

Audit Report

S2 Surveillance Audit for

Canadian Kraft Paper Industries Limited
Client Representative: Andrew Forward

014205-12

Audited Address: Highway 10 North, The Pas, MB, CAN, R9A 1L4

Start Date: Nov 23, 2020 End Date: Nov 24, 2020

Type of audit: Single management system

Issue Date: Nov 19, 2020
Revision Level: 03

BACKGROUND INFORMATION

SAI Global conducted an audit of Canadian Kraft Paper Industries Limited beginning on Nov 23, 2020 and ending on Nov 24, 2020 to ISO 14001:2015.

The purpose of this audit report is to summarise the degree of compliance with relevant criteria, as defined on the cover page of this report, based on the evidence obtained during the audit of your organization. This audit report considers your organization's policies, objectives, and continual improvement processes. Comments may include how suitable the objectives selected by your organization appear to be in regard to maintaining customer satisfaction levels and providing other benefits with respect to policy and other external and internal needs. We may also comment regarding the measurable progress you have made in reaching these targets for improvement.

SAI Global audits are carried out within the requirements of SAI Global procedures that also reflect the requirements and guidance provided in the international standards relating to audit practice such as ISO/IEC 17021-1, ISO 19011 and other normative criteria. SAI Global Auditors are assigned to audits according to industry, standard or technical competencies appropriate to the organization being audited. Details of such experience and competency are maintained in our records.

In addition to the information contained in this audit report, SAI Global maintains files for each client. These files contain details of organization size and personnel as well as evidence collected during preliminary and subsequent audit activities (Documentation Review and Scope) relevant to the application for initial and continuing certification of your organization.

Please take care to advise us of any change that may affect the application/certification or may assist us to keep your contact information up to date, as required by SAI Global Terms and Conditions.

This report has been prepared by SAI Global Limited (SAI Global) in respect of a Client's application for assessment by SAI Global. The purpose of the report is to comment upon evidence of the Client's compliance with the standards or other criteria specified. The content of this report applies only to matters, which were evident to SAI Global at the time of the audit, based on sampling of evidence provided and within the audit scope. SAI Global does not warrant or otherwise comment upon the suitability of the contents of the report or the certificate for any particular purpose or use. SAI Global accepts no liability whatsoever for consequences to, or actions taken by, third parties as a result of or in reliance upon information contained in this report or certificate.

Please note that this report is subject to independent review and approval. Should changes to the outcomes of this report be necessary as a result of the review, a revised report will be issued and will supersede this report.

Standard:	ISO 14001:2015
Applicable codes:	0811 0851 2611 / A02.0 A02.0 DE21.1
Scope of Certification:	The registration covers the environmental management system for forest management activities controlled by the woodlands department.
Total audit duration:	Person(s): 2 Day(s): 3.50
Audit Team Member(s):	Team Member Rod Seabrook

Audit Report

Definitions and action required with respect to audit findings

Area of Concern: Area of the system likely to become 'Non-conformance' at Stage 2 Audit.

Action required: Client is required to investigate potential or actual nonconformity and complete corrective action or preventive action within own management system. This will be followed up by SAI Global at Stage 2 audit.

Opportunity for Improvement:

A documented statement, which may identify areas for improvement however shall not make specific recommendation(s).

Action required: Client may develop and implement solutions in order to add value to operations and management systems. SAI Global is not required to follow-up on this category of audit finding.

Non-conformance:

Major Non-conformance:

Based on objective evidence, the absence of, or a significant failure to implement and/or maintain conformance to requirements of the applicable standard. Such issues may raise significant doubt as to the capability of the management system to achieve its intended outputs (i.e. the absence of or failure to implement a complete Management System clause of the standard); or

A situation which would on the basis of available objective evidence, raise significant doubt as to the capability of the Management System to achieve the stated policy and objectives of the customer.

NOTE: The "applicable Standard" is the Standard which SAI Global are issuing certification against, and may be a Product Standard, a management system Standard, a food safety Standard or another set of documented criteria.

Action required: This category of findings requires SAI Global to issue a formal NCR; to receive and approve client's proposed correction and corrective action plans; and formally verify the effective implementation of planned activities. Correction and corrective action plan should be submitted to SAI Global prior to commencement of follow-up activities as required. Follow-up action by SAI Global must 'close out' the NCR or reduce it to a lesser category within 90 days for initial certification and 60 days for surveillance or recertification audits.

