

# Michigan DNR Forest Certification Internal Audit Report

FMU: Baraga

Internal Audit Dates: June 10-12, 2008

Internal Audit Summary Date: June 12, 2008

Lead Auditor: Jeff Stampfly

Internal Auditors: Susan Thiel, Tom Haxby, Kerry Fitzpatrick

## Comments:

The internal audit of the Baraga FMU was held the week of June 10-12, 2008. The scope of the audit was State Forest Land (SFL) within the Baraga FMU. The audit criteria were the May 6, 2008 version of the Work Instructions (WIs) and all supporting DNR policy, procedures, rules, management guides, guidance documents, plans, and handbooks that were relevant to the management of SFL. On Tuesday, June 10, a detailed list of audit sites was selected and two audit routes established based on a search of records and interviews with staff. A brief opening meeting was held with the participants Wednesday morning at the Baraga Field Office. Subsequently, the audit team split into two groups and moved to areas of MDNR field management activities that were generally located in Baraga, Houghton and Ontonagon Counties. Multiple sites were visited by each group. A debriefing was held for FMU management staff at the end of the day Wednesday. Thursday morning was spent reviewing the audit findings, conducting follow-up interviews, or further reviewing documents as needed. A closing meeting was held on Thursday at 2:00 pm. The audit team gathered evidence to determine work instruction conformance through interviews, document review and field observations.

The internal audit team appreciated the cooperation, involvement, and openness of the Baraga Unit staff. The audit team was impressed with on the ground timber sale preparation and contract administration and it is clear staff are passionate about their work. It was obvious from our observations that multiple resource values are being considered and appropriately addressed during timber sale administration. There were several outstanding examples conveyed of cooperative projects and positive relationships including trail grant sponsors, wildlife groups, U.S. Forest Service and tribal entities. A good discussion was held regarding beaver dams.

## Definitions:

Major Non-conformances: One or more of the Michigan Department of Natural Resource (MDNR) Sustainable Forest Certification Work Instruction requirements has not been addressed or has not been implemented to the extent that a systematic failure of the MDNR to meet a Sustainable Forest Certification (Sustainable Forestry Initiative or Forest Stewardship Council) principle, objective, performance measure or indicator occurs. (Adapted from the Sustainable Forestry Initiative Standard 2005-2009 Edition definitions.)

Minor Non-conformances: An isolated lapse in MDNR Sustainable Forest Certification Work Instruction implementation which does not indicate a systematic failure to consistently meet a Sustainable Forest Certification (SFI or FSC) principle, objective, performance measure or indicator. (Adapted from the Sustainable Forestry Initiative Standard 2005-2009 Edition definitions.)

Opportunities for improvement: Opportunities for improvement are findings that do not indicate a current deficiency, but serve to alert the FMU to areas that could be strengthened or which could merit future attention.

MDNR's internal audit review process (WI 1.2) requires a record, evaluation, and report of non-conformances with forest certification standards and related WI at all levels of the Department. As part of that process, we documented the Unit's conformity with policy, procedures, management review decisions, and WIs. Our audit resulted in 3 major non-conformances, 6 minor non-conformances, and 5 opportunities for improvement. Non-conformances are documented on the Non-conformance Report forms (NCR Form 4502) below. Opportunities for improvement include:

Results of our internal audit found the following list of Opportunities for improvement. Below each bulleted opportunity for improvement is a response from the unit on the current status.

- WI 1.1 The Michigan State Forest Management Plan (MSFMP) was approved on April 10, 2008, eight weeks prior to the audit. Staff need to be familiar with the MSFMP and need to understand how key components of the plan may impact FMU operations.

*UM Comment: Staff have been directed to the DNR website location of the State Forest Management Plan. An electronic copy of the plan is also stored on the local network "P" drive. A CD version is also available in the unit manager's office.*

- WI 6.1 There is an opportunity in educating the public through postings in kiosks about timber harvest activities and pending prescribed burn that will occur adjacent to the Baraga Plains ORV trail and the timber harvest and hazard tree removals in the Emily Lake Campground.

