

# Recertification Assessment Report

## Sustainable Timber Tasmania

**AS4708:2013, ISO 14001:2015 & AS 4801:2001**

**May 2018**

Assessment dates	24/04/2018 to 07/05/2018 (Please refer to Appendix for details)
Assessment Location(s)	Hobart (001), Geeveston (002), Scottsdale (003), Derwent Park (004), Camdale (006), Perth (009), New Norfolk (011)
Report Author	[REDACTED]
Assessment Standard(s)	AS 4708:2013, ISO 14001:2015, AS/NZS 4801:2001



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## Executive Summary

This report presents the findings of a recertification assessment of Sustainable Timber Tasmania's (STT) Forest Management System (FMS) with respect to the requirements of AS4708:2013, the Australian Standard for Sustainable Forest Management. The audit was conducted concurrently with an assessment of the organisation's complementary Standards, ISO 14001:2015 Environmental Management Systems; and AS 4801:2001 Safety Management Systems. Findings in relation to ISO14001 and AS4708 have been incorporated into the structure of this report, where appropriate.

The scope of the audit included the application and implementation of the centrally-managed system at the Hobart Head Office as well as the planning and execution of a range of forest management activities in both the Northern Region and Southern Region. New premises at Derwent Park and New Norfolk were visited in addition to existing offices and depots at various locations including Perth Office and Nursery, Camdale Office and Depot, Scottsdale Office, Mount Horror Fire Tower and Geeveston Office and Depot.

The audit focussed on the effectiveness of the risk management framework within the organisation and in particular in relation to forest management activities.

STT has responded positively to the findings in the previous report. The three minor non-conformances have been effectively addressed and are now closed. STT has also reviewed the suite of opportunities for improvement noted in the previous report and has developed a plan to address each as appropriate.

This audit has identified two new minor non-conformances in relation to:

- Provision of resources; and
- Management review.

A number of opportunities for improvement have been identified and these are detailed in the report.

The management system is firmly integrated into the organization's business processes and the management team demonstrated a solid commitment to driving continual improvement across the business.

Operational sites and activities assessed included:

- Plantation thinning and clearfall operations
- Re-establishment of native forests following harvesting activities
- Identification and protection of Significant Biodiversity Values
- Operation of Fire Towers

The audit identified a number of key strengths in the STT management system. These are summarised as follows:

- Internal audit processes are demonstrably effective
- Processes for ensuring adequacy of regeneration through the Quality Standards
- Biodiversity monitoring and Swift Parrot habitat protection
- Access to information and adoption of mobile technology
- Seed management and variable retention

STT has demonstrated that its Forest Management System effectively incorporates the requirements of the respective Standards and that the system is supporting both staff and contractors in managing the various risks associated with the business. Consistent with the corporate commitment to continual improvement, the system is subject to ongoing development where opportunities for increased efficiency and effectiveness can be demonstrated. The adoption of new technologies, in particular the

development and adoption of mobile data capture and recording technology is noted as one such aspect of continual improvement.

Once again, the active participation and engagement of staff throughout the audit contributed to the effectiveness of this assessment. The auditors would like to thank STT for the preparation and planning that preceded the audit and the cooperation of all staff involved. **The report includes a recommendation for re-certification to the nominated Standards.**

## Changes in the organization since last assessment

The following changes in relation to organization structure and key personnel involved in the certified management system were noted:

The company has established a Company Secretary as a new position. In addition, a new Assistant General Manager Forest Products has been appointed.

No change in relation to the audited organization's activities, products or services covered by the scope of certification was identified.

There was no change to the reference or normative documents which is related to the scope of certification.

## Your next steps

### NCR close out process

Corrective actions with respect to nonconformities raised at the last assessment have been reviewed and found to be effectively implemented.

2 nonconformities requiring attention were identified. These, along with other findings, are contained within subsequent sections of the report.

A nonconformity relates to a single identified lapse, which in itself would not indicate a breakdown in the management system's ability to effectively control the processes for which it was intended. It is necessary to investigate the underlying cause of any issue to determine corrective action. The proposed action will be reviewed for effective implementation at the next assessment.

Please refer to Assessment Conclusion and Recommendation section for the required submission and the defined timeline.

## Assessment objective, scope and criteria

### Objective:

The objective of this assessment was to verify that the proposed scope of registration and the requirements of the nominated management Standards are effectively addressed by the organisation's management system.

### Scope:

The scope of the assessment is the documented management system with relation to the requirements of the nominated Standards and the defined assessment plan provided in terms of locations and areas of the system and organisation to be assessed.

### Criteria:

AS4708:2013; BS EN ISO 14001:2015; AS 4801:2001

Sustainable Timbers Tasmania management system documentation

Assessment Participants

Name	Position	Opening Meeting	Closing Meeting	Interviewed (processes)
		X		X
		X		X
		X		X
		X		X
		X		X
				X
		X		X
		X		X
		X		X
				X
		X		X
		X		X
		X		X
		X		X
				X
				X
				X
				X
				X
				X
				X
				X
				X
				X
				X
				X
				X

## Assessment conclusion

BSI assessment team

Name	Position

### Assessment conclusion and recommendation

The audit objectives have been achieved and the certificate scope remains appropriate. Based on the results of this audit, the audit team concludes that the organization fulfils the requirements of the nominated Standards and audit criteria identified within the audit report and that the management system continues to achieve its intended outcomes.

**RECOMMENDED** - The audited organization has been found in general compliance with the audit criteria and **is recommended for recertification to the nominated Standards.**

### Use of certification documents, mark / logo or report

The use of the BSI certification documents and mark / logo is effectively controlled.

## Findings from previous assessments

<b>Finding Reference</b>	1541178-201710-N1	<b>Certificate Reference</b>	EMS 603479
<b>Certificate Standard</b>	ISO 14001:2015	<b>Clause</b>	2015:7.3
<b>Category</b>	Minor		
<b>Area/Process:</b>	7.2; 7.3 Competence and Awareness; OHS 4.4.2 Training and competency		
<b>Details:</b>	The management system does not ensure that the revised Sustainable Forest Management Policy has been communicated to all staff and contractors in a systematic manner.		
<b>Objective evidence:</b>	There were no records to verify that the revised policy had been communicated to all staff and contractors.		
<b>Cause</b>	The periodic review of the policy had not been scheduled as part of the management review process. STT was unaware of the need for communication of the policy.		
<b>Correction / containment</b>	See below.		
<b>Corrective action</b>	STT Action Plan – Jan 2018 Review SFM policy. Communicate WHS and SFM policy to staff and contractors. Refer Vault CA 1681. Action plan accepted. BSI – Feb 2018 BSI - April 2018 STT has revised the policy and communicated it to all staff (email to staff 20.03.18) and contractors (letter to 16.03.18). This minor non-		

	conformance is now closed.
<b>Closed?:</b>	Yes

<b>Finding Reference</b>	1541178-201710-N2	<b>Certificate Reference</b>	EMS 603479
<b>Certificate Standard</b>	ISO 14001:2015	<b>Clause</b>	2015:8.1
<b>Category</b>	Minor		
<b>Area/Process:</b>	Site #4: National Park Depot		
<b>Details:</b>	The requirements for controls to manage the risks associated with storage of flammable substances were not demonstrated to be effective.		
<b>Objective evidence:</b>	At National Park Depot, up to 2000L of Jet A1 and Unleaded fuel is stored outside on Helicopter Landing area. The fuel has been stored for extended periods outside in an un-bunded area. Drums of fuel are stored on their side to prevent water entering, however the drums are in an un-bunded area.		
<b>Cause</b>	Lack of awareness in relation to STT operational requirements. Contract did not prescribe requirements for fuel storage		
<b>Correction / containment</b>	See below.		
<b>Corrective action</b>	STT Action Plan - Feb 2018 Update National Park Depot Safety and Environment Checklist. Vault # 1682 and 1734 to advise contractors by email. Vault # 1735 relating to revision of contract with helicopter contractors that bunding and storage of fuel is required. BSI - May 2018 Assessor sighted email from [REDACTED] to aerial service contractors stating that fuel stored overnight must be bunded and accessible through a locked gate. Photo of bund and cover sighted. This minor non-conformance is now closed.		
<b>Closed?:</b>	Yes		

<b>Finding Reference</b>	1541178-201710-N3	<b>Certificate Reference</b>	OHS 603481
<b>Certificate Standard</b>	AS/NZS 4801:2001	<b>Clause</b>	OHS 4.5.4
<b>Category</b>	Minor		
<b>Area/Process:</b>	Site #5: Dazzler Fire Tower		
<b>Details:</b>	The internal audit program does not include the operation of the fire towers.		
<b>Objective evidence:</b>	There is currently no systematic monitoring / inspection / audit process to verify the effective implementation of the safety management system and		



	control of risks associated with fire tower activities.
<b>Cause</b>	STT had not identified fire tower operation as part of the spectrum of activities covered by the internal audit program.
<b>Correction / containment</b>	See below.
<b>Corrective action</b>	<p>STT Action Plan – Jan 2018 1. Inductions • develop SWMS (including reference to site specific issues) • develop emergency procedures • standardise induction process • develop process of sign off of contractors and record keeping of contractors • alter risk register to refer to SWMS 2. Structures organise engineering inspections and review frequencies coordinate identification of asbestos containing materials review and implement solution s to access issues (i.e. three points of contact) 3. Facility review / upgrade of chairs/tables/toilets/cooking facilities / ablutions (feedback into SWMS) review monitoring form and frequency of monitoring 4. Contracts Standardise Fire Tower contracts between North and South Ascertain contractor relationship (exclusive possession vs supervised) 5. Audit Add to next seasons audit program. Refer Vault CA 1680 and Fire Tower Action Plan December 2017.</p> <p>Action plan accepted. BSI – Feb 2018</p> <p>BSI - May 2018</p> <p>Effectiveness of actions taken assessed and demonstrated at Mount Horror Fire Tower. This minor non-conformance is now closed.</p>
<b>Closed?:</b>	Yes



## Findings from this assessment

### Part 1: ISO 14001:2015 and related system components

#### Context of the organisation: 14001:2015 (4)

4.1 Determine external and internal issues

4.2 Needs and expectations of interested parties

4.3 Scope of EMS

4.4 Establish, implement, maintain and continually improve EMS

1. Objective evidence:

##### *1.1 Documentation*

- Forest Management Plan 2016
- Operational Risk Management Overview and Vault Risk Register Management Procedure

##### *1.2 Processes observed/demonstrated*

- Strategic Risk Review
- Corporate Governance processes and identification of risk who have established 6 financial targets and 3 non- financial. There are 11 strategic risks identified by the organisation including: Inability to effectively manage stakeholders to mitigate impact on STT's commercial strategy and financial sustainability.

##### *1.3 Records verifying processes*

- Operational Risk Management Overview and Vault Risk Register Management Procedure updated to include strategic risk review

##### *1.4 Interviews with key personnel*

- Interview with CEO and members of the leadership team at the opening meeting.

2. Methods for determining process results are effective and planned activities have been realised. It is noted that the Forest Management Plan is currently being reviewed and updated with the new company name. The revised draft was available for review.

3. The organisation's performance is consistent with the requirements of the Standard(s).

#### Leadership: 14001:2015 (5)

5.1 Leadership and commitment

5.2 Environmental policy; 1.1 Forest Management Policy (4708); 4.2 OHS Policy (4801)

5.3 Roles, responsibility and authority

1. Objective evidence:

##### *1.1 Documentation*

- SFM Policy February 2018
- Work Health and Safety Policy – Oct 2017 (RW logo)
- WHS Advisor Model Implementation Plan
- 2017/2018 Safety Management Strategy

- Corporate Plan FY19-22

#### *1.2 Processes observed/demonstrated*

- Review and update of policies
- Communication of policy to relevant parties
- New WHS Policy emailed to all employees and contractors.
- Access to policies on company website
- Executive Leadership Training program being rolled out
- Sale of plantation assets will support business strategy development and deployment.
- Strategies relating to GIS, Safety, People and Culture Land Management are being developed and implemented.
- WHS Advisor framework changes will engage and involve wider workforce
- Enterprise Agreement support change in organisations responsibilities, recognition and reward processes.