If significant risk issues (e.g. safety, environmental, food safety, product legality/quality, etc.) are detected during an audit these shall be reported immediately to the Client and more immediate or instant correction shall be requested. If this is not agreed and cannot be resolved to the satisfaction of SAI Global, immediate suspension shall be recommended.

In the case of initial certification, failure to close out NCR within the time limits means that the Certification Audit Stage 2 may be repeated.

In the case of an already certified client, failure to close out NCR within the time limits means that suspension proceedings may be instituted by SAI Global.

Minor Non-conformance:

Represents either a management system weakness or minor issue that could lead to a major nonconformance if not addressed. Each minor NC should be considered for potential improvement and to further investigate any system weaknesses for possible inclusion in the corrective action program

Action required: This category of findings requires SAI Global to issue a formal NCR; to receive and approve client's root cause analysis, proposed correction and corrective action taken or planned to be taken; and formally verify the effective implementation of planned activities at the next scheduled audit. Follow-up activities incur additional charges.

Surveillance Executive Overview

The objective of this audit was to determine continuing compliance of your organization's management system with the audit criteria; and its effectiveness in achieving continual improvement and system objectives.

Changes to the audit plan and the reasons for the change

- None

Significant issues impacting on the Audit Programme

- COVID-19 pandemic restrictions did not allow for an on-site audit

Site(s) description: activities/processes at each site

- Highway 10 North, The Pas MB
- The objectives of the audit were achieved

The Information and Communications Technology(s) (ICT):

- were effective and used as planned
- contingency plans were used and effective

The final breakdown was as follows:

- total onsite audit days: 0
- total ICT remote audit days: 3.5

Overall Recommendation

With the exception of the minor non-conformance, the company is managing its interactions with the environment and is demonstrating its commitment to enhancement of environmental performance and the protection of the environment, fulfilment of its compliance obligations and continual enhancing its environmental management system.

Audit recommendations are always subject to ratification by SAI Global certification authority.

For the following standard: ISO 14001:2015

Based on the evidence verified and findings of this audit, the management system is in need of immediate attention and rectification. Non-conformance has been identified suggesting a lack of effective system implementation in accordance with minimum requirements of the standard. Refer to Non Conformance report No. 2020-01

Actions taken on Non-conformance Reports

Actions to address the minor non-conformance 2019-01 were reviewed and found to be implemented and effective.

Other Issues

None

Audit Findings

Non-Conformances (NCRs):

All of the applicable requirements of the ISO 14001:2015 were audited and considered to be adequately implemented with the exception of the non-conformances identified below.

NCR No.	Level	Clause	Description	Final CAR Due Date:
2020-01	Minor	6.2.1	No evidence that there are any environmental objectives established at the time of the audit (2020).	Jan 23, 2021

Opportunities for Improvement:

The following opportunities for improvement have been identified.

- Consider clarifying the process in Document 86PROC-0100 regarding requirements for developing corrective action plans for non-conformances raised during internal audits
- Consider conducting a review of other compliance obligations (e.g. codes of practice, agreements) to ensure that all have been captured and evaluated
- Consider aligning wording fuel management in the following documents: FMOPS Page 34 Petroleum Products Storage/Location/Spills and 2020 Spill Response and Clean-up Plan indicates “Any size spill within 150 metres of a water body must be reported within 5 hours of discovery to CKP”, whereas EPP-010 indicates “Any spills within 100 metres of a water body must be reported immediately (within 5 hours)”
- Consider documenting procedures for installation and sizing of culverts.
- Consider documenting requirements for placards for fuel tanks as per TDG regulations
- Consider adding completion of final cutblock inspections to the “dashboard” as an action item.

It is suggested that the opportunities for improvement be considered by management to further enhance the company’s Management System and performance of the business.

Audit Trail Summary - Management System

Review of any changes including documentation

There has been no significant change to the organization scope and structure since last audit.

The management system manual revision was reviewed and found to be in conformance with the requirements of the standard.

Use of marks and/or any other reference to certification

There was no evidence of use of the StandardsMark logo or claims of certification. The organization may wish to consider promoting their certification achievement through using the relevant certification StandardsMark, as per the guidelines available via the SAI Global website.