*UM Comment: Postings to notify the public have been placed at both locations on the bulletin board kiosks.*

- WI 6.3 Staff need to be familiar with the SFI Inconsistent Practices Hotline (800-474-1718) and know that the FMFM Forest Certification Specialist is the DNR's SFI State Implementation Committee representative.

*UM Comment: Land management personnel all have the SFI Inconsistent Practices Hotline phone no. posted on their office bulletin boards. The posting also indicates the name of the current SFI State Implementation Committee Representative.*

- WI 7.1 It is recommended the timber sale completion, inspection records, payment receipts, contract, proposal, and preparation records be kept in one package once the sale is closed and stored in the compartment file.

*UM Comment: Office staff have been instructed to re-organize closed timber sale records to merge them with compartment records.*

- WI 8.1 Staff need to make a more concerted effort in updating their inventory systems, including IFMAP activity tracking.

*UM Comment: Staff will be receiving training this year on IFMAP activity tracking.*



Actual Completion Date (mm/dd/yyyy)	FMFM District Supervisor	Date
<u>FMFM Unit Manager</u> <u>Signature</u> <u>Date</u>	<u>FMFM District Supervisor</u> <u>Signature</u> <u>Date</u>	
Follow Up Comments		



Actual Completion Date (mm/dd/yyyy)	FMFM District Supervisor	Date
<u>FMFM Unit Manager</u> <u>Signature</u> <u>Date</u>	<u>FMFM District Supervisor</u> <u>Signature</u> <u>Date</u>	
Follow Up Comments		







## INTERNAL AUDIT NON CONFORMANCE REPORT

Unit Name Baraga		Site location RDR 1257: T50N R34W Sec 20 SW1/4	Non Conformance Report Number (Unit Code - yyyy - #) 11-2008-04
Lead Auditor Jeff Stampfly	Team Member(s) Susan Thiel, Tom Haxby, Kerry Fitzpatrick		
Date (mm/dd/yyyy) 06/11/2008	Work Instruction or Standard and Clause Number 3.1 Forest Operations Best Management Practices		
<input type="checkbox"/> Major <input checked="" type="checkbox"/> Minor	Other Documents (if applicable) 1994 Water Quality Mgt Practices on Forest Land Manual	Responsible Manager(s) FMFM Unit Manager	
<p>Requirement of Audited Standard/ Work Instruction Per W.I. 3.1: "The operating division will be responsible for protecting water quality, and will document potential impacts as part of the operations approval process. The current Michigan water-quality Best Management Practices manual (Water-Quality Management Practices on Forest Land, 1994) will be the standard guide for water-quality protection in State Forest operations. The manual will be used as a guide for such operations, and appropriate professional expertise will be used to adjust the recommendations of the manual to ensure protection of water quality as defined by relevant laws and regulations."</p> <p>Per page 24 of the guide, under the subheading of 'Sediment Control': "All sediment control devices must be routinely maintained, cleaned, or replaced until a stable condition is reached and erosion is no longer possible."</p>			
<p>Observed Nonconformity A logger was required to crib over existing culvert crossing on Six Mile Creek with wooden timbers (RDR 1257). The approaches were armored with crushed rock gravel and silt fence was installed along road edges near crossing to prevent sedimentation in the stream. This was done to protect existing crossing from damage while waiting for funding to replace culvert with a bridge. A site inspection revealed the silt fence was not maintained. It was full of sand and sand had started to breach over the silt fence toward the stream. A heavy rain event in the future could cause the silt fence to be breached and a heavy sand load thereby delivered into the stream. There is a lack of maintenance of temporary protection structures at the RDR site. Staff did not identify a need or intent to perform periodic monitoring and maintenance of the temporary protection structures until the culvert is replaced or RDR is resolved.</p>			
<p>Root Cause Analysis (Describe the cause of the problem.) Normal Spring run-off caused erosion that is threatening to breach silt fence installed by a logger near an existing stream crossing that was needed for a timber harvest. Once the logging contract is closed, the logger is no longer responsible for maintenance of the erosion control. BMP maintenance of the site is needed.</p>			
<p>Corrective Action - Proposed corrective action - To be completed by the Unit and relevant Divisions. Restoration of BMP measures will be completed this month. FMFM staff will re-establish water diversion turn-outs, remove sand accumulated at silt fence, and seed and mulch the area to revegetate. An RDR remains on file to replace the existing structure with a properly engineered bridge when funding is available.</p>			
Proposed Completion Date (mm/dd/yyyy) 06/30/2008			