#### *1.3 Records verifying processes*

- Email to staff (20.03.18)
- Letter to contractors (16.03.18)
- Submission of WHS Advisor Model Implementation Plan to GMT 15 March 2018 and ESH Committee Board Sub Committee 10 April 2018.

#### *1.4 Interviews with key personnel*

- Certification Manager regarding review of policies and communications with staff and contractors.
2. Methods for determining process results are effective and planned activities have been realised. STT has revised the policy and communicated it to all staff (email to staff 20.03.18) and contractors (letter to 16.03.18).
3. The organisation's actual performance is consistent with the requirements of the Standard(s).

### **Planning: 14001:2015 (6); 4801:2001 (4.3.1, 4.3.2)**

#### 6.1.1 General - determine emergency situations

#### 6.1.2 Environmental aspects

#### 6.1.3 Compliance obligations

#### 6.1.4 Planning action

#### OHS 4.3.1 Planning identification of hazards, hazard/risk assessment and control of hazards/risks

#### OHS 4.3.2 Legal and other requirements

#### 1. Objective evidence:

##### *1.1 Documentation*

- Risk Register Review 18.04.18
- Operational Risk Management Review and Vault Risk Management Procedure V2.2 17.04.18
- Enviro / Safety Essentials

##### *1.2 Processes observed/demonstrated*

- Procedures for identification of significant environmental aspects
- Procedures for reviewing the Risk Register
- Annual subscription to Enviro Essentials

*1.3 Records verifying processes*

- Risk Matrix (to accompany Risk Management policy) has been modified to include. Impact classifications and risk levels to include 'severe' category.
- Vault ID 29 Timber Harvesting and Haulage
- 10 April 2018 – HSE Bulletin / Safety Law Checklist for Inspection of plant

*1.4 Interviews with key personnel*

- Certification Manager regarding review of risk framework
2. Methods for determining process results are effective and planned activities have been realised.
  3. The organisation's actual performance is consistent with the requirements of the Standard(s).

**Planning - Environmental objectives: 14001:2015 (6.2)****6.2 Environmental objectives and planning to achieve them****6.2.1 Environmental objectives****6.2.2 Planning actions to achieve environmental objectives****1. Objective evidence:***1.1 Documentation*

- Corporate policies as noted above
- Forest Management Plan
- Corporate Plan (DRAFT) March 2018
- Objectives and Target (Yellow Book) Procedure (Dec 2014)
- Yellow Book approved (2017-18)
- Statement of Corporate Intent (2018)

*1.2 Processes observed/demonstrated*

- Processes for setting objectives and targets at various levels within the organisation
- Use of WIKI to access relevant procedures
- Access to policies on company website
- Linkage between identified risks (aspects and impacts) and objectives and targets
- Processes for monitoring progress with respect to Yellow Book objectives.

*1.3 Records verifying processes*

- Yellow Book (2017-18)
- Environmental indicators (Yellow Book tab)
- Yellow Book Progress Report (March 2018)
- GMT Meeting minutes (March 2018)
- Environmental Report 09.04.18 (as included in Management Review Report)

*1.4 Interviews with key personnel*

- Certification Manager and Project Officer regarding review and periodic update of the Yellow Book; input and agreement with General Managers and formal approval by the GMT.
  - Asst. General Manager regarding the introduction of Power BI to enable performance reporting which has applications for safety performance monitoring.
2. Methods for determining process results are effective and planned activities have been realised. The Yellow Book includes objectives related to a broad spectrum of initiatives, including stakeholder

engagement, biodiversity (including biodiversity monitoring), productive capacity, forest health, fire (prescribed burning), soil and water, cultural heritage, safety etc.

3. The organisation's performance is consistent with the requirements of the Standard(s).

<b>Finding Reference</b>	1624738-201804-I1	<b>Certificate Reference</b>	EMS 603479
<b>Certificate Standard</b>	ISO 14001:2015	<b>Clause</b>	6.2
<b>Category</b>	Opportunity for Improvement		
<b>Area/Process:</b>	Planning - 6.2 Environmental objectives		
<b>Details</b>	Processes are in place for recycling and responsible disposal of office wastes, however at present these processes are not being monitored or reported.		

## Support: 14001:2015 (7); AS4801 (4.4.1, 4.4.2, 4.4.3)

7.1 Resources

7.2 Competence

7.3 Awareness

7.4 Communication - internal and external

7.5 Documented information

OHS 4.4.1 Structure and Responsibility

OHS 4.4.2 Training and Competency

OHS 4.4.3 Consultation Communication and Reporting

1. Objective evidence:

### 1.1 Documentation

- Contractor management system overview
- Contractor Safety and Env Appraisal Form 1.1
- Contractor Performance Review Guidelines V2.1 31.01.16
- Contract Compliance Matrix (SOP) 04.11.15 (for management of contractor performance)
- People and Culture (WIKI)
- STT Structure (05.04.18)
- Position Description Matrix
- Position Descriptions e.g. Land Property Manager V1.1 April 2018
- Records Management Procedure – May 2015
- The Forest Safety Code (2007) – 3.8.4 Training Program.
- Contractor Safety and Environment Appraisal. 3.0 skills training and competency management
- Contractor 'Job safety Instructions and Checklist'
- Safety and Environment Charter
- Stakeholder Engagement Strategy – May 2018 DRAFT
- Wiki and access Database

### 1.2 Processes observed/demonstrated

- Contractor engagement processes

- Contractor induction process
- Allocation of contractors
- Operational handover processes
- Monitoring contractor performance (incl. operational monitoring and audit)
- Annual contractor performance review
- Updating Organisational Charts
- New employee engagement process
- Development of new Enterprise Agreement and re-alignment of positions in new arrangements
- Advertising and recruitment processes
- Performance review process (revised) including identification of training needs
- Revision of Position Descriptions
- Selection of Panel Members
- Development of recruitment process including scenarios and role plays
- WHS Model Implementation Plan adopts the 8 step safety plan (developed by [REDACTED] with revised timeline. Identification of proponents and detractors is being undertaken. Responsibilities include Vault data entry by frontline staff. Project proposes to engage external Safety Specialist and project management support.
- Enterprise Agreement process using Google Community for communication.
- Safety Circle
- Southern Region Committee in place to support consultation and communication of WHS matters.
- AFCA is delivery training in relation to Chain of responsibility requirements.
- Bloody Legend program continues.
- Safety Roles and Responsibilities' mapping
- Review of Stakeholder Engagement Strategy
- Forest Management Plan is publically available and communicates input is encouraged.
- Major review of FMP scheduled for 2019 with engagement of stakeholders proposed.
- Stakeholder communication methods through media release, emails, facebook, website
- 3 year plan interactive web page for use by interested and affected stakeholders
- Stakeholder contact managed through consultation manager.
- Analysis of emerging issues through Consultation Manager
- Document Manager notifies process owner / manager reporting overdue documents
- Training for Transport operators

### *1.3 Records verifying processes*

- Contractor Safety and Env Appraisal Form 1.1 e.g. [REDACTED] 01.02.17
- Contractor Review – [REDACTED] 29.08.17
- New Position / Advertising Request Form e.g. P02722
- Text for advertised position
- Application Assessment Form e.g. P02722
- Recommendation for Appointment e.g. P02722 23.3.18
- Minutes for meeting for SE Committee.
- STT Register of training and competence
- Health and Safety responsibilities 2017-2018



- FMS documents due for review: Summary
- Senior WHS Advisor Position Description
- EHS Board Committee date 13 Feb 2018
- EHS Committee Actions Arising 14 Feb 2018

#### Forestry Logistic Safety Training

#### 1.4 Interviews with key personnel

- Certification Manager, Safety Manager and [REDACTED] regarding contractor engagement processes.
- Interviews with Certification Manager indicated that refresher training is proposed in relation to use of the Vault and Consultation Manager
- Interview with Stakeholder and Engagement Manager and Communications Adviser regarding stakeholder management.
- GM Corporate Services and People and Culture Manager regarding Human Resources
- Senior WHS Advisor regarding WHS consultation and communication process

2. Methods for determining process results are effective and planned activities have been realised.

3. The organisation's actual performance is consistent with the requirements of the Standard(s).

<b>Finding Reference</b>	1624738-201804-I2	<b>Certificate Reference</b>	EMS 603479
<b>Certificate Standard</b>	ISO 14001:2015	<b>Clause</b>	7.4
<b>Category</b>	Opportunity for Improvement		
<b>Area/Process:</b>	Support		
<b>Details</b>	The Contractor Performance Review Guidelines are written as both positive and negative terms. The desired outcomes are not always clearly stated.		

<b>Finding Reference</b>	1624738-201804-I3	<b>Certificate Reference</b>	OHS 603481
<b>Certificate Standard</b>	AS/NZS 4801:2001	<b>Clause</b>	4.4.2
<b>Category</b>	Opportunity for Improvement		
<b>Area/Process:</b>	Support		
<b>Details</b>	The process for monitoring effectiveness of contractor safety management system i.e. the Contractor Safety and Environment Appraisal has a focus on induction of workers and does not consider the training and supervision of workers to competence. (3.0 skills training and competency management). Contractor system has 'Job Safety Instructions and Checklist'.		

<b>Finding Reference</b>	1624738-201804-I4	<b>Certificate Reference</b>	OHS 603481
<b>Certificate Standard</b>	AS/NZS 4801:2001	<b>Clause</b>	4.4.5

<b>Category</b>	Opportunity for Improvement
<b>Area/Process:</b>	Support
<b>Details</b>	There are currently 32 WHS related system documents overdue by more than 6 months. Refer FMS documents due for review: Summary

## Operation: ISO 14001:2015 (8)

8.1 Operational planning and control

8.3 Emergency preparedness and response

(4708) 1.3.2 (g) and (4801) 4.4.7 Emergency preparedness and response

1. Objective evidence:

### 1.1 Documentation

- Emergency Management (WIKI)
- Emergency Response Guidelines
- Emergency Testing Schedule and Records 2017-18
- Emergency Procedures e.g. Aircraft incident; Road Failure (V2.3 10.17); Spill; Search and Locate Procedure

### 1.2 Processes observed/demonstrated

- Emergency testing
- Processes for post-event evaluation
- Maintenance of records in VAULT
- Emergency Drills, e.g. event conducted at toolbox meeting for Derwent Park

### 1.3 Records verifying processes

- Records of emergency testing at various locations, e.g. Forest Based Chemical/Hydrocarbon Spill 20.03.18
- Wildfire at logging job Incident #1241 24.01.18 in VAULT. Also, Fire Investigation Report
- Emergency Road Failure
- VAULT Records, e.g. Incident #1154 Spill
- Emergency Road Failure Incident – 20 Dec 2017
- Fire number 258898 WR013B 24 Jan 2018.
- Emergency Drill records for event conducted at toolbox meeting for Derwent Park

### 1.4 Interviews with key personnel

- Certification Manager and Safety Manager regarding emergency preparedness and response procedures
- Certification manager regarding management of incident records in VAULT.

2. Methods for determining process results are effective and planned activities have been realised.

3. The organisation's performance is consistent with the requirements of the Standard(s).



## Performance evaluation ISO 14001:2015 (9)

### 9.1 Monitoring, measurement, analysis and evaluation

#### 9.1 General

#### 9.2 Evaluation of compliance

#### OHS 4.5.1.2 Health surveillance

#### OHS 4.5.1 Monitoring and Measuring

##### 1. Objective evidence:

###### *1.1 Documentation*

- Forest Management Plan (Revised Draft) – various references throughout
- SOPs e.g. Harvesting and Sales 18.06.15
- Contractor Performance Review Guidelines
- Health Surveillance – Workplace Facilities and Environment
- Forest management Plan – Draft Clause 4.1.5, 4.9
- Harvesting and Sales SOP

###### *1.2 Processes observed/demonstrated*

- Operational monitoring processes and use of iAuditor
- Analysis of monitoring activities
- Contractor onsite audits of their safety management system to commence in June 2018.
- Harvesting and haulage contractor monthly monitoring
- FPC audits
- Contract review
- Compliance checks (weighbridge)
- Annual Firefighter Fitness

###### *1.3 Records verifying processes*

- Monitoring records as reported to FPA – Evaluation of Compliance
- FPA Annual Reports e.g. 2016-17
- Monthly Monitoring Reports e.g.
- iAuditor Records e.g. CZ015D 19.12.17 (Harvest); WW012C 29.01.18 (Road Construction); EV035B 31.10.17 (Fire preparedness)
- By August 2018 will conduct 25 reviews of contractor performance including legal reviews.
- Harvesting monitoring analysis (Excel spreadsheet from iAuditor)
- Annual Medical assessment by Workforce Health Assessor (includes hearing every 2nd assessment) and follow-up process for identified issues.
- Strategic Decision Item for GMT – June 2017 Proposal for Safety & Workers Compensation Performance Measures 2017/18.

