance and Related Evidence:**

**Standard Requirement:**
The manager avoids and minimizes the removal of valuable but non-marketable trees without sound silvicultural justification.
Finding:
During field visits, several stacks of wood without buyers were observed along the side of the road. Particularly, decayed logs and dry and healthy logs rejected at the time of loading for transport. Interviews with workers and staff of SPBG and groups indicate that there is no recent training and a lack of framework to ensure that logs or the portion of logs without buyers be left in felling areas. As a result, there is a loss of efficiency, since the fellers could potentially better sort the trees to fell to leave the stems without commercial value standing, that the felled stems or ends of stems without commercial value could be left at the felling site.

Evidence:
Field visits
- Interviews with the applicant and forestry workers
- Shaping and wood quality Guide

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 nonconformance.

Timeline for conformance: Within 12 months of report finalization

Evidence provided by organization: PENDING
Finding after reviewing evidence: PENDING

NCR Status: OPEN
Comments (optional):

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NCR # | 03/18 | Classification of NC : Major Minor X
---|---|---
Standard & indicator: | Rainforest Alliance Locally adapted Standard for Assessing Forest Management in the Great Lakes/Saint- Lawrence region (April 2014), Indicator 9.2.2 |
Report section: | Appendix IV, Section 9.2.2 |

Description of Nonconformance and Related Evidence:
Standard Requirement:
On public forests the manager should take steps to encourage ongoing and constructive engagement with interested parties in the identification of High Conservation Values and the management options thereof, where the interest, commitment and capacity for such constructive engagement exists.

Finding:
The HCV update is limited to an annual update on the ecoforest cover of vulnerable and threatened species occurrences issued from the basis of the Centre de données sur le patrimoine naturel du Québec (CDPNQ), the HCV assessments and the identification of the latter carried out before the assessment audit and in 2016, regional boards for intramunicipal public lands (TPI) were established. Among other things, these boards aimed to encourage a continuous and constructive engagement with stakeholders to identify high conservation values and alternate management of these values. However, at the time of the audit, the applicant did not keep meeting notes or other evidence demonstrating that HCVs was discussed during the meetings. Thus, it is impossible to conclude that efforts were carried out to ensure continuous and constructive engagement of stakeholders.

Evidence:
- HCVF identification, implantation of management terms and conditions and monitoring protocol (SPBG version 2014)
- Interviews with the applicant
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 nonconformance.

**Timeline for conformance:** Within 12 months of report finalization

**Evidence provided by organization:** PENDING

**Finding after reviewing evidence:** PENDING

**NCR Status:** OPEN

**Comments (optional):**

<table>
<thead>
<tr>
<th>NCR #</th>
<th>Classification of NC</th>
<th>Standard &amp; indicator</th>
<th>Report section</th>
</tr>
</thead>
<tbody>
<tr>
<td>05/18</td>
<td>Major</td>
<td>RA FM-35,Indicator 5.9</td>
<td>Appendix V, Section 5.9</td>
</tr>
</tbody>
</table>

**Description of Nonconformance and Related Evidence:**

**Standard Requirement:**
For material sold with FSC claim the FME shall include the following information on sales and shipping documentation:
- a) FME FSC certificate registration code, and
- b) FSC certified claim: FSC 100%

**Finding:**
The review of transport slips, which are delivered with the material, show that they include the claim “FSC 100%” however they do not include the FME certificate registration code (RA-FM/COC-007302). Conversely, the invoices issued do not include the claim “FSC 100%”. This information is required on both types of documents when the invoice is not physically issued with the material.

**Evidence:**
- Interviews with SPBG staff
- SPBG sale document

**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 nonconformance.

**Timeline for conformance:** Within 12 months of report finalization

**Evidence provided by organization:** PENDING

**Finding after reviewing evidence:** PENDING

**NCR Status:** OPEN

**Comments (optional):**
Description of Nonconformance and Related Evidence:

| Standard Requirement: | 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 nonconformance.

Finding: | At the time of the audit, trademarks used on sales documents by the enterprise, were not approved by the registrar.

Evidence: |
- Interviews with SPBG staff
- SPBG sales document

Corrective action request: |

Timeline for conformance: | Within 12 months of report finalization

Evidence provided by organization: | PENDING

Finding after reviewing evidence: | PENDING

NCR Status: | OPEN

Comments (optional): |

2.5. Audit decision

The table below gives an overview of the NCRs status after the current audit.

<table>
<thead>
<tr>
<th>NCR type</th>
<th>#</th>
</tr>
</thead>
<tbody>
<tr>
<td>Open before current audit</td>
<td>3</td>
</tr>
<tr>
<td>Closed</td>
<td>3</td>
</tr>
<tr>
<td>Upgraded to Major</td>
<td>0</td>
</tr>
<tr>
<td>New NCRs</td>
<td>5</td>
</tr>
<tr>
<td>New Major NCRs</td>
<td>0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Certification Recommendation</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Certification requirement met: client approved for certificate maintenance:</td>
<td>Upon acceptance of NCRs issued</td>
</tr>
<tr>
<td>Certification requirements not met: major non-conformances identified that need to be addressed during 3 months after the final report date</td>
<td></td>
</tr>
<tr>
<td>Certification Suspension required: major non-conformance not addressed.</td>
<td></td>
</tr>
</tbody>
</table>
2.6. Updated Group Member list

Member list kept by RA. List “SPBG FSC FM audit 18 FRE Liste membres.xlsx”

1. Total # members in the certified pool:

   201 separate FMUs
   - 2 TPI of more than 10,000 ha (MRC Bonaventure et MRC d’Avignon)
   - 2 TPI of 1,000 – 10,000 ha (MRC Côte-de-Gaspé et MRC Rocher-Percé)
   - 2 large private properties of 1,000 – 10,000 ha (Gestion Madeleine et Forestière Trois Couronnes)
   - 195 private properties of less than 1,000 ha

2. Total area in Current Pool (ha. or acres): 52,734.36 ha