Actual Completion Date (mm/dd/yyyy)	FMFM District Supervisor	Date
<u>FMFM Unit Manager</u> <u>Signature</u> <u>Date</u>	<u>FMFM District Supervisor</u> <u>Signature</u> <u>Date</u>	
Follow Up Comments		



## INTERNAL AUDIT NON CONFORMANCE REPORT

Unit Name Baraga	Site location T48N R33W Sec 29 NW ,Murphy Bridge T51N R37W Sec25 NENW Simar Grade	Non Conformance Report Number (Unit Code - yyyy - #) 11-2008-06
Lead Auditor Jeff Stampfly	Team Member(s) Susan Thiel, Tom Haxby, Kerry Fitzpatrick	
Date (mm/dd/yyyy) 06/11/2008	Work Instruction or Standard and Clause Number 3.3 Best Management Practices-Road Closures	
<input type="checkbox"/> Major <input checked="" type="checkbox"/> Minor	Other Documents (if applicable) RDR no. 1289	Responsible Manager(s) FMFM Unit Manager
<b>Requirement of Audited Standard/ Work Instruction</b> Per the Emergency Road Closure instructions, "the FMFM Unit Manager will immediately contact their District Supervisor who will contact the respective Ecoteam Chairperson and report the situation. The FMFM Unit Manager will complete the Road Assessment Checklist and Forest Road Treatment Proposal and follow through with approvals." The Ecoteam is to "meet as soon as possible regarding the emergency road closure and will determine whether to continue with a temporary emergency closure or to proceed with permanent road closure" and "The FMFM Unit Manager will receive written notification of the Ecoteam's decision through the District Forest Supervisor. The road shall remain closed until the emergency situation is corrected, or closure is confirmed through the non-emergency road closure process." "If the Ecoteam approves closure, the land manager will request a Director's Order for road closure through the normal Land Use Order's of the Director's process."		
<b>Observed Nonconformity</b> The trail road to Murphy Bridge was closed on an emergency basis after discovery of a safety issue during the previous internal audit in June 2005. We were informed that the road was bermed shortly after the safety issue was discovered in 2005. No documentation could be found on the road closure except RDR no. 1289 which was created on November 1, 2007. The RDR states that the road was closed by a director's order. However, no evidence could be found that the following occurred: Road Assessment checklist and FTP were created and approvals obtained, Ecoteam reviewed emergency closure and notified unit manager of decision, and request from unit manager for a director's order for the closure. A similar failure to file road closure forms was found where the road/trail on the Simar Grade was physically closed in 2006 due to a culvert blowout and subsequent repair work.		
<b>Root Cause Analysis (Describe the cause of the problem.)</b> The Murphy road bridge was approved for temporary closure by the WUP eco-team on October 11, 2005. (see attachments) Transition of unit manager's due to a retirement resulted in a failure of the new unit manager to follow through with the temporary road closure process. The procedure for temporary road closure of the washed-out Simar grade in the summer of 2006 was not followed.		
<b>Corrective Action - Proposed corrective action - To be completed by the Unit and relevant Divisions.</b> The Murphy road bridge is an abandoned county road bridge and remains in an unsafe condition to date. The road is bermed and posted with a sign stating that the bridge is out. The road is in a very remote area of Covington township and dead ends in a broad wetland. The area gets some local use, primarily by Hunter's in the Fall. Unit manager will proceed to request a director's order to temporarily close the road until the bridge deck can be replaced. The Simar grade wash-out was repaired in the Summer of 2006 by FMFM staff with assistance from Fish Division. The grade is open and no closure is needed. The wash-out occurred on a segment of road which serves as a cut-across between two road systems. The area closed was the immediate wash-out site. The temporary closure did not prevent access to any State Forest land.		