###### *1.4 Interviews with key personnel*

- Certification Manager and Safety Manager regarding monitoring processes.

2. Methods for determining process results are effective and planned activities have been realised.

3. The organisation's actual performance is consistent with the requirements of the Standard(s).

<b>Finding Reference</b>	1624738-201804-I5	<b>Certificate Reference</b>	EMS 603479
<b>Certificate Standard</b>	ISO 14001:2015	<b>Clause</b>	9.1
<b>Category</b>	Opportunity for Improvement		
<b>Area/Process:</b>	Performance evaluation - 9.1 Monitoring, measurement, analysis and evaluation		
<b>Details</b>	System documentation is yet to be updated to clearly describe changes in monitoring processes which are currently being refined, e.g. use of iAuditor for monitoring various processes.		

## 9.2 Internal audit:

### 1. Objective evidence:

#### 1.1 Documentation

- Internal Audits (WIKI)
- Internal Audit Procedure V 4.0 01.14 (currently under review)
- Internal Audit Program and Schedule for current year
- Audit Report Template
- Peer Review Process
- FPA Audit Schedule and Program 2017 STT
- FPA Audit Report

#### 1.2 Processes observed/demonstrated

- Internal audits (operational and system)

#### 1.3 Records verifying processes

- VAULT Records e.g. Document Management System Audit #327 - 20.04.18; and Southern Region Audit #325 26-27.03.18
- Internal Audit Report
- FPA Audit Report records (as per FPA Assessment Program 2017-18 DFRAFT 09.04.18) Excel workbook.
- Audit 327 – Document and Record Management system

#### 1.4 Interviews with key personnel

Discussion with Certification Manager regarding internal audits

2. Methods for determining process results are effective and planned activities have been realised.
3. The organisation's actual performance is consistent with the requirements of the Standard(s).

## 9.3 Management review

### 1. Objective evidence:

#### 1.1 Documentation

- Forest Management Plan – Section 4.9 Monitoring, reporting, review and continual improvement
- Management Review Procedure V 5.0 Dec 2017 (Table 1: Summary of Forest Management System Component Review Mechanisms)

- Annual Management Review Agenda (template)
- Board Charter (31.08.16)

#### *1.2 Processes observed/demonstrated*

- Management Review meeting not conducted for FY18. Refer to non-conformity in this report.

#### *1.3 Records verifying processes*

- Management Review (WIKI)
- SEG Agenda
- ESH Board Committee Meeting Agenda and Reports - 10.04.18
- Safety Report March 2018 - ESH
- Safety Report March 2018 GMT and Board

#### *1.4 Interviews with key personnel*

- Safety Manager and Certification Manager regarding management review processes.
2. Methods for determining process results are generally effective, however not all activities have been carried out as planned. A Minor non-conformance is noted with respect to Management Review.
3. The organisation's actual performance is consistent with the requirements of the Standard(s).

## **Improvement: ISO 14001:2015 (10)**

### 10.1 General

### 10.2 Nonconformity and corrective action

### 10.3 Continual improvement

### (4801) 4.5.2 Incident investigation, corrective and preventive action

#### 1. Objective evidence:

##### *1.1 Documentation*

- Forest Products Audit Program
- Guide for using the Vault App
- Root Cause analysis support tool
- Root Cause Summary Template
- Event 1324 – related to truck reporting.
- Event Categories
- Contract Template

##### *1.2 Processes observed/demonstrated*

- Incident investigation
- Processes for entering observations, incidents and injury into Vault App on tablet and uploading to 'Pending Incident'
- Access to Vault 'Events' – for review and analysis of event details
- Interrogation of Vault system for extraction of records e.g. Incident # 1324 – 19.03.18 (investigation underway); and Incident #1308 Collision 19.03.18 (Investigation completed)
- Criteria for reportable incidents in Contractor Agreement template being a fatality offsite medical treatment fuel or chemical spill damage to equipment or environment or a near miss where any of the above may occur.
- The initial findings from the [REDACTED] have been delivered however [REDACTED] have yet to review and respond to the audit findings.

*1.3 Records verifying processes*

- SEG Committee meeting – review of the effectiveness of corrective actions taken.
- Incident investigation - Fire at Warra

*1.4 Interviews with key personnel*

- Certification Manager and Safety Manager regarding incident investigation processes.
2. Methods for determining process results are effective and planned activities have been realised.
  3. The organisation's actual performance is consistent with the requirements of the Standard(s).

<b>Finding Reference</b>	1624738-201804-I6	<b>Certificate Reference</b>	EMS 603479
<b>Certificate Standard</b>	ISO 14001:2015	<b>Clause</b>	10.2
<b>Category</b>	Opportunity for Improvement		
<b>Area/Process:</b>	Improvement		
<b>Details</b>	Cause identification associated with corrective actions is not entered into the Vault.		

## Part 2: AS 4708:2013

### 0.1 Defined Forest Area

#### 1. Objective evidence:

##### *1.1 Documentation*

- Defined Forest Area Statement – April 2018
- Defined Forest Area Procedure Rev 3 April 2016

##### *1.2 Processes observed/demonstrated*

- Review and update of DFA
- Communication of DFA update to Responsible Wood
- Access to DFA information on internal systems and website

##### *1.3 Records verifying processes*

- Request for DFA update – email dated 05.03.18
- Communication of DFA update to Responsible Wood e.g. email dated 16.04.18

##### *1.4 Interviews with key personnel*

- Certification Manager regarding processes for updating the DFA and communication with Responsible Wood

2. Planned activities have been realised and methods for determining process results are effective. The Defined Forest Area is 796,982 Ha (advised to Responsible Wood on 16.04.2018).

3. The organisation's performance is consistent with the requirements of the Standard(s).

### 0.2 Chain of Custody

#### 1. Objective evidence:

#### 1. Objective evidence:

##### *1.1 Documentation*

- STT Chain of Custody Policy - Sept 2015

##### *1.2 Processes observed/demonstrated*

- provision of sales documentation consistent with the requirements of AS4707
- definition of haulage routes
- truck/log loading processes
- load configuration, mass management, load security etc.

##### *1.3 Records verifying processes*

- Weighbridge records (various)
- Refer site visits.

##### *1.4 Interviews with key personnel*

- STT staff and contractors regarding chain of custody and chain of responsibility processes.

2. Planned activities have been realised and methods for determining process results are effective.

3. The organisation's performance is consistent with the requirements of the Standard(s).

## Criterion 1: Systematic management

- 1.1 Policy
- 1.2 Forest Management Plan
- 1.3 Implementation
- 1.4 Monitoring and corrective action
- 1.5 Review
- 1.6 Research

### 1. Objective evidence:

#### *1.1 Documentation*

- Forest Management Plan (Revised 2016)
- Draft Revised Forest Management Plan (2018) awaiting approval
- FPP Preparation Procedure V2,1 16.04.18
- Forest Practices Code - 2015
- Harvest Scheduler - Excel workbook (current)
- FPP Allocation Spreadsheet (current)
- FPA Forest Botany Manual - 2005
- Position Description – Forest Services Management Manager
- Organisation Structure – Forest Management Services
- Yellow Book – GM Land Management and Forest Management Services
- Annual Review (Nov 2017)
- External Research Projects Register
- Weed Control Strategy and SOP for Environmental Weed Control

#### *1.2 Processes observed/demonstrated*

- review and approval of revised FMP to note changes in DFA, organisational structure and revised corporate objectives.
- Development of planning schedule
- Allocation of planning and monitoring of plans due for completion
- Plan preparation process
- Preparation of maps for plans
- Special values assessment – e.g. identification of forest communities
- Stakeholder engagement – preliminary stage
- Notice of Intent (Templates) e.g. FPP Preparation – Harvest (current)
- STT SWMS for Field Recces and Boundary Marking
- Region Specific Checklist – Coupe Planning Summary V 1.2 01.01.17
- Validation of translation of prescriptions from Special Values Evaluation Sheets to FPP
- Peer review of FPP
- Monthly review of Yellow Book and external projects
- Progress against Yellow Book Objectives
- Management of specific research projects



### 1.3 Records verifying processes

- Revised DRAFT FMP
- Schedule – March 2018
- KA006D Conserve Map 03.11.17 showing old growth, EEC, formal and informal reserves, historical sites, known threatened flora and fauna, hazards, roads and tracks, watercourses etc.
- Special values sheets, e.g. Biodiversity Evaluation Sheet KA006D - 18.12.17 which spells out prescriptions to be transferred to FPP.
- FPP (KA006D 16.03.18) showing biodiversity values, soil and water, cultural heritage etc.
- Letter to stakeholders e.g. Burnie City Council and Upper Tatone Reserve - 26.02.18
- Example map with haulage route defined, e.g. Circular Head Council - CF029D - 12.02.18
- Coupe Planning Summary – KA006D signed 27.02.18
- Natural and Cultural Values Evaluation Sheets, e.g. Coupe Level HCV Evaluation 17.12.17
- Peer review checklist – 08.03.18
- FPP – KA006D certified copy (signed off) 16.03.18
- Letters to stakeholders – Intended commencement of proposed harvesting and reforestation operations, e.g. Upper Natone Reserve and Burnie City Council 23.04.18
- Minutes of Land Management Monthly Meetings e.g. Agenda and minutes 09.04.18
- Yellow book Spreadsheet - Google Drive current.
- Plantation Processing Trial – recovery of pruned plantation resource (60% recovery of green veneer); sawing to a particular pattern to maximise recovery.
- Research papers: e.g. *Achievements in forest tree improvement in Australia and New Zealand (9. Genetic improvement of E. nitens in Australia.)* 17.03.08; FPA Flora Technical Note No 12 – *Management of gene flow from plantation eucalypts* 01.02.11.

### 1.4 Interviews with key personnel

- Certification Manager and Project Officer regarding review and approval of revised FMP to note changes in DFA, organisational structure and revised corporate objectives.
- Coordinator Planning (NW) regarding planning processes.
- Forest Services Management Manager regarding the research program and initiatives.

2. Methods for determining process results are effective and planned activities have been realised. The existing FMP is subject to minor review and update to reflect changes to the organisation name, corporate structure and revised objectives.

3. The organisation's actual performance is consistent with the requirements of the Standard(s).

<b>Finding Reference</b>	1624738-201804-I7	<b>Certificate Reference</b>	AFS 603478
<b>Certificate Standard</b>	AFS 4708:2013	<b>Clause</b>	Criterion One: Systematic management
<b>Category</b>	Opportunity for Improvement		
<b>Area/Process:</b>	Criterion One: Systematic management		
<b>Details</b>	Planning processes vary in different parts of the State and while the process is still developing and an opportunity exists to adopt the most efficient method statewide. It is noted that action is being taken in this regard.		