Actions taken on previous audit issues

No previous audit issues

Management Responsibilities, Commitment and Performance Monitoring

There continues to be a satisfactory level of input and support from top management to ensure the management system provides the intended controls, customer satisfaction and improvement opportunities. The health and performance of the system continues to be monitored via KPI's and related targets. The stated objectives are being met.

Management Review

Meeting verified dated: Oct 30, 2020

Records of the most recent management review meetings were verified and found to meet the requirements of the standard. All inputs were reflected in the records, and appear suitably managed as reflected by resulting actions and decisions.

Internal Audits

Internal audits are being conducted at planned intervals to ensure conformance to planned arrangements, the requirements of the standard and the established management system.

Examples verified included: Mar 3-5, 2020

Corrective and Preventive Action & Continual Improvement Processes

The company is implementing an effective process for the continual improvement of the management system through the use of the policy, objectives, audit results, data analysis, the appropriate management of corrective and preventive actions and management review.

Audit Trail Summary - EMS/RC/e-S/RIOS/R2

Site Inspection

There was no on-site inspection due to travel restrictions associated with the COVID-19 pandemic.

Risks (including Aspects and Footprint)

Based on the results of this audit, the Canadian Kraft Paper Industries Limited management system has established, implemented and maintained procedures for the identification, evaluation, upkeep, control and monitoring of risks.

Examples of Risks Audited: Potential impacts on the forest environment of failure to meet requirements related to water quality, soil disturbance, pollution, unauthorized harvesting and forest fires.

Compliance Evaluation

Canadian Kraft Paper Industries Limited has implemented processes for periodically evaluating its fulfilment of compliance obligations. Compliance evaluations are conducted as part of the company's routine inspection processes and during the internal audit.

Audit Trail Summary Processes

Process: Planning and administration

Elements audited: 4.1, 4.2, 4.3, 5..1, 5.2, 5.3, 6.1.1, 6.1.2, 6.1.3, 9.1, 9.3

Auditees: Andrew Forward, Mike McGarry, Joel Kayer

Records/Objective Evidence:

4.1 – no change in context of organization – change to CKP and NISO; partnership relations have continued to evolve and grow – no changes from govt. side – salvage operations have moved – Env. Act and Forest Act still speak to licences – working on 20 yr. FMP – existing plans have been extended – industry requested alignment of FMP and EA Act so single approval (gap analysis underway)

4.2 – no changes – Nekote partner is still 7 FNs - no changes in compliance requirements – still meet with Natural Resource Council

4.3 – No change to scope

4.4 – EMS maintenance – app based elements brings more attention to questions being asked; causes staff to ask more questions – have some new staff that needed training – still have EMS Committee and meetings – meet every Friday – broad range of topics discussed – e.g. meetings minutes Jul 18 and Sep 20, 2019

- created training videos for use of app – forced them to engage tools that had not used previously (e.g. webinar) – new hires – see staff listing

Now rolling out “Land Resource Manager” (Trimble product)

5.1 – 5..3

Leadership

- Policy statements
- Management review with committee
- Sit on EMS committee so aware of issues that might arise – hearing of issues – policy and process needs
- Monthly safety meetings includes EMS/SFM discussion
- Responsibilities assigned – redistributing workload

Resources

- With COVID have regular leadership meetings – allocation of resources dealt with to address COVID situation
- Budgets are adequate
- No reductions in manning – actually added positions
- New apps for data gathering – had to increase GIS budget

Environmental Policy

- Dated Feb 2, 2019
- Commitments include to minimize pollution and waste, compliance to legal and voluntary requirements and to continual improvement

6.1 – No significant change in the organization, interested parties or scope since previous audit
Potential emergency situations are captured in Section 8.2 Emergency Preparedness and Response of the EMS manual and the Emergency Response Plan – procedures are in place to address spills of herbicide, fuel, oil, and antifreeze, and forest fires

6.1.2 Current Environmental Aspects

Records:

- EMS Significant Aspects Operational Control Matrix
- Aspects review Oct 2020
- PAIRO spreadsheet
- Aspects development document – Wally and Andrew did the review – kept existing aspects as an anchor point – created a new table that identifies a process, and aspect, associated impact – reviewed PAIRO spreadsheet – reviewed PPoint presentation used to assist – SEAs remain the same as per EMS manual – see EMS Committee discussion of aspect and verification of their currency – have

existing operational control matrix – 8 SEAS with controls for each

6.1.3 List Of Compliance Obligations related to the environmental aspects

Records:

- Aspect linked to compliance obligations in SEA Operational Control Matrix
- Use master list to drive review of compliance obligations
- Legal register – working on a compliance monitoring spreadsheet – contains 45 pieces of legislation – he reviewed every piece of legislation for 2020 – also reviews EcoLog updates – notes in spreadsheet – also have Master Sheet of Legs and Regs – EcoLog provides email update of changes to environmental and H&S requirements – Andrew did inventory of changes – nothing new for 2020 – if was a change then would add to monitoring program
- Legal monitoring program – subscribe to EcoLog – have internal system as well to check on any updates to legs/regs not covered by Ecolog – Mike McGarry is now tracking legal requirements since mid-Oct – done compliance monitoring on legs/regs component
 - Mike M is tasked with conducting the sampling – spent last month getting up to speed – set up sampling schedule – has done some sampling – see interview notes with Mike McGarry

9.1 Evaluation of compliance

- NC raised in 2019 internal audit re: some that not all compliance obligations were evaluated as per 2019 schedule –
- Created an EMS champion to address issue
- CKP Compliance Monitoring Schedule 2020
 - Compliance – set up a three year sampling program – sample all legislation over the three years – is a master list of all the legislation – Mike McGarry is the lead – Mike completed inspections in 2020 - DONE
 - Compliance monitoring – Mike has been out – uses the monitoring part for a specific act – e.g. pest control act – document on list specific to what he is checking – no issues have arisen to date
- Mike M
 - New EMS champion
 - Has been conducting the compliance evaluations – covered all obligations identified in the Compliance Evaluation 2020-2022 – using 2020 as the base year
- OFI - Consider conducting a review of other compliance obligations (e.g. codes of practice, agreements) to ensure that all have been captured and evaluated

Joel Kayer – MB Forestry

- Worked for forestry in MB approx. 24 years – also worked for Repap
- Compliance monitoring – inspections conducted by forestry staff – currently is limited due to staffing limits – Conservation officers inspect in Interlakes area – less monitoring required
- Deals with Shane Elliot at CKP
- Fill out a timber inspection or just phone call to Shane
- If timber inspection then CKP gets copy
- On licence area is limited activity – compliance has been excellent – any issues are catch up work e.g. debris disposal – verbal and email plan of actions – Joel commented that is looking very good – good cooperative working relationship with CKP
- Interlake area are some non-compliance issues re: debris disposal, road closures, trespass in corridor – CKP submits a clean-up plan to MB to return land to proper condition; staff change overs for CKP has contributed to the identified issues – plans have been implemented – some already completed – working relationship is very good – more complicated because more people involved – issues captured on timber inspection report – some are non-compliance – currently feels is status quo re: improvement – e.g. rutting – sub contractors
- If issues e.g. rutting or garbage tends to be by a subcontractor

9.3 Management Review

- CSA / ISO / PEFC Management Review held Jun 6, 2019 – Andrew Forward, Wally Quiring, Shayne Elliot, Kevin Dudkain attendance – NOTE – CKP mill manager not in attendance has co-signed the SFM Policy – See OFI
- Minutes documented
- Discussion topics required by standards covered
- Comment re: revamping EIR and PIF process – EIR must meet 3 specific criteria – everything else is a PIF – thinks that the vocabulary doesn't work well – new staff have had trouble knowing the difference between the two

Summary and Conclusions:

Activities associated with the processes were assessed in relation to specific standard requirements and relevant procedures. Through interviews with personnel and review of relevant records it was determined that the process is/is not consistently applied and effective in meeting the established process objectives.

Process: Environmental Objectives and Planning Actions to Achieve Environmental Objectives
Elements audited: 6.2.1,

Auditees:

Andrew Forward, General Manager

Records/Objective Evidence:

Environmental Objective documentation
2020-10-23 COR expire for Nelson River Logging.
NFMS and Canadian Kraft Paper EMS Aspects Matrix 2019-06-03

Summary and Conclusions:

Environmental Objectives:

Objective 1: Compliance with obligations

- Issue: Outstanding action items can lead to regulatory enforcement.
- What: Smartphone app to tag action items with notifications and warnings.
- Resources: GIS expert, operations staff
- Who: EMS Committee
- Dates: 2019
- Evaluated: EMS committee review of actions beyond review date.
- APP: generates an email to the EMS committee. If action item is not finished by deadline it sends EMS committee an email (every 4 hours after deadline).
- Sends user to harvest operations dashboard.
- Can sign and upload forms in the field.