Proposed Completion Date (mm/dd/yyyy)					
07/15/2008					
Don Mankee			6-26-08		
FMFM Unit Manager			Signature		
Date			Date		
Deb Begalle			7-2-08		
FMFM District Supervisor			Signature		
Date			Date		
CORRECTIVE ACTION PLAN ACCEPTED			FC Specialist Acknowledgement: D. Nezich		Date 7-21-08
Actual Completion Date (mm/dd/yyyy)		FMFM District Supervisor			Date
FMFM Unit Manager			FMFM District Supervisor		
Signature			Signature		
Date			Date		
Follow Up Comments					



## INTERNAL AUDIT NON CONFORMANCE REPORT

Unit Name Baraga	Site location Mason Building, Lansing	Non Conformance Report Number (Unit Code - yyyy - #) 11-2008-07
Lead Auditor Jeff Stampfly	Team Member(s) Kerry Fitzpatrick, Tom Haxby, and Susan Thiel	
Date (mm/dd/yyyy) 5/30, 6/3, and 6/6/2008	Work Instruction or Standard and Clause Number 5.1 Coordinated Natural Resource Management Research	
<input checked="" type="checkbox"/> Major <input type="checkbox"/> Minor	Other Documents (if applicable)	Responsible Manager(s) FMFM Forest Health, Inventory, and Monitoring Unit Manager with assistance from the Research Coordinators for FSD, PRD, and WLD
Requirement of Audited Standard/ Work Instruction "The research coordinators from each Division or Bureau must compile a summary of research activities and expenditures . . . . ."  "The summary will describe development and implementation of research projects and incorporation of findings into DNR activities and programs."		
Observed Nonconformity Each division did not compile a summary of research activities and expenditures.  The summary had no description of development and implementation of research projects, nor was there a description of incorporation of findings into DNR activities and programs.		
Root Cause Analysis (Describe the cause of the problem.) Work Instruction 5.1 goes beyond the SFI Objective 9 and requires a comprehensive report that results in spending additional preparation time, without additional resources identified to gather the information and prepare the report. SFI only requires a list of the projects and costs, and one can argue that Indicators for Performance Measures 9.1 and 9.2 require less.  Annual and final reports, plus additional deliverables (e.g., workshops, manuscripts, theses) are generally required for any contractual work conducted by FMFM, and WLD. To provide details currently called for in Work Instruction 5.1 requires additional work and results in little added benefit. Research results and products are usually published, made available on-line, and/or presented to appropriate groups within the agency. The result is that appropriate individuals within the DNR are made aware of the results of the research when they are available. Some researchers are quite diligent about sharing their ongoing findings, even preliminary results, with field foresters and wildlife biologists and much of this reporting is required under contracts. However, to expect DNR personnel involved with audits know about all of the research being done by the Department is not realistic, nor is it necessary for them to do their work appropriately.		