<b>Finding Reference</b>	1624738-201804-I8	<b>Certificate Reference</b>	AFS 603478
<b>Certificate Standard</b>	AFS 4708:2013	<b>Clause</b>	Criterion One: Systematic management
<b>Category</b>	Opportunity for Improvement		
<b>Area/Process:</b>	Criterion One: Systematic management		
<b>Details</b>	The Coupe Planning Summary for KA006D contains several fields requiring a Yes/No response. A number of these fields have not been completed, e.g. Is DIER or Local Government approval required		

<b>Finding Reference</b>	1624738-201804-I9	<b>Certificate Reference</b>	AFS 603478
<b>Certificate Standard</b>	AFS 4708:2013	<b>Clause</b>	Criterion One: Systematic management
<b>Category</b>	Opportunity for Improvement		
<b>Area/Process:</b>	Criterion One: Systematic management		
<b>Details</b>	Haulage route not always identified on preliminary advice to stakeholders e.g. KA0006D 26.02.18. The letter to Council does not expressly state any request for information with respect to school bus routes. Likewise the template doesn't provide any detail with respect to the number of vehicle movements per day, when operations are underway.		

<b>Finding Reference</b>	1624738-201804-I10	<b>Certificate Reference</b>	AFS 603478
<b>Certificate Standard</b>	AFS 4708:2013	<b>Clause</b>	Criterion One: Systematic management
<b>Category</b>	Opportunity for Improvement		
<b>Area/Process:</b>	Criterion One: Systematic management		
<b>Details</b>	The STT SWMS for Field Recces and Boundary Marking was not readily available via the WIKI.		

<b>Finding Reference</b>	1624738-201804-I11	<b>Certificate Reference</b>	AFS 603478
<b>Certificate Standard</b>	AFS 4708:2013	<b>Clause</b>	1.6 Research
<b>Category</b>	Opportunity for Improvement		
<b>Area/Process:</b>	Criterion One: Systematic management		
<b>Details</b>	The overall framework for research activities and initiatives is not formalised and consolidated.		

## Criterion 2: Stakeholder engagement

- 2.1 Identify stakeholders
- 2.2 Stakeholder engagement plan
- 2.3 Stakeholder participation
- 2.4 Stakeholders affected by forest operations
- 2.5 Records
- 2.6 Public disclosures

### 1. Objective evidence:

#### 1.1 Documentation

- Stakeholder Engagement Strategy – May 2018 DRAFT
- STT Website

#### 1.2 Processes observed/demonstrated

- Refer to Part One - Support

#### 1.3 Records verifying processes

- Refer to Part One - Support

#### 1.4 Interviews with key personnel

- Interview with Stakeholder and Engagement Manager and Communications Adviser regarding stakeholder management.
- Interview with Manager Compliance (FPA) regarding the relationship between FPA and STT with respect to compliance with FPP System

2. Planned activities have been realised and methods for determining process results are effective. All required public disclosures are available on the organisation's website. Discussions with FPA confirmed that STT has effective processes for monitoring compliance with FPP System requirements.

3. The organisation's performance is consistent with the requirements of the Standard(s).

## Criterion 3: Biodiversity

- 3.1 - 3.4 Identify, maintain and enhance biodiversity values
- 3.5 - 3.6 Monitor and review biodiversity
- 3.7 Regeneration
- 3.8 Introduced genetics
- 3.9 Native vegetation conversion

### 1. Objective evidence:

#### 1.1 Documentation

- Permanent Forest Estate Policy – August 2015
- Forest Management Plan Section 4.4.2.6 - High conservation value forests
- High Conservation Value Assessment and Management Plan (Revision 2018 in draft)
- Appendix 5: Alignment of FSC defined HCV to AFS defined SBVs
- Coupe Planning Summary – Section 4: Other Forest Values
- Landscape Context Planning System Manual
- Long Term Retention Objective prescriptions developed for planners

- FPA's Biodiversity Landscape Planning Guideline BLPG
- Swift Parrot – Strategic Management Plan

#### *1.2 Processes observed/demonstrated*

- Alignment of HCV with SBV
- Identification of SBV
- Implementation of requirements of Forest Practices System
- Identification and management of any additional requirements, e.g. centres of endemism.
- Swift Parrot Project plan to collect data, develop model and identify areas of habitat.

#### *1.3 Records verifying processes*

- Special values assessment (which identify special biodiversity values at an operational level, e.g. PA160B – FPP # JMB0080-01 24.11.17 Wedge-tailed eagles)

#### *1.4 Interviews with key personnel*

- Certification Manager regarding identification and management of Significant Biodiversity Values
  - Interview with Project Manager Swift Parrot
2. Planned activities have been realised and methods for determining process results are effective.
3. The organisation's performance is consistent with the requirements of the Standard(s).

## **Criterion 4: Productive capacity**

### 4.1 - 4.2 Identify productive capacity and harvest rates

### 4.3 Plan and monitor use

### 4.4 Infrastructure

### 4.5 Silviculture

### 4.6 Establishment

### 4.7 Damage to growing stock

### 4.8 Unplanned fire

### 4.9 Non-wood products

#### 1. Objective evidence:

##### *1.1 Documentation*

- Wood Planning Resource Indicators 2017
- Tactical Planning of Native Forest and Plantation 2018 (Green Book)
- Forest practices Planning Notice of Intent
- Stakeholder Communication Procedure
- Three Year Plan SOP
- Environment Compliance Report Draft 2018/19-2021/10 Three Year Wood Production Plan
- Strategic Fire Management Plan
- Tactical Fire Management Plan
- Fire Action Plan
- Fire Operations Plan
- Inter Agency Fire Management Protocol

*1.2 Processes observed/demonstrated*

- Reporting 3 year plan i.e. the coupe planning database on Sustainable Estate model to deliver 137,00m<sup>3</sup> of High Quality Sawlog
- 3 year plan i.e. the coupe planning database supports delivery of the model
- Red book is the confirmed set of areas for harvesting, agreed product break-up, volumes and locations
- Green Book is the guidelines for the 3 year plan
- Clause 4.3.1 – describes the Stakeholder engagement process in accordance with the Stakeholder Engagement Strategy
- Visual Nature Studio used to consider visual landscape values
- Coupe ranking model used to prioritise coupes using economic, proximity, products and infrastructure criteria
- Coupe database is updated to reflect 3 year plan
- Interact and negotiate with relevant Council in relation to truck movements and roads
- Environmental Compliance report will advise the coupes that require review
- Quality Control conducted on 3 year plan.
- Fire management coordinated response arrangements.
- Fire management technical committees supporting operational, risk mitigation planning and equipment aspects.
- Fire resource capacity planning to incorporate contract firefighter.
- Coordinated Smoke Management
- Prescribed and Regeneration operational arrangements

*1.3 Records verifying processes*

- Sustainable High Quality Sawlog Supply from PTPZL Review No.5 July 2017
- Draft 2017 Report on sustainable estate model with Department of State Growth.
- Targets for Wood Production 2017
- 2017/2018 3YP Council Meeting South
- Minutes from the planning meeting with Huon Council – supply zone discussion and issues

*1.4 Interviews with key personnel*

- Interview with Southern Regional Planning Staff
2. Planned activities have been realised and methods for determining process results are effective.
  3. The organisation's performance is consistent with the requirements of the Standard(s).

**Criterion 5: Forest health****5.1 Identify damage agents****5.2 Maintain health****5.3 Weeds and pests****5.4 Fire and disturbance regimes****5.5 Rehabilitate degraded forest****5.6 Chemical use****5.7 Salvage**

## 1. Objective evidence:

*1.1 Documentation*

- Weed Control Strategy
- SOP for Environmental Weed Control
- Forest Management Plan – Section 4.5 Forest Protection
- Position Description - Senior Forest Research Officer
- Organisational Chart
- Land Management (FMS WIKI): Forest Health and Weed Management
- Forest Health Surveillance – methodology, procedures and processes V.3 Feb 2015
- Insect Pest Monitoring Guidelines – Summer 2017-18
- Technical Report 12/2011: A synthesis of the key issues in the current management of leaf beetles and proposed enhancement to leaf beetle IPM
- Technical Report 08/2014: Monitoring of chronically thin crowns and management responses in mid-rotation E. nitens plantation sin the north-eastern highlands of Tasmania.
- Technical Report 01.2017: Assessment and effectiveness monitoring of Long-Term Retention Reserves – pilot program
- Environmental Weed Control Strategy V.2 August 2016
- Procedure for Quarry Hygiene Inspections V2.1 April 2018
- Forest Health Alert – Ginger Tree Syndrome V1.1 July 2017
- Forest Management Plan – Section 4.4.2.2.3 - Managing pesticide use
- Pesticide Use Policy – July 2014
- Chemical Use and Management (WIKI)
- Pesticide Application Standard Operating Procedure – V.2 Feb 2015
- Contractor Job Specification – Aerial Spraying V.4 August 2017
- DPIPW E Aerial Spraying Code of Practice (Nov 2014)
- Unauthorised and Recommended Chemicals Procedure
- Unauthorised Chemicals List – Feb 2015
- Annual Report 2017 – Chemical use (Page 52)
- Annual Report – Supplementary Table Section 3.3 Pesticide Usage in forestry field operations
- Native Forests Quality Standards Manual 2018.
- Plantation Quality Standards Manual 2018.
- Forestry Operations Database used to monitor implementation and effectiveness of forest operations and re-establishment.
- Technical Bulletin No. 6 2010 Regeneration surveys
- Native Forests and Seed Presentation 2016/17 at state-wide meeting
- Seed Management System Project Plan

*1.2 Processes observed/demonstrated*

- Leaf beetle monitoring
- Forest health monitoring in long-term retention reserves
- Communication of surveillance program and plan - from FOD (Current)
- Quarry hygiene monitoring and inspections
- Participation in development of Biosecurity Manual for the Plantation Timber Industry

- Liaison with other stakeholders regarding forest health issues, e.g. DPIPWE and Myrtle Rust
- Determining contractor job specification
- Verification of contractor competence
- Contractor handover
- Verification of treated area (aerial application flight lines)

### *1.3 Records verifying processes*

- Leaf beetle monitoring records - FOD e.g. Ben Nevis BS101B 13.01.17
- Long-term retention reserve assessment – methodology and field sheet
- Annual meeting with District Staff e.g.
- Forest health surveillance records (FOD) e.g. BS112M 04.04.17
- Quarry health inspection report (FOD) e.g. 16.01.14
- Operational plans e.g.
- Records of pesticide use (FOD), e.g. WW022D 11.01.18
- Records of chemical incident and investigation – VAULT Record # 1223 - 15.12.17
- Flight lines e.g. WW022D - 11.01.18
- Monitoring for browsing damage, forest growth, compliance with Forest Practices Code; Quality Standards program (regeneration surveys)
- Forest Operations Database records for WW041B including burning, sowing and browsing monitoring, regeneration.

### *Native Forests and Seed Presentation 2016/17*

- Seed Management System Project Plan being implemented includes new mobile application and power BI report to effectively manage seed collection, store, inventory / mix and dispersal.

Quality Standards reviewed relating to Thinning, Insect Control, Non-Production Thinning. No reporting undertaken for plantation for FY18 since no pruning, establishment, site preparation or planting.

Seed Provenance supports forest regeneration provenance

### *1.4 Interviews with key personnel*

- Senior Forest Research Officer regarding development and implementation of forest health surveillance program
- Operational Systems Coordinator regarding forest health monitoring systems
- Certification Manager regarding chemical management and pesticide use.

2. Methods for determining process results are effective and planned activities have been realised. A number of initiatives such as: detection of exotic weeds; hygiene surveys for quarries and the incorporation of forest health surveillance records into FOD, are noted as significant improvements.

3. The organisation's actual performance is consistent with the requirements of the Standard(s).

## **Criterion 6: Soil and water**

### **6.1 Identify soil and water values**

### **6.2 - 6.3 Water quality and water quantity**

### **6.4 Soil properties**

### **6.5 Pollution**

1. Objective evidence:

*1.1 Documentation*

- Forest Practices Plans (refer to Site Visits)

*1.2 Processes observed/demonstrated*

- Identification of soil and water values

*1.3 Records verifying processes*

- Refer to Site Visits

*1.4 Interviews with key personnel*

- STT staff and contractors regarding processes for identifying soil types and supervising forest operations to ensure and potential for impacts on soil and water values are minimised during operations.

2. Planned activities have been realised and methods for determining process results are effective. No evidence of unacceptable impacts on soil and/or water quality were encountered. Contractors demonstrated a high level of awareness of requirements and no evidence of poor waste management was encountered.