Objective 2: Productivity of land

- Issue: Volume chipper debris reduction plantable area
- What: Supervisors will review debris management plans with contractors and emphasize the need to stockpile debris on the road and landings.
- Resources: Increased supervisor monitoring.
- Who: Harvesting supervisor and superintendent.
- Date: 2019. Ongoing at new project tailgates (embedded in survey 123)
- Evaluation: Post harvest inspection. Anecdotally survey group is happy.

mNCR: No environmental objectives set for 2020 (e.g. producing training materials).

Good practice: app to identify action items to be completed.

Activities associated with the processes were assessed in relation to specific standard requirements and relevant procedures. Through interviews with personnel and review of relevant records it was determined that the process is not consistently applied and effective in meeting the established process objectives.

Process: Communication

Elements audited: 7.4

Auditees:

Andrew Forward, General Manager

Jocelyn Dorian, Administrator

Records/Objective Evidence:

Public Issues and Concerns Table January 1 to December 31, 2020

Aboriginal Issues and Concerns Table January 1 to December 31, 2020

2019-11-27 Forest Management Licence 2 2019 Fall Meeting Agenda

2019-2021 FMOP Meeting Minutes and Public Concerns and meeting questionnaire

2020-10-23 Process Improvement Form

2020-11-16 / 2020-10-13 Woodland Team Safety EMS meeting minutes and agenda.

2019 Sustainable Forest Management Newsletter

<https://canadiankraftpaper.com/sustainability/>

2019 Newspaper ads for Community Information Meetings

2019 Community Information Meeting Posters

2018/2019 Community Information Meeting emails

2019-02-08 CFNC Radio Station Announcement regarding community information meeting

Distribution list for SFMC

Summary and Conclusions:

Who (examples):

- PAG
- Government
- Communities
- First Nations
- Trappers
- Fishers
- Recreationalists
- NTFP collectors – medicines, chaga, wild rice

Log communications in public concerns table.

- Date, location, issue or question, response, change to plan or operational direction.
- Review table with SFMC (PAG) at every meeting.
- Committee is interested as it gives them idea of stakeholder concern.
- Complaint: Herbicide use in trapline – led to deferred spraying in three cutblocks.

Log indigenous concerns in aboriginal concerns table.

- Review with SFMC
- Reviewed engagement with FNs on cutblock that did not get harvested.

Government communications:

- Planning meetings retained in emails (full day meeting twice per year)
- Government representation in the field – tracked as inspection records.

Community:

- Every second year operating plan is due – November-January hold information sessions on pre-development to identify development and silviculture for two year period.
- Small “usual” group
- Evening meeting to allow people to come.
- Take minutes / log discussions. Specific concerns will get logged in concerns table. Minutes included in plan submission to government.
- Provide questionnaire at the meeting – largely questions about road access. Follow government road closure strategy.
- FRDP – road development plans is component of work permit, get agreement on road completion plan.

Improvement:

- Process improvement forms (PIF).

Audit Report

- PIF goes to EMS Committee who discusses the PIF
- EMS committee (Andrew, Shayne, Wally) – decided to wait to get submitter into a conversation.

Employees:

- Safety meeting has EMS component.
- Example: WHMIS discussion

Activities associated with the processes were assessed in relation to specific standard requirements and relevant procedures. Through interviews with personnel and review of relevant records it was determined that the process is/is not consistently applied and effective in meeting the established process objectives.

Process: Documented Information and Document Control

Elements audited: 7.5.1, 7.5.2, 7.5.3

Auditees:

Records/Objective Evidence:

2020-11-19 Woodlands/NFMC Environmental Management System Manual

2019-06-03 Working Near Waterbodies

2019-02-14 Legislation and Regulation SOP


2019-06-03 Public Engagement SOP

Summary and Conclusions:

Requirements are outlined in the EMS Systems Manual.

All SOP, EPP, Guides have header, footer, author, revision date, approval history, referenced documents.