## INTERNAL AUDIT NON CONFORMANCE REPORT

Unit Name Baraga	Site location Various	Non Conformance Report Number (Unit Code - yyyy - #) 11-2008-08
Lead Auditor Jeff Stampfly	Team Member(s) Susan Thiel, Tom Haxby, Kerry Fitzpatrick	
Date (mm/dd/yyyy) 06/11/2008	Work Instruction or Standard and Clause Number 7.1 Timber Sale Preparation and Administration Procedures	
<input type="checkbox"/> Major <input checked="" type="checkbox"/> Minor	Other Documents (if applicable) Within Stand Retention Guidance	Responsible Manager(s) FMFM Unit Manager
Requirement of Audited Standard/ Work Instruction <u>7.1 Timber Sale Preparation and Administration Procedures:</u> "At the pre-sale meeting record the following in the Remarks section of the initial Timber Sale Contract Field Inspection Report (R-4050): i)Harvesting crew name, ii) Name of SFE trained foreman, iii) Sustainable Forest Education (SFE) training completion dates for SFE trained foreman (1) date of completion of core training." "A record of all timber sale inspections, site visits, and other related observations and notes will be kept on a Timber Sale Contract Field Inspection Report, R-4050. At a minimum, complete a form R-4050 (including checklist items) for each payment unit, or alternately, at each inspection (if multiple payment units were completed between inspections).		
Observed Nonconformity In numerous cases, form R-4050 is not being filled out at completion of each payment unit, or alternately, at each inspection for all sales investigated. No documentation of presale conference for most sales inspected. No documentation of SFE trained foreman name and confirmation of core training completion for many sales inspected. Commonly the checklist portion of the form was not completed for each inspection. Issues related to specific sales are listed below: <ul style="list-style-type: none"> <li>• Sale no. 11-022-07-01 Scotch Pine Sale: No documentation that Baraga Tourism was called per sale requirement. All Red and White Pine were to be left in the sale area per specification 2.1.12. No retention was visible in the completed portions of the sale. It appears none of the retention species were present in the cut area. No documentation could be found stating any of the retention species were present in cut units or that no retention was acceptable and that it was agreed that portions of the representative stand (scotch pine) were not to be left per standard retention guidelines.</li> <li>• Sale no 11-022-05-01 Da Pine Sale : Not able to clearly ascertain operations were restricted to Aug 31-Dec 1 from inspection notes. Assumptions and verbal confirmation had to occur to confirm sale specification 5.2.3.1 was followed.</li> <li>• Sale no. 11-024-07-01 Kenton Fried Pine: No documentation of post sale conference. Landings were to be seeded upon completion of sale per sale specification 5.2.30. No evidence of seeding was found and no documentation was found waiving the seeding requirement.</li> <li>• Sale No. 11-023-07-01 Cross Bump Pine: An open sale. No inspection reports were provided to auditor for field review. When requested after field visit, auditor was informed they were currently unavailable as all inspection reports were in staff' trucks which were in the field. Auditor was unable to document sale operating restrictions were followed as well as presale conference occurred.</li> </ul> <p>Generally, staff are doing a good job of documenting their site visits, but often are not using form R-4050 as required by the work instruction, Not using Form R-4050 on every field inspection made it unclear if all elements of the timber sale contract were being evaluated on a consistent basis.</p>		