3. The organisation's performance is consistent with the requirements of the Standard(s).

## **Criterion 7: Carbon**

### 7.1 Carbon cycle

### 7.2 Minimise fossil fuel use

### 7.3 Estimate of carbon storage

1. Objective evidence:

*1.1 Documentation*

- Forest Management Plan Sections 4.4.2.3 - Carbon and 4.4.2.3.1 - Managing fossil fuel emissions
- Annual Report 2017 Section 3.5 Summary of energy usage (Page 10)
- Forest Carbon Policy 16.04.14

*1.2 Processes observed/demonstrated*

- Estimation of carbon stocks using sustained yield modelling and review
- Management of fossil fuel emissions, e.g. vehicle servicing and determination of most efficient haulage routes

*1.3 Records verifying processes*

- Harvest briefing form e.g.
- Sustained yield update (most recent update 2014 in FMP)

*1.4 Interviews with key personnel*

- Certification Manager regarding carbon accounting and mechanisms for minimising fossil fuel usage.

2. Planned activities have been realised and methods for determining process results are effective.

3. The organisation's performance is consistent with the requirements of the Standard(s).

## **Criterion 8: Cultural heritage**

### 8.1 Indigenous peoples' values

### 8.2 Indigenous heritage values

### 8.3 Other heritage values



## 8.4 Legal and traditional use

### 1. Objective evidence:

#### 1.1 Documentation

- Forest Management Plan Section 4.4.2.5 - Cultural heritage
- Aboriginal Heritage Policy - 2017
- FPA Procedures for managing historic cultural heritage when preparing forest practices plans - Oct 2015
- FPA Procedures for managing Aboriginal cultural heritage when preparing forest practices plans – Nov 2017

#### 1.2 Processes observed/demonstrated

- Forest Practices System and Forest Practices Planning Process which includes identification and protection of cultural heritage values.
- Review of the Forest Management Plan process including stakeholder engagement

#### 1.3 Records verifying processes

- Forest Practices Plans (various)

#### 1.4 Interviews with key personnel

- Certification Manager regarding processes for identification and protection of cultural heritage values.

2. Planned activities have been realised and methods for determining process results are effective.

3. The organisation's performance is consistent with the requirements of the Standard(s).

## Criterion 9: Social and economic benefits

### 9.1 Regional development

### 9.2 Optimal use

### 9.3 Illegal activities

### 9.4 Skills development

### 9.5 Health and safety

### 9.6 Workers' rights

### 1. Objective evidence:

#### 1.1 Documentation

- Coupe planning summary
- Procurement Framework – June 2012
- STT Enterprise Agreement
- STT Summary of New Terms and Conditions
- STT Enterprise Agreement Update Nov 2017
- STT Log of Claims
- Enterprise with Fair Work Commission.
- Diversity Policy
- Anti Discrimination and Grievance Policy – EAP service provider / Healthy Life Provider. As part of induction process.

People and culture – resolution internally supervisor.

*1.2 Processes observed/demonstrated*

- Haulage Routes
- Stumpage Contractors in SE consolidated to 3 contractors.
- Enterprise Agreement Negotiations including changes to remuneration structure and penalty rates for firefighting and vehicle usage.
- People and Culture Strategy

*1.3 Records verifying processes*

- Refer Part 1: Support

*1.4 Interviews with key personnel*

- GM Corporate Services and People and Culture Manager regarding Human Resources
2. Planned activities have been realised and methods for determining process results are effective.
  3. The organisation's performance is consistent with the requirements of the Standard(s).

<b>Finding Reference</b>	1624738-201804-I12	<b>Certificate Reference</b>	AFS 603478
<b>Certificate Standard</b>	AFS 4708:2013	<b>Clause</b>	Criterion Nine: Social and economic benefits
<b>Category</b>	Opportunity for Improvement		
<b>Area/Process:</b>	Criterion Nine: Social and economic benefits		
<b>Details</b>	<p>The contractor arrangements do not require the contractor to verify that workers are 'duly compensated.' The Fair Work Act 2009 (Cth) (FW Act) also provides a mechanism where someone other than the employer can also be considered an accessory to any contraventions of workplace laws. As such, they can also be held liable for that contravention and be subject to penalties and compensation. While contracts currently in place require the contractors 'to engage, direct and pay each employee...' they do not necessarily require the ability to have the contractor audited for compliance, and require a warranty or undertaking that the contractor and its sub-contractors are compliant in all aspects.</p>		

## Part 3: AS/NZS 4801:2001

### 4.3 Planning OHS:

4.3.1 Planning identification of hazards, hazard/risk assessment and control of hazards/risks

4.3.2 Legal and other requirements

4.3.3 Objectives and targets

4.3.4 OHS management plans

#### 1. Objective evidence:

##### 1.1 Documentation

- Safety Management Strategy 2017/18
- Risk Matrix

##### 1.2 Processes observed/demonstrated

- Progress against objectives reviewed and actions. Timelines for implementation amended and agreed by the Board and GM.
- Loading and unloading arrangements
- Fatigue Management
- Weighbridge checks
- Contractor review of Safety management System
- Operational handover to contractor

##### 1.3 Records verifying processes

- Objective 1 relating to WHS Advisor framework has been revised. Current action plan will change.
- Objective 5 refinement and implementation of SWMS by Dec 2017 is delayed. Draft is with Field Ops team. Focus is on High Risk Areas.

##### 1.4 Interviews with key personnel

- Revised Risk Matrix agreed with Certification Manager and Manager Contracts and Risk Management.

2. Planned activities have been realised and methods for determining process results are effective.

3. The organisation's performance is consistent with the requirements of the Standard(s).

<b>Finding Reference</b>	1624738-201804-I16	<b>Certificate Reference</b>	OHS 603481
<b>Certificate Standard</b>	AS/NZS 4801:2001	<b>Clause</b>	4.3.1
<b>Category</b>	Opportunity for Improvement		
<b>Area/Process:</b>	4.3 Planning OHS		
<b>Details</b>	The Contractor Safety and Environment Appraisal of [REDACTED] as a principal contractor is not yet complete. This review may identify improvements in how the contract appraisal process is undertaken for new engagements.		

#### 4.4.6 Hazard identification, hazard/risk assessment and control of hazards/risks:

##### 4.4.6.1 General

##### 4.4.6.2 Hazard identification

##### 4.4.6.3 Hazard/risk assessment

##### 4.4.6.4 Control of hazards/risks

##### 4.4.6.5 Evaluation

#### 1. Objective evidence:

##### 1.1 Documentation

- Strategic Risks
- Operational Risk Management Overview and Vault Risk Register Management Procedure
- Operational Contractor management System Overview
- Contract Safety and Environment Appraisal form
- Contractor performance Review – [REDACTED] 29/08/17
- Contractor performance Review Guidelines
- Contractor Compliance Matrix

##### 1.2 Processes observed/demonstrated

- Contractor safety management system appraisal
- Contractor Performance Management
- Operational Risk Management Overview and Vault
- Contractor compliance matrix describes process for deployment of performance management requirements.

##### 1.3 Records verifying processes

- Vault ID29 - Timber Harvesting and Haulage
- 3 yearly review for [REDACTED]

##### 1.4 Interviews with key personnel

- Interview with Asst GM Forest Products in relation to Contractor Management

2. Planned activities have been realised and methods for determining process results are effective.

3. The organisation's performance is consistent with the requirements of the Standard(s).

<b>Finding Reference</b>	1624738-201804-I17	<b>Certificate Reference</b>	OHS 603481
<b>Certificate Standard</b>	AS/NZS 4801:2001	<b>Clause</b>	4.4.6
<b>Category</b>	Opportunity for Improvement		
<b>Area/Process:</b>	4.4.6 Hazard identification, hazard/risk assessment and control of hazards/risks		
<b>Details</b>	Corporate Risk Matrix requires an update of the 'Overview and Vault Risk Register Management Procedure to state that high and above is significant (currently states high only).		

## Part 4: Sites and operations visited

### Sites and operations visited

#### Site #1: Lampton Ave - Derwent Park Office

##### 1. Objective evidence:

###### 1.1 Documentation

- Operational Risk Management Overview and Vault Risk Register Management Procedure
- Depot JSA / SWMS
- Certificate of Final Inspection Section 152 Notice 27.11.17
- Occupancy Permit Section 223
- March 2018 / April 2018 meeting Southern Region S&E Meeting action around emergency management

###### 1.2 Processes observed/demonstrated

- S&E Consultative Committee processes
- Inspections to verify effectiveness of operational controls
- The internal audit report conducted of Southern Region is comprehensive
- JSA/ SWMS identification of hazards / risks related to Depot Management. Operational controls are effective or identified for action as part of recent internal audit for Lampton Ave Derwent Park Office.

###### 1.3 Records verifying processes

- Internal Audit Summary Report Template March 2018.
- Internal Audit Summary Report Template Nov 2016.
- Findings from the Nov 2016 Internal audit are recorded in the Vault and have been completed.
- Regional Toolbox Meeting

###### 1.4 Interviews with key personnel

- Discussions with Regional Manager and Senior WH&S Advisor (South)

#### Site #2: 17 Back River Road New Norfolk Tasmania 7140

##### 1. Objective evidence:

###### 1.1 Documentation

- Emergency Response Diagram

###### 1.2 Processes observed/demonstrated

- Review of office space and work environment for operational staff
- Emergency Response Procedures

###### 1.3 Records verifying processes

- No test of emergency response drill was available
- STT is a tenant in the building occupied by Government Department.
- Emergency response procedures

###### 1.4 Interviews with key personnel

- Discussed Emergency response procedures with Chief Warden building owner

**Site #3: Road Construction WW012C and Wentworth No. 2 Quarry WWQ002***1.1 Documentation*

- Tasmanian Quarries Code of Practice

*1.2 Processes observed/demonstrated*

- Audits of Quarry operations monthly when active
- Regulatory framework for management of quarries
- 6 monthly meeting with EPA to discuss quarry management
- Washdown procedures checked but not at inspection time.
- Stockpile management and location, benching, topsoil retention

*1.3 Records verifying processes*

- Derwent District Forest PP
- FPP Peer review Form
- Quarry Floor Plan
- Safety Signage at front entrance
- WW017B EMP302 Junction Fourteen Mile Road and Wentworth Dam Road
- Monitoring Audit 13 April 2018

*1.4 Interviews with key personnel*

ST Forest Operations staff

**Site #4 Shelterwood Harvesting Operation CZ015D***1.1 Documentation*

- Forest Operation Safety (FOS) Plan
- Hazard Notification Form WW017B Contractor [REDACTED]
- Technical Bulletin No. 5

*1.2 Processes observed/demonstrated*

- Identification of hazards including hazardous trees
- Verified adherence to streamside reserve and boundary marking procedure
- Reviewed harvesting activity against silvicultural prescription being Shelterwood
- training and competence processes
- Contractor safety management systems
- Incidental sighting of eagle nest and establishment of exclusion zone.