Audit Report

	TITLE: Woodlands/NFMC Environmental Management System Manual		
	DOCUMENT: 86PROC-0100	REV: 03	REV DATE: 19/11/2020
	DEPT: ISO 14001	TYPE: WOODLANDS-PROCEDURE	
	AREA: MANUALS		

Author: Andrew Forward
Document Category:
Document Status: Current
Revision Date: Nov 19, 2020
Date Approved: Nov 19, 2020
Next Review Date: Nov 19, 2022

Approval History

Step	Approved By	Date Approved
Approval Step 1	Andrew Forward	20/11/2020 / 01:58 GMT

Revision History

Revision	Details	Effective Date
01		03/06/2019
02		12/06/2019
03	Update with new organizational structure	19/11/2020

Referenced Documents

No records to display.

Referenced By Documents

Document Number	Title
86EPP-0001[01]	Forest Fire
86EPP-0010[01]	Fuel, Oil and Antifreeze Spills
86EPP-0020[01]	Herbicide Spill
86SOP-0032[01]	Road Management Planning
86SOP-0040[01]	Work Permit

Date Created: 19/11/2020 Date Approved: 19/11/2020 Document Author: Andrew Forward
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OFI: 2019-02-14 Legislation and Regulation SOP is missing the header and footer.

Activities associated with the processes were assessed in relation to specific standard requirements and relevant procedures. Through interviews with personnel and review of relevant records it was determined that the process is consistently applied and effective in meeting the established process objectives.

**Process: Operational Control
Elements audited: 8.1**

Auditees:

- Shayne Elliot, Harvesting Superintendent
- Andrew Forward, General Manager
- Bob Bracegirdle, Bob's Harvesting
- Albert McIvor, Nelson River Logging
- Damien Gilberds, Harvesting Supervisor
- Ryan Shewchuk, Harvesting Supervisor
- Jody Ehman, Moose Lake Logging
- Dwayne Tucker – Timberline
- Grant Kurian – Kurian/Seer
- Ward Perchuck – Spruce Products
- Justin Klym – Justin Klym Hauling

Art Fenner

Records/Objective Evidence:

2017 FOREST MANAGEMENT PLANNING AND OPERATING PRACTICES Operators Guide

2019 EPP-010 Fuel, Oil and Antifreeze Spills

2019 EPP-001 Forest Fire

1997 3202E Environment Act Licence

2020-11-19 Woodlands/NFMC Environmental Management System Manual

2020 Fire Suppression Plan

Heritage Resource Awareness Training

Operational Guides 909, 920, 940, 970, 950

2019 SOPs 33, 50, 51

2014 Heritage Resources Action Plan

SR-1:

- 2020-08-08 Tailgate and map
- 2020-04-01 Work Permit
- 2014-06-04 Work Permit
- 2020-11-09 Contractor Orientation Record.
- SDS Pirtek Hydraulic Oil 22

JB 61, 62, 63

- Government inspection reports
- Remediation plans

JB-65:

- 2020-10-08 Map
- 2020-10-08 Work Permit

JB-71

- 2020-11-10 Contractor Orientation Record (review of SOPs, Emergency, Training, Reporting)
- 2019-07-19 Map
- 2020-05-27 Tailgate
- 2020-11-17 Interim Inspection
- 2019-07-29 Camp Permit

JB-72

- FMU 45 letter – work permit extension
- 2019-04-51 Work Permit
- Email Aug 17, 2020 re: soil disturbance

PI-13:

- 2020-08-18 Camp Permit
- 2020-11-17 Tailgate

SR-3

- 2020-04-01 Work Permit
- 2020-10-22 Amendment for WP for high stumps
- 2020-11-12 Contractor Orientation Record
- 2020-10-23 Tailgate
- 2020-10-27 Interim Inspection

Summary and Conclusions:

Operational procedures and controls include the operators guide, emergency plans (EPP) and annual fire suppression plan, standard operating procedures (SOPs), operational guides, training, monitoring, maps, work and camp permits.

Controls for harvesting, road construction, chipping, hauling, and other forestry activities are in the procedures.

Implementation of controls were reviewed with remote contractor interviews which included discussions on: soil disturbance, fire, spills, contractor and public safety, wildlife, invasive plants, retention and coarse woody debris management, residual waste management, legislated requirements, working

around water, road building, camps, heritage resource management.

OFI: FMOPS Page 34 Petroleum Products Storage/Location/Spills and 2020 Spill Response and Clean-up Plan indicates “Any size spill within 150 metres of a water body must be reported within 5 hours of discovery to CKP”, whereas EPP-010 indicates “Any spills within 100 metres of a water body must be reported immediately (within 5 hours)”

OFI: Consider documenting procedures for installation and sizing of culverts.