## INTERNAL AUDIT NON CONFORMANCE REPORT

Unit Name Baraga	Site location Mason Building, Lansing	Non Conformance Report Number (Unit Code - yyyy - #) 11-2008-09
Lead Auditor Jeff Stampfly	Team Member(s) Kerry Fitzpatrick, Tom Haxby, and Susan Thiel	
Date (mm/dd/yyyy) 5/30, 6/3, and 6/5/2008	Work Instruction or Standard and Clause Number 8.1 Michigan Department of Natural Resources Staff Training for State Forest Management	
<input type="checkbox"/> Major <input checked="" type="checkbox"/> Minor	Other Documents (if applicable)	Responsible Manager(s) Field Coordinator for WLD and FCIT representative for FSD
<b>Requirement of Audited Standard/ Work Instruction</b> "Training Officer annually summarizes training needs." Training Officer "determines annual training plan for division employees and inform supervisor and employees." "Training Officer shall annually assess gaps in training . . . ." "Supervisors send Training Officer the annual list of training needs . . . ." "Supervisors and employees shall inform Training Officer of completion of all required training, and of any additional training completed."		
<b>Observed Nonconformity</b> FSD and WLD do not follow the structured process outlined in Work Instruction 8.1. FSD does not annually summarize training needs nor does FSD determine annual training plan for division employees. FSD and WLD do not annually assess gaps in training. FSD and WLD supervisors do not send Training Officer the annual list of training needs. FSD and WLD Training Officers observe that employee training records are only as good as the information received from staff: some staff do not attend trainings for which they are registered; some staff do not sign-in at trainings they did attend; some staff attend courses, workshops or conferences (not handled through the training officer) and do not inform training officer of training.		
<b>Root Cause Analysis (Describe the cause of the problem.)</b> Fisheries Division has a training process that is effective and efficient through a centralized committee in Lansing whereby training needs are identified to each Supervisor and staff. While this process of employees requesting training and receiving training works for our needs within the Division; the process is inconsistent with Work Instruction 8.1. Wildlife Division has a very similar and centralized process. A training plan is developed by staff and then reviewed/approved by the division management team. Once approved the training plan is provided to each management unit supervisor and staff and it is ultimately the responsibility of the MUS to ensure that his/her staff has received the necessary training. This process is also inconsistent with Work Instruction 8.1.		
<b>Corrective Action - Proposed corrective action - To be completed by the Unit and relevant Divisions.</b> Each division currently has an identified process that works, but may be inconsistent with current work instructions. The divisions will work more closely with their training coordinators to ensure that the training needs are both identified and documented for the immediate future. This could occur through the yearly Performance Objective Process and reviewed in the Performance Appraisal Process. The process of housing training objectives and reviews in the Performance Appraisal Process is a prudent place to document this; so as to not create a separate tracking tool, supervisors and Human Resources can access the information, and the information is kept somewhat confidential to just the employee and their supervisor. (note: many of our supervisors <u>do</u> utilize the annual performance evaluation process for training needs so this is true to some extent for WD.) For the long-term, this should be a discussion item for the annual management review session where a proposal for revising work instruction 8.1 should be reviewed. The revision should incorporate the actual process that is occurring; i.e. where the records are maintained, who is actually assessing the gaps in training (WD it is the management unit supervisor).		



## **Report and Review Procedure following the Internal Audit:**

1. Nonconformance Reports (NCRs) that describe observed nonconformity with forest certification work instructions will be prepared by lead and staff auditors during internal audits.
2. Lead Auditor will prepare a Draft Internal Audit Report (DIAR) consisting of Audit team Nonconformance Reports and a brief audit summary (cover memo). Complete at closing meeting.
3. Lead Auditor will send the DIAR to FMU Manager and send a copy to Forest Certification Specialist and District FMFM Supervisor within 1 week.
4. The FMU Manager will respond to the NCRs and assemble the root cause analysis and corrective actions for all NCRs in consultation with staff, or, dispute findings with an explanation. FMU Manager will send to the FMFM District Supervisor with copy to FC Specialist and Lead Auditor.
5. The FMFM District Supervisor will review, support, and date the NCRs. The FMFM District Supervisor will send the Internal Audit Report with approved NCRs to the Forest Certification Specialist within 4 weeks of the closing meeting. A copy of this report will also be sent to the Lead Auditor.
6. The Forest Certification Specialist will consult with Lead Auditor to confirm corrective actions satisfactorily address NCRs. The FC Specialist will review and sign the NCR corrective actions to acknowledge completion. Complete within 6 weeks of closing meeting date.
7. Forest Certification Specialist will forward Final Internal Audit Report to FCIT, FMFM Management Team, FMFM District Supervisors, all FMU Managers, and representatives from other Divisions, as identified by the FCIT Division representatives.
8. Corrective Actions will be cleared either through the Management Review Process or in the next internal audit.