*1.3 Records verifying processes*

- Safety Data Sheets for chemicals located on site
- Faller Monthly Audit
- Competency for [REDACTED] expires 1/12/20
- FPP - Variation to Certified FPP
- Harvesting Inductions dated 4/4/18
- Contractor Safety Audit dated 13/4/18
- Toolbox Meetings dated 13/4/18 and 1/5/18
- FOLS Certificate [REDACTED] expires 1 May 2018



*1.4 Interviews with key personnel*

- ST Forest Operations staff

**Site #5      Road Construction      WW012C***1.1 Documentation*

- Specification for road construction described in FPP CJS003

*1.2 Processes observed/demonstrated*

- Construction of 1.8 km of new road to support future harvesting activity
- Drain Spacing as per prescriptions in Code
- Operational Planning checklist completed

*1.3 Records verifying processes*

- Peer Review for FPP for Roding dated 20/12/17
- Hazard Notification Form - Hazardous Trees
- Biodiversity Evaluation Sheet 10/11/17
- Aboriginal sites enquiry
- Landscape Evaluation Sheet
- Fire Management Evaluation

*1.4 Interviews with key personnel*

- ST Forest Operations staff

**Site #6      Regeneration Burn WW041B and Variable Retention Regeneration - WW033C***1.1 Documentation*

- Regeneration / Establishment Forest operation Plan

*1.2 Processes observed/demonstrated*

- Assessment of fuel moisture and weather readings in accordance with burn prescriptions.
- Aerial Sowing planning and seed selection

*1.3 Records verifying processes*

- Operations Plan dated 14.09.16
- CGPO300 Burn Plan Map
- Permit 3061 Wentworth 041D, permission to light, neighbour notification, hazard identification, ground briefing, emergency meeting points.
- Burn Risk Consequence Assessment WW041B
- Browsing Control and Regeneration Survey above 70%
- Forest Operations Plan for Site Preparation

*1.4 Interviews with key personnel*

- ST Forest Operations staff

**Site #7      Harvested coupe with Swift Parrot management      S0034A and  
Smoke Management Regeneration Burn      S0003A***1.1 Documentation*

- Conservation Inventory Map
- Variable Retention Manual

*1.2 Processes observed/demonstrated*

FPP YJW032 for Coupe SO034A identifies exclusion zone

- Harvesting adopting Variable retention methods included aggregated retained forest
- Exclusion zone of 50 metres for Swift Parrot implemented
- Smoke Management over Huon Highway including traffic management
- Day of burn pre-ignition checks
- Lighting Strategy described and then amended based on conditions
- Notification to affected stakeholders of regen burn

*1.3 Records verifying processes*

- DIPIPWE and FPA Correspondence in relation to Swift Parrot Habitat S0034A
- FPA Ecologist Field Visit 4/8/18
- Email dated 28 Sept 2018 regarding Swift Parrot with FPO
- Media Release Swift Parrot 13/11/18
- Biodiversity Evaluation Sheet 27/7/16
- Natural and Cultural Evaluation Sheet
- Regeneration Burn Operational Plan dated 22/2/18 SO003A
- Pre Burn Checklist

*1.4 Interviews with key personnel*

- ST Forest Operations staff

**Site #8      Clearfell operation / roading operation      HA018D**

*1.1 Documentation*

- FPP ERM0036-0
- FPP Photo Guide to Natural and Cultural
- Guidelines for the Protection of Class4 Streams

*1.2 Processes observed/demonstrated*

- Traffic Management and Signage
- Induction and safety briefing
- Segregation and grading of products
- Streamside reserve protection
- Classification of soil erodibility and drainage design

*1.3 Records verifying processes*

- Variation No. 2 for HA018D dated 3/11/18
- Work Group Tool Box
- HA020K / Forest Plan for Roding Works
- Induction 8/2/18 and 01/03/18 for Roding Operators

*1.4 Interviews with key personnel*

- ST Forest Operations staff

**Site #9      Active Clearfall Operation      FN036A***1.1 Documentation*

- FOSP - Forest Operation Safety Plan
- FPP TJW0289-01

*1.2 Processes observed/demonstrated*

- Retention of trees to protect windthrow risk on PP neighbour
- Visitor Induction and safety briefing
- New worker induction and training to competence process
- Competency Records for site staff
- [REDACTED] induction process and safety system as principal contractor
- Log segregation
- Boundary and streamside marking and protection and crossing location

*1.3 Records verifying processes*

- Toolbox talks
- iAuditor corrective actions in Vault EMP 325 relating to seat belt excavator
- mock emergency drill
- Operators Licence T014279 (Advanced) for faller
- Audit Contractor System Feb 2018
- Monthly Inspection
- Harvest Monitoring Form 06/03/18 and 15/02/18
- Harvesting Safety Audit Report 6/03/18
- Inspection Summary 2018 (product segregation)

*1.4 Interviews with key personnel*

- ST Forest Operations staff
2. Planned activities have been realised and methods for determining process results are effective.
  3. The organisation's performance is consistent with the requirements of the Standard(s).

<b>Finding Reference</b>	1624738-201804-I13	<b>Certificate Reference</b>	OHS 603481
<b>Certificate Standard</b>	AS/NZS 4801:2001	<b>Clause</b>	Lampton Ave Derwent Park Office
<b>Category</b>	Opportunity for Improvement		
<b>Area/Process:</b>	Site visits		
<b>Details</b>	Maintenance schedule for 'prescribed essential services' is required under the Building Act 2016. A copy of this schedule has not been provided by the building owner of the Lampton Ave Derwent Park Office		

<b>Finding Reference</b>	1624738-201804-I14	<b>Certificate Reference</b>	OHS 603481
<b>Certificate Standard</b>	AS/NZS 4801:2001	<b>Clause</b>	Lampton Ave

			Derwent Park Office
<b>Category</b>	Opportunity for Improvement		
<b>Area/Process:</b>	Site visits		
<b>Details</b>	<p>Improvement in operational controls are identified in relation to:</p> <ol style="list-style-type: none"> <li>1. Manual handling and storage controls not effective in laboratory</li> <li>2. A review of chemicals stored and used including availability of SDS's is to be undertaken.</li> <li>3. Top step tread not positioned correctly for stairs adjacent to front entrance.</li> <li>3. Lifting Equipment in Carpark does not have 'out of service' tag</li> </ol>		

<b>Finding Reference</b>	1624738-201804-I15	<b>Certificate Reference</b>	OHS 603481
<b>Certificate Standard</b>	AS/NZS 4801:2001	<b>Clause</b>	17 Back River Road New Norfolk
<b>Category</b>	Opportunity for Improvement		
<b>Area/Process:</b>	Site visits		
<b>Details</b>	A review of Emergency Response procedures including documentation, response arrangements, evacuation diagrams including location of assembly points and signage is proposed.		

## Site # 10 Camdale Office and Depot

### 1.1 Documentation

- Camdale Emergency Plan – August 2017

### 1.2 Processes observed/demonstrated

- Emergency preparedness, planning and drills
- Electronic filing system
- coordination of state-wide filing
- Emergency evacuation conducted in Nov 2017 in cooperation with TFS
- Routine safety compliance checks – e.g. Fire extinguishers, electrical test and tag including RCDs, first aid kits, lifting gear, servicing of fire equipment
- Storage of hazardous materials, including security and bunding
- Controls on use of powered hand tools

### 1.3 Records verifying processes

- Fire extinguishers (Nov 17)
- Electrical testing (due Sept 17)
- Lifting gear (due Nov 18)
- Fire service units (due Aug 18)
- Workshop RCD (due Sept 18)

*1.4 Interviews with key personnel*

- WH&S Advisor (North) regarding emergency preparedness and planning, site inspections and routine testing arrangements.
- 2. Planned activities have been realised and methods for determining process results are effective. There was no hazardous material currently in storage. An opportunity for improvement is noted with respect to ensuring unobstructed access to fire extinguishers.
- 3. The organisation's performance is consistent with the requirements of the Standard(s).

**Site # 11 Bald Hills Quarry**

*1.1 Documentation*

- FPP # KSW0012-01 dated 08.04.15
- Application for variation to FPP dated 05.04.18

*1.2 Processes observed/demonstrated*

- Review of FPP
- Variation preparation for Quarry FPP
- Response to FPA with respect to compliance with S.41(1)
- Peer review of variation

*1.3 Records verifying processes*

- Quarry Operational Monitoring Reports dated 23.11.16, 18.01.17 and 02.02.18
- FPA Notice S.41(1) 23.02.18
- email regarding closure of S.41(1)
- Cross-sectional plan

*1.4 Interviews with key personnel*

- Harvesting and Roding Coordinator; Production Manager (North); Senior Forest Officer (Roding); and Forest Officer regarding quarry management and road construction works.
- 2. Planned activities have been realised and methods for determining process results are effective.
- 3. The organisation's performance is consistent with the requirements of the Standard(s).

**Site # 12 Non-active sites (LG004B and LG004C)**

*1.2 Processes observed/demonstrated*

- Condition of roads and tracks
- Assessment of weed/pest problems
- Effectiveness of regeneration

*1.4 Interviews with key personnel*

- Production Manager (North) regarding monitoring on non-active sites and assessment of effectiveness of regeneration.
- 2. Planned activities have been realised and methods for determining process results are effective.
- 3. The organisation's performance is consistent with the requirements of the Standard(s).

**Site # 13 LW012C Post-harvest regeneration assessment (indicator plots)**

*1.1 Documentation*

- FPP # JFF0027-01 28.04.14

*1.2 Processes observed/demonstrated*

- Establishment of indicator plots
- Processes for monitoring effectiveness of regeneration
- browsing monitoring and controls

*1.3 Records verifying processes*

- None sighted – visual assessment only

*1.4 Interviews with key personnel*

- Forest Officer regarding establishment of monitoring plots and browsing transects
2. Planned activities have been realised and methods for determining process results are effective. The effectiveness of processes for monitoring the success of the regeneration efforts was demonstrated.
3. The organisation's performance is consistent with the requirements of the Standard(s).

**Site #14      LW012B      Biodiversity management on active harvest operation***1.1 Documentation*

- FPP # JFF0027-01 28.04.14
- FPP Map

*1.2 Processes observed/demonstrated*

- Site induction
- Site start-up
- Management and monitoring of overloads
- Management of contractor competencies
- Identification and protection of significant biodiversity values on FPP (e.g. Wedge-tailed eagle)

*1.3 Records verifying processes*

- Harvest coupe briefings 14.03.18 and 30.04.18
- Coupe induction checklist
- In-house monthly audits
- Delivery Dockets e.g. DD [REDACTED]

*1.4 Interviews with key personnel*

- Forest Officer and Contractor representative regarding supervision of forest operations; identification and protection of significant biodiversity values and management of overloads.
2. Planned activities have been realised and methods for determining process results are effective.
3. The organisation's performance is consistent with the requirements of the Standard(s).

**Site # 15      Bridge construction – Black Creek Road***1.1 Documentation*

- Bridge Design and Construct Contract # NW 2017/001 – 20.04.17
- VEC Design Drawing - #13417-S03 04.04.17

*1.2 Processes observed/demonstrated*

- Contract management for 'Design and Construct' project
- Local procurement



*1.3 Records verifying processes*

- Contract checklist MU2017/001
- Site Handover – Roothing Works Plan 01.05.17

*1.4 Interviews with key personnel*

- Harvesting & Roothing Coordinator, Sen. For. Officer (Roothing) and Forest Officer regarding planning and supervision of bridge construction project.

2. Planned activities have been realised and methods for determining process results are effective.

3. The organisation's performance is consistent with the requirements of the Standard(s).

**Site # 17      Road Construction Wellers SP 3.1.1 (complete)      KA004B***1.1 Documentation*

- FPP #DRT0435-01 12.01.18
- FPP Map 12.01.18

*1.2 Processes observed/demonstrated*

- Effectiveness of processes for planning and conduct of road construction works

*1.3 Records verifying processes*

- Forest Operations Plan for Roothing Works 09.02.18 updated to include detail for hand-over

*1.4 Interviews with key personnel*

- Harvesting & Roothing Coordinator, Sen. For. Officer (Roothing) and Forest Officer regarding planning and supervision of road construction project.

2. Planned activities have been realised and methods for determining process results are effective.

Challenges with respect to the erosive potential of soils encountered on site were discussed. Controls applied were appropriate to the nature of the problem.

3. The organisation's performance is consistent with the requirements of the Standard(s).

**Site #18      Regeneration following clearfall      EM003B***1.1 Documentation*

- FPP#IAB0062-01 dated 23.09.16
- Contractor Job Specification – Firebreaking, Tracking (and map showing access tracks)
- Regeneration Burn – Forest Operations Plan 04.03.18
- Contractor Job Specification – Aerial Sowing 18.04.18

*1.2 Processes observed/demonstrated*

- Planning and supervision of regeneration burn
- Seeding of regeneration site
- On-site calibration

*1.3 Records verifying processes*

- Burn plan records 07.04.18 including flight lines
- Post Burn Evaluation 07.04.18 (Quality Standards System)
- Native Forest Establishment Monitoring Report 14.03.18

*1.4 Interviews with key personnel*

- Forest Officer and Forest Officer (Fire) regarding planning and supervision of regeneration burn and management of aerial sowing operation.