OFI: Consider documenting requirements for placards for fuel tanks as per TDG regulations.

OFI Consider clarifying the process in Document 86PROC-0100 regarding requirements for developing corrective action plans for non-conformances raised during internal audits

Good Practice: Thorough tailgate checklist.

Activities associated with the processes were assessed in relation to specific standard requirements and relevant procedures. Through interviews with personnel and review of relevant records it was determined that the process is consistently applied and effective in meeting the established process objectives.

Process: Emergency Preparedness and Response

Elements audited: 8.2

Auditees:

Bob Bracegirdle, Bob’s Harvesting
Albert McIvor, Nelson River Logging
Damien Gilberds, Harvesting Supervisor
Ryan Shewchuk, Harvesting Supervisor
Jody Ehman, Moose Lake Logging
Andrew Forward, General Manager
Shayne Elliot, Harvesting Superintendent

Records/Objective Evidence:

2019 EPP-010 Fuel, Oil and Antifreeze Spills
2019 EPP-001 Forest Fire
2020 Fire Suppression Plan – phone numbers
2017 Guide 920 Forest Ops Modification Guide
2020 Spill Response Plan
2020-09-18 Nelson River Logging Spill Kit Training
2020-05-20 Forest Fire Training Nelson River Logging (JB-72)
2020-09-15 Fuelling Procedures Training Nelson River Logging
2020-08-20 Emergency Response Test JB-64
Nelson River Logging CKP Contractor Mini Fire Plan
Bob’s Hauling video review of spill kits
Nelson River Logging photos of spill kits and fire extinguisher

Summary and Conclusions:

Contractors demonstrated preparedness for fires and spills.

Spills controls include:

- spill kits
- reporting amounts
- fuelling away from waterbodies

Fire controls include:

- preparedness plan
- Fire weather code review (work house, watch)
- Fire tools and water truck
- Pump start-ups

- Fire extinguishers
- CKP has plans and procedures for spills and fire:
- Contacts
 - Conduct annual spill response exercise
 - Example reviewed 2020-09-18 Nelson River Logging Spill Kit Training.

Fire Training:

- No training – just learn to start pump and use equipment.
- Pay fire protection charge.
- Testing of emergency preparedness is running a pump.
- Limited to initial attack.
- Limited to saving own equipment at own operation.

Reviewed response in JB-64.

Activities associated with the processes were assessed in relation to specific standard requirements and relevant procedures. Through interviews with personnel and review of relevant records it was determined that the process is consistently applied and effective in meeting the established process objectives.

Process: Non-conformity and corrective action

Auditees:

Andrew Forward, General Manager

Records/Objective Evidence:

2020-08-28 Forestry Remediation Plan Block JB-66
2020-08-17 Letter to all contractors.
2020-08-21 Letter to Nelson River Logging re JB-66
2020-03-26 Safety incident (occurred on public highway), out of scope.
2018-11-23 Environmental Incident Report (EIR) ET-6 right of way – lack of utilization
2019-02-25 Root Cause Analysis for EIR 2018-11-23
2018-11-20 CKP EMS committee Meeting Minutes
2016-11-30 Soil Disturbance Guide 909

Summary and Conclusions:

Corrective Actions driven by

- PIF – opportunity for improvement
- EIR – more significant issues e.g. violation of legal requirements, environmental incident, potential NC.
- Government warning created into PIF process
- Government enforcement created into EIR process.

Reviewed corrective actions for haul road drainage reparation issue leading to soil disturbance.

- Root cause: communication (bulldozer work and road building guidance and verbal) – wrong tool for the job.
- Corrective action: Letter to the contractor, remediation plan, letter to all contractors.

Bob's Hauling of air brake loss and back end slid into ditch

- Fibre picked up and reloaded.
- Driver was not hurt.

Reviewed last EIR for RCA and action plans.

OFI: Consider adding completion of final cutblock inspections to the “dashboard” as an action item.

Activities associated with the processes were assessed in relation to specific standard requirements and relevant procedures. Through interviews with personnel and review of relevant records it was determined that the process is consistently applied and effective in meeting the established process objectives.

Audit Report

This report was prepared by:

Rod Seabrook
SAI Global Management Systems Auditor