2. Planned activities have been realised and methods for determining process results are effective.
3. The organisation's performance is consistent with the requirements of the Standard(s).

**Site # 19     Scottsdale Office**

*1.1 Documentation*

- Site Emergency Plan – Feb 2017

*1.2 Processes observed/demonstrated*

- Site safety evacuation processes

*1.3 Records verifying processes*

- Evacuation drill conducted Nov 17

*1.4 Interviews with key personnel*

- Harvesting Coordinator and Planning Coordinator regarding planning and management of site evacuation.

2. Planned activities have been realised and methods for determining process results are effective.
3. The organisation's performance is consistent with the requirements of the Standard(s).

**Site # 20     E. nitens plantation thinning     PA160B**

*1.1 Documentation*

- FPP # JMB0080-01 24.11.17
- Hazard notification form – 05.04.18

*1.2 Processes observed/demonstrated*

- Site induction and site hand-over
- Identification of wedge-tailed eagle, wildlife habitat clump and streamside reserves
- condition of operational machinery
- use of thinning assessment tool (TFS)
- assessment of damage to growing stock, missed stems, stand stocking and stump height
- verification of quality of remaining stems
- Chain of custody and chain of responsibility requirements

*1.3 Records verifying processes*

- Site induction and site hand-over 24.11.17

*1.4 Interviews with key personnel*

- Harvesting Coordinator and Forest Operations Supervisor regarding planning and supervision of thinning operations.

- Contractor [REDACTED] regarding chain of custody and chain of responsibility requirements.

2. Planned activities have been realised and methods for determining process results are effective. Contractor demonstrated a high level of awareness of chain of custody and chain of responsibility requirements particularly with respect to fatigue management; mass management; load restraint and configuration; loader competence; vehicle maintenance; vehicle speed and monitoring of overloads.
3. The organisation's performance is consistent with the requirements of the Standard(s).

**Site # 21 Mount Horror Fire Tower***1.1 Documentation*

- Fire tower CAR project plan December 2017
- Fire Tower Operations – SWMS 20.04.18
- Fire Tower Emergency Plan – 30.04.18

*1.2 Processes observed/demonstrated*

- Management of risks with respect to fire tower operations
- Improvements to facilities

*1.3 Records verifying processes*

- Fire tower CAR project plan December 2017 - 28 March update.xlsx
- Fire Tower Monthly Monitoring Sheet
- Fire tower emergency plan - Brady Fire Tower – March 2018

*1.4 Interviews with key personnel*

- WH&S Advisor (North) and [REDACTED] regarding improvements to fire towers (both facilities and procedures in response to the finding from the previous report. Improvements noted include: new catch on trap-door; painted floor and ceiling; repairs to window; new blinds; clearing back trees and scrub that was encroaching on the tower footprint and obstructing a clear view; new table and chair; cold-galvanising rust prevention on bolts; new rollers on side door.

2. Planned activities have been realised and methods for determining process results are effective.

3. The organisation's performance is consistent with the requirements of the Standard(s).

**Site # 22 Perth Office and Nursery***1.1 Documentation*

- Perth Office Emergency Evacuation Plan – Dec 2015

*1.2 Processes observed/demonstrated*

- Office emergency preparedness and evacuation processes
- Management of the seed orchard, nursery and seed store
- Seedling production for landcare
- Seed extraction and germination testing
- Conversion from naphthalene to CO2
- Calibration of scales – 05.03.18

*1.3 Records verifying processes*

- Emergency evacuation drill – 09.02.18
- Seed collection labels e.g. SF014A dated 19.04.18
- Test records e.g. #8014 15.03.18 and 12.04.18

*1.4 Interviews with key personnel*

- Regional Manager, Nursery Manager and Assistant Manager – Nursery-Seed Centre regarding processes for seed collection and storage.

2. Planned activities have been realised and methods for determining process results are effective. The nursery has been leased to Driscolls. It is unclear whether the lessee has any obligations with respect to the STT environmental management plan.

3. The organisation's performance is consistent with the requirements of the Standard(s).

## Use of Logos:

Refer opportunity for improvement below

<b>Finding Reference</b>	1624738-201804-I18	<b>Certificate Reference</b>	EMS 603479
<b>Certificate Standard</b>	ISO 14001:2015	<b>Clause</b>	Misuse of Logo
<b>Category</b>	Opportunity for Improvement		
<b>Area/Process:</b>	Use of Logos		
<b>Details</b>	Several out-dated organisational policies continue bear the old NCSI Logo.		

## Minor (2) nonconformities arising from this assessment.

<b>Finding Reference</b>	1624738-201804-N1	<b>Certificate Reference</b>	OHS 603481
<b>Certificate Standard</b>	AS/NZS 4801:2001	<b>Clause</b>	4.4.1.1
<b>Category</b>	Minor		
<b>Area/Process:</b>	Support		
<b>Statement of non conformance:</b>	STT has not provided sufficient resources to implement, maintain, and improve their WHS Management System. Actions to achieve Objective 1 i.e. implementation of the WHS Advisor Framework have not been completed.		
<b>Clause requirements</b>	4.4.1.1 Management shall identify and provide the resources required to implement, maintain, and improve their OHSMS. Resources include human resources and specialized skills, technology and financial resources.		
<b>Objective evidence</b>	At the time of the audit the Safety Management Strategy 2017/18 had not been implemented as planned. It is noted that STT is aware of the issue and steps were being taken to address the matter.		
<b>Cause</b>	STT has recently gone through a significant restructure. The allocation of responsibilities and resourcing in the safety area has not been finalised.		
<b>Correction / containment</b>	See below		
<b>Corrective action</b>	<p>STT Action Plan – May 2018</p> <ol style="list-style-type: none"> <li>1. Establish a Project Team to oversee the implementation of the Strategy. (complete)</li> <li>2. Develop and approve a plan for the safety advisor model. (complete)</li> <li>3. Conduct weekly project management meetings have been in place since early May to drive the actions that are required under the plan. (commenced and on-going).</li> <li>4. Review implementation and escalate issues where necessary. Process to be overseen by Senior Safety Advisor.</li> </ol>		

	BSI – May 2018: Action Plan accepted
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<b>Finding Reference</b>	1624738-201804-N2	<b>Certificate Reference</b>	EMS 603479
<b>Certificate Standard</b>	ISO 14001:2015	<b>Clause</b>	9.3
<b>Category</b>	Minor		
<b>Area/Process:</b>	Performance evaluation - 9.3 Management review		
<b>Statement of non conformance:</b>	The 2017 Annual Management Review was not conducted as planned. The Standards require management review at planned intervals and the Management Review procedure aims for an Annual assessment usually in May. The annual review is supported by an extensive framework of supporting events that are continually reviewing the organisation's performance. These have been carried out as planned.		
<b>Clause requirements</b>	<p>Management review</p> <p>Top management shall review the organization's environmental management system, at planned intervals, to ensure its continuing suitability, adequacy and effectiveness.</p> <p>The management review shall include consideration of:</p> <ul style="list-style-type: none"> <li>a) the status of actions from previous management reviews;</li> <li>b) changes in: <ul style="list-style-type: none"> <li>1) external and internal issues that are relevant to the environmental management system;</li> <li>2) the needs and expectations of interested parties, including compliance obligations;</li> <li>3) its significant environmental aspects;</li> <li>4) risks and opportunities;</li> </ul> </li> <li>c) the extent to which environmental objectives have been achieved;</li> <li>d) information on the organization's environmental performance, including trends in: <ul style="list-style-type: none"> <li>1) nonconformities and corrective actions;</li> <li>2) monitoring and measurement results;</li> <li>3) fulfilment of its compliance obligations;</li> <li>4) audit results;</li> </ul> </li> <li>e) adequacy of resources;</li> <li>f) relevant communication(s) from interested parties, including complaints;</li> <li>g) opportunities for continual improvement.</li> </ul> <p>The outputs of the management review shall include:</p> <ul style="list-style-type: none"> <li>— conclusions on the continuing suitability, adequacy and effectiveness of the environmental management system;</li> <li>— decisions related to continual improvement opportunities;</li> <li>— decisions related to any need for changes to the environmental</li> </ul>		



	<p>management system, including resources;</p> <ul style="list-style-type: none"> <li>— actions, if needed, when environmental objectives have not been achieved;</li> <li>— opportunities to improve integration of the environmental management system with other business processes, if needed;</li> <li>— any implications for the strategic direction of the organization.</li> </ul> <p>The organization shall retain documented information as evidence of the results of management reviews.</p>
<b>Objective evidence</b>	<p>Management review is a combination of complementary processes being undertaken progressively throughout the year. While records of recent reviews can demonstrate that the organisation has effectively addressed the requirements of the Standard, the review scheduled for late 2017 was not conducted as planned. It has been delayed to mid-2018. This is not consistent with the organisation's stated procedures.</p>
<b>Cause</b>	<p>As a result of the recent and significant organisational restructure, including relocation of the Head Office, the Annual Management Review (which periodically consolidates the annual review program) was delayed. Processes have been reviewed in the interim, however the Annual Event did not occur as planned due in part to the availability of key staff.</p>
<b>Correction / containment</b>	<p>Not applicable</p>
<b>Corrective action</b>	<p>STT Action Plan: May 2018</p> <ol style="list-style-type: none"> <li>1. Revise Management Review procedure to more accurately reflect current arrangements, business planning processes and availability of key staff.</li> <li>2. Conduct the next scheduled Management review - now scheduled for late July 2018 when the majority of senior managers will be able to attend.</li> </ol> <p>The Certification Manager is responsible for overseeing this process. Due for completion by August 2018.</p> <p>BSI – May 2018: Action Plan accepted</p>



## Next visit objectives, scope and criteria

### Objective:

The objective of the next scheduled assessment is to verify that the management system demonstrates continuing compliance with the requirements of the nominated Standards.

### Scope:

The scope of the next scheduled assessment is the documented management system with relation to the requirements of the nominated Standards and the defined assessment plan provided in terms of locations and areas of the system and organisation to be assessed.

### Criteria

AS4708:2013

BS EN ISO 14001:2015

AS 4801:2001

Sustainable Timbers Tasmania management system documentation

Please note that BSI reserves the right to apply a charge equivalent to the full daily rate for cancellation of the visit by the organisation within 30 days of an agreed visit date.

## Next Visit Plan

The next scheduled routine surveillance assessment will be in February 2019. The actual dates and assessment plan will be determined in consultation with the client, two months prior to the visit.

The Three-Year Plan is currently being reviewed to provide greater clarity with respect to specific system components to be assessed at each audit.

## Appendix: Your certification structure & on-going assessment programme

### Scope of Certification

#### OHS 603481 (AS/NZS 4801:2001)

Activities associated with the sustainable management of Tasmania's Permanent Timber Production Zone land, as described in the organisation's Forest Management Plan, including the administration, planning and management of forests; and the harvest, transport and sale of forest products.

#### EMS 603479 (ISO 14001:2015)

Activities associated with the sustainable management of Tasmania's Permanent Timber Production Zone land, as described in the organisation's Forest Management Plan, including the administration, planning and management of forests; and the harvest, transport and sale of forest products.

#### AFS 603478 (AFS 4708:2013)

Activities associated with the sustainable management of Tasmania's Permanent Timber Production Zone land, as described in the organisation's Forest Management Plan, including the administration, planning and management of forests; and the harvest, transport and sale of forest products.

### Assessed location(s)

The audit has been performed at Central Office, Permanent Locations, Temporary sites.

**/ AFS 603478 (AS 4708:2013) / EMS 603479 (ISO 14001:2015) / OHS 603481 (AS/NZS 4801:2001)**

<b>Location reference</b>	0047483115-001
<b>Address</b>	Sustainable Timber Tasmania Level 1, 99 Bathurst Street Hobart Tasmania 7000 Australia
<b>Visit type</b>	Re-certification Audit (RA Opt 2)
<b>Assessment reference</b>	8739907
<b>Assessment dates</b>	24/04/2018
<b>Deviation from Audit Plan</b>	No
<b>Total number of Employees</b>	350
<b>Effective number of Employees</b>	350
<b>Scope of activities at the site</b>	Main Certificate Scope applies.
<b>Assessment duration</b>	11 day(s)

**/ EMS 603479 (ISO 14001:2015) / AFS 603478 (AFS 4708:2013) / OHS 603481 (AS/NZS 4801:2001)**

<b>Location reference</b>	0047483115-006
<b>Address</b>	Sustainable Timber Tasmania

	Camdale Office and Depot 2-4 East Cam Road Camdale Tasmania 7320 Australia
<b>Visit type</b>	Re-certification Audit (RA Opt 2)
<b>Assessment reference</b>	8941884
<b>Assessment dates</b>	30/04/2018
<b>Deviation from Audit Plan</b>	No
<b>Total number of Employees</b>	350
<b>Effective number of Employees</b>	350
<b>Scope of activities at the site</b>	Main Certificate Scope applies.
<b>Assessment duration</b>	1.5 day(s)

**/ OHS 603481 (AS/NZS 4801:2001) / EMS 603479 (ISO 14001:2015) / AFS 603478 (AFS 4708:2013)**

<b>Location reference</b>	0047483115-003
<b>Address</b>	Sustainable Timber Tasmania Scottsdale Office and Depot 24 King Street Scottsdale Tasmania 7260 Australia
<b>Visit type</b>	Re-certification Audit (RA Opt 2)
<b>Assessment reference</b>	8941885
<b>Assessment dates</b>	02/05/2018
<b>Deviation from Audit Plan</b>	No
<b>Total number of Employees</b>	350
<b>Effective number of Employees</b>	350
<b>Scope of activities at the site</b>	Main Certificate Scope applies.
<b>Assessment duration</b>	0.5 day(s)

**/ EMS 603479 (ISO 14001:2015) / OHS 603481 (AS/NZS 4801:2001) / AFS 603478 (AFS 4708:2013)**

<b>Location reference</b>	0047483115-009
<b>Address</b>	Sustainable Timber Tasmania Perth Office, Depot and Nursery 15960 Midland Highway Perth Tasmania

	7300 Australia
<b>Visit type</b>	Re-certification Audit (RA Opt 2)
<b>Assessment reference</b>	8941886
<b>Assessment dates</b>	02/05/2018
<b>Deviation from Audit Plan</b>	No
<b>Total number of Employees</b>	350
<b>Effective number of Employees</b>	350
<b>Scope of activities at the site</b>	Main Certificate Scope applies.
<b>Assessment duration</b>	0.5 day(s)

**/ AFS 603478 (AFS 4708:2013) / OHS 603481 (AS/NZS 4801:2001) / EMS 603479 (ISO 14001:2015)**

<b>Location reference</b>	0047483115-004
<b>Address</b>	Sustainable Timber Tasmania Southern Region Office and Depot Building 2, 26 Lampton Avenue Derwent Park Tasmania 7009 Australia
<b>Visit type</b>	Re-certification Audit (RA Opt 2)
<b>Assessment reference</b>	8941887
<b>Assessment dates</b>	30/04/2018
<b>Deviation from Audit Plan</b>	No
<b>Total number of Employees</b>	350
<b>Effective number of Employees</b>	350
<b>Scope of activities at the site</b>	Main Certificate Scope applies.
<b>Assessment duration</b>	0.5 day(s)

**/ OHS 603481 (AS/NZS 4801:2001) / EMS 603479 (ISO 14001:2015) / AFS 603478 (AFS 4708:2013)**

<b>Location reference</b>	0047483115-011
<b>Address</b>	Sustainable Timber Tasmania New Norfolk Office and Depot 17 Back River Road New Norfolk Tasmania 7140 Australia
<b>Visit type</b>	Re-certification Audit (RA Opt 2)
<b>Assessment reference</b>	8941888

<b>Assessment dates</b>	30/04/2018
<b>Deviation from Audit Plan</b>	No
<b>Total number of Employees</b>	350
<b>Effective number of Employees</b>	350
<b>Scope of activities at the site</b>	Main Certificate Scope applies.
<b>Assessment duration</b>	0.5 day(s)

**/ AFS 603478 (AFS 4708:2013) / OHS 603481 (AS/NZS 4801:2001) / EMS 603479 (ISO 14001:2015)**

<b>Location reference</b>	0047483115-002
<b>Address</b>	Sustainable Timber Tasmania Geeveston Office, Depot and Island Specialty Timber Cemetery Road Geeveston Tasmania 7116 Australia
<b>Visit type</b>	Re-certification Audit (RA Opt 2)
<b>Assessment reference</b>	8941889
<b>Assessment dates</b>	01/05/2018
<b>Deviation from Audit Plan</b>	No
<b>Total number of Employees</b>	350
<b>Effective number of Employees</b>	350
<b>Scope of activities at the site</b>	Main Certificate Scope applies.
<b>Assessment duration</b>	2 day(s)

## Certification assessment program

**Certificate Number - Contract 200615382**

**Location reference - 0047483115-001**

		Audit1	Audit2	Audit3	Audit4	Audit5
Business area/Location	Date (mm/yy):	05/18	02/19	11/19	08/20	04/21
	Duration (days):	16.5	10	10	10	18
4 Context of the organization		X	X	X	X	X
5 Leadership		X	X	X	X	X
6 Planning		X	X	X	X	X
7 Support		X	X	X	X	X
8 Operation		X	X	X	X	X
9 Performance evaluation		X	X	X	X	X
10 Improvement		X	X	X	X	X
Use of Logos		X	X	X	X	X
0.1 Defined Forest Area		X	X	X	X	X
0.2 Chain of Custody		X	X	X	X	X
Criterion One: Forest Management Plan		X	X	X	X	X
Criterion 2: Stakeholder engagement		X	X	X	X	X
Criterion 3: Biodiversity		X	X	X	X	X
Criterion 4: Productive capacity		X	X	X	X	X
Criterion 5: Forest health		X	X	X	X	X
Criterion 6: Soil and water		X	X	X	X	X
Criterion 7: Carbon		X				X
Criterion 8: Cultural values		X	X	X	X	X
Criterion 9: Social and economic benefits		X	X	X	X	X
Safety management systems		X	X	X	X	X
Chain of Custody (BCET)		X		X		X
Operations - Huon			X		X	X
Operations - Derwent			X		X	X
Operations - North East		X		X		X
Operations - North West		X		X		X
Perth Nursery		X		X		X



## Mandatory requirements – re-certification.

*Review of assessment finding regarding conformity, effectiveness and relevance of the management system:*

Sustainable Timber Tasmania has maintained and continually improved its management system over the past three years. The relatively small number of issues identified through audits during this time is testament to the strength and effectiveness of the management system. During this time, the organisation has undergone a significant restructure with a significant reduction in staff numbers and re-alignment of the organisational structure and responsibilities, in addition to relocation of its head office in Hobart. The management system has demonstrated its robustness throughout these changes, in particular in support of management of change within the organisation.

*Management system strategy and objectives:*

The management system is effectively supporting the organisation in the achievement of its Strategic Objectives. The systematic approach to management of the organisation effectively supports the functioning of the business. Key processes such as risk identification and assessment; development of strategic and operational objectives to more effectively manage identified risks; effectiveness of monitoring and reporting processes; effectiveness of measures to identify and manage non-conformances when they occur; internal audit processes and management review are effectively supported by the management system.

The management system will continue to support the achievement of corporate objectives during the next three years.

*Review of progress in relation to the organisation's objectives:*

As above.

*Review of assessment progress and the re-certification plan:*

The three-year assessment program is based on the minimum requirements for each of the nominated Standards and associated schemes. Reductions in audit duration have been applied, consistent with the scheme rules, acknowledging the fact that there is considerable duplication of key system processes with each of the Standards.

The 3-Year Plan includes provision for all the business activities at the nominated locations.

*BSI Client Management Impartiality and Surveillance Strategy:*

The Client Manager has all the relevant codes. The audit team always includes a member with safety-specific codes as well. Auditor impartiality is maintained by the inclusion of additional team members.

Continue with the current Total assessment days / Cycle.

## Expected outcomes for accredited certification.

### What accredited certification to ISO 14001 means

The purpose of ISO 14001:2015 is to provide organizations with a framework to protect the environment and respond to changing environmental conditions in balance with socio-economic needs. ISO 14001:2015 helps an organization achieve the intended outcomes of its environmental management system, which provide value for the environment, the organization itself and interested parties. Consistent with the organization's environmental policy, the intended outcomes of an environmental management system include:

- enhancement of environmental performance;
- fulfilment of compliance obligations;
- achievement of environmental objectives

**What accredited certification to ISO 14001 does not mean**

- 1) ISO 14001 defines the requirements for an organization's environmental management system, but does not define specific environmental performance criteria.
- 2) Accredited certification to ISO 14001 provides confidence in the organization's ability to meet its own environmental policy, including the commitment to comply with applicable legislation, to prevent pollution, and to continually improve its performance. It does not ensure that the organization is currently achieving optimal environmental performance.
- 3) The ISO 14001 accredited certification process does not include a full regulatory compliance audit and cannot ensure that violations of legal requirements will never occur, though full legal compliance should always be the organization's goal.
- 4) Accredited certification to ISO 14001 does not necessarily indicate that the organization will be able to prevent environmental accidents from occurring.

**Definitions of findings:****Non-conformity:**

Non-fulfilment of a requirement.

**Major nonconformity:**

Nonconformity that affects the capability of the management system to achieve the intended results.

Nonconformities could be classified as major in the following circumstances:

- If there is a significant doubt that effective process control is in place, or that products or services will meet specified requirements;
- A number of minor nonconformities associated with the same requirement or issue could demonstrate a systemic failure and thus constitute a major nonconformity.

**Minor nonconformity:**

Nonconformity that does not affect the capability of the management system to achieve the intended results.

**Opportunity for improvement:**

It is a statement of fact made by an assessor during an assessment, and substantiated by objective evidence, referring to a weakness or potential deficiency in a management system which if not improved may lead to nonconformity in the future. We may provide generic information about industrial best practices but no specific solution shall be provided as a part of an opportunity for improvement.

## How to contact BSI

Should you wish to speak with BSI in relation to your registration, please contact your customer service officer.

BSI Group ANZ Pty Ltd

Suite 2, Level 7

15 Talavera Road

Macquarie Park

NSW 2113

Tel: 1300 730 134 (International: +61 (2) 8877 7100)

Fax: 1300 730 135 (International: +61 (2) 8877 7120)

E-mail (for corrective action plans): Please e-mail your corrective action plan to [clientservices.au@bsigroup.com](mailto:clientservices.au@bsigroup.com)

## Notes

*This report and related documents are prepared for and only for BSI's client and for no other purpose. As such, BSI does not accept or assume any responsibility (legal or otherwise) or accept any liability for or in connection with any other purpose for which the Report may be used, or to any other person to whom the Report is shown or in to whose hands it may come, and no other persons shall be entitled to rely on the Report. If you wish to distribute copies of this report external to your organisation, then all pages must be included.*

*BSI, its staff and agents shall keep confidential all information relating to your organisation and shall not disclose any such information to any third party, except that in the public domain or required by law or relevant accreditation bodies. BSI staff, agents and accreditation bodies have signed individual confidentiality undertakings and will only receive confidential information on a 'need to know' basis.*

*This audit was conducted on-site through document reviews, interviews and observation of activities. The audit method used was based on sampling the organization's activities and it was aimed to evaluate the fulfilment of the audited requirements of the relevant management system standard or other normative document and confirm the conformity and effectiveness of the management system and its continued relevance and applicability for the scope of certification.*

*As this audit was based on a sample of the organization's activities, the findings reported do not imply to include all issues within the system.*

## Regulatory compliance

*BSI requires to be informed of all relevant regulatory non-compliance or incidents that require notification to any regulatory authority. Acceptance of this report by the client signifies that all such issues have been disclosed as part of the assessment process and agreement that any such non-compliance or incidents occurring after this visit will be notified to BSI as soon as practical after the event.*