Michigan DNR Forest Certification Internal Audit

FMU: Grayling Forest Management Unit (FMU)
Internal Audit Dates: July 26-28, 2010
Draft Internal Audit Report Date: July 28, 2010
Final Audit Report Date: October 15, 2010
Lead Auditor: Jim Ferris
Internal Auditors: Bob Burnham, Kerry Fitzpatrick, Steve Milford,

Comments:

The internal audit of the Grayling FMU was held July 26-28, 2010. The scope of the audit was State Forest Land (SFL) within the Grayling FMU with the exception of military lands. The audit criteria were the April 6, 2010 version of the Work Instructions (WI's) and all supporting DNR policy, procedures, rules, management guides, guidance documents, plans, and handbooks that were relevant to the management of SFL. Prior to the audit, the forest certification specialist, in consultation with unit staff, developed two routes for the field portion of the audit. On Monday, July 26 these draft routes were reviewed and revised by the audit team with input from unit staff. Document review and office interviews also occurred on July 26. On Tuesday, July 25, the audit team split into two groups. A brief opening meeting was held with audit participants Tuesday morning at the Grayling FMU Headquarters. Audit routes in eastern and western portions of the FMU were visited throughout the day. The eastern group visited 10 sites and the western group visited 12 sites. Wednesday morning (July 28) was spent reviewing the audit findings, conducting follow-up interviews, and further reviewing documents as needed. A closing meeting was held the same day at 1:00 pm.

Commendable Practices:

The internal audit team appreciated the cooperation, involvement, and openness of the Grayling FMU staff and audit participants.

- The audit team was impressed with the teacher education program which introduces teachers to a wide range of natural resource management topics.
- The FMU is commended for the abundance and diversity of recreational opportunities which are offered to the public in the Grayling unit.
- The audit team noted exemplary communication efforts regarding timber sales in locations close to high public use areas. Examples include the Rainbow Bend Campground and the High School Jack sales.
- It was noted that the unit has a very cooperative working relationship with the Department of Military Affairs on matters regarding management of the military lease lands.
- Timber sale administration practices were observed to be very thorough.
- Cooperation between divisions was exceptional. Several examples of complimentary working relationships were observed involving FMD, WLD, FSD and LED.
- The Grayling is in a dry fire prone area. As a result the resource protection staff faces high demands but responds to those demands in a very effective, professional manner.

Definitions:

<u>Major Non-conformances</u>: 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 FMU's conformity with policy, procedures, management review decisions, and WI's. At the time of the Grayling FMU audit, the Management Review and WI updates from 2010 were disseminated to staff. Our audit resulted in 0 major non-conformances, 8 minor non-conformances, and 4 opportunities for improvement. Non-conformances are documented on the Non-conformance Report forms (NCR Form 4502) below.

Opportunities for improvement include:

- Work Instruction 7.2. There is conflicting direction given to the unit staff regarding damaged timber. Standard contract spec 3.4 states that "Damage to residual trees (defined as breaking of the cambium layer, broken tops or bending of trees from their natural position) is not acceptable." However direction provided to the staff by the Timber Sale Specialist indicates that damage is not to be charged unless the size of the wound exceeds 48 square inches.
- Silt fences were left in place on a stabilization project at Rainbow Bend campground and at a sand trap on the upper Manistee River. Part of the fence on the Manistee had collapsed while revegetation was still incomplete. It is recommended that silt fences either be removed as soon as possible after vegetation stabilizes or they be monitored and maintained if revegetation is delayed.
- Resource Damage Reports (RDR's). RDR reports are being entered into the online database but staff was unable to confirm exactly where the sites were on the ground or what specific repairs had been made. Comments and notes in the older RDR records were vague as well as the current status of some of the records. In order for the RDR database to be useful the older records need updating with enough information to track the location of the site, the status of the record and a record of work accomplished.
- Event permits that are issued at the district level involving several FMU's are not always passed on to FMD unit manager. Additionally, some permits did not have signatures from all divisions.

NCRs:

Copies of all NCRs (form R 4502) are attached to this audit summary.

Michigan Department of Natural Resources and Environment - Forest Management Division

2010 INTERNAL AUDIT
NON CONFORMANCE REPORT

Unit Name Grayling FMU	Site location Grayling Office	Non Conformance Report Number 72-2010-01
Lead Auditor Jim Ferris	Team Member(s) Kerry Fitzpatrick, Bob Burnham, Steve Milford	
Date (mm/dd/yyyy) 07/28/2010	Work Instruction or Standard and Clause Number 1.3 Regional State Forest Management Plan Development	
☐Major ☒Minor	Other Documents (if applicable)	Responsible Manager(s) (Person identified by the internal audit team who implements the corrective action): NLP Ecoteam Chair

Requirement of Audited Standard/ Work Instruction:
Work Instruction 1.3 specifies that the NLP Regional State Forest Management Plan is to be completed by October 2010.

Observed Nonconformity:
Through discussions with the WLD NLP ecologist-planner and FMD Western Lower Peninsula District inventory & planning specialist, it is apparent through analysis of biodiversity planning timelines and regional forest plan timelines that the NLP RSFMP will not be completed by October 2010.

Root Cause Analysis (Describe the cause of the problem): Prepared by and date: Dayle Garlock 10/14/10
The NLP Regional State Forest Management Plan is behind principally due to delays with the Biodiversity Conservation Planning Process (BCPP). All Management Areas are currently done waiting for inclusion of the Biodiversity Stewardship Areas. When Work Instruction 1.3 specified the completion of the Regional State Forest Management Plan, the timeline for completing the BCPP was October 2010. The latest timeline outlined on the BSA Staff and Public Review Action Plan approved by SWC does not forecast the incorporation of BSA's and community DFC's into EUP Regional State Forest Management Plans until sometime after January 2011. The altered timelines and the reasons for those alterations make the root causes for the nonconformity well outside of the control of the NLP Ecoteam..

Corrective Action – (To be completed by the Unit and relevant Divisions): Prepared by and date: Dayle Garlock 10/14/10
The draft plan is currently awaiting additional input from public meetings and Statewide Council review and approval.

Proposed Completion Date (mm/dd/yyyy): Per District Planner, the plan is to be completed in February 2011
Responsible Manager (RM): Eco Team
RM Signature Submitted electronically by Dayle Garlock Date 10/14/10

Susan Thiel		10-14-2010	Dayle Garlock 10-15-10		
FMD Unit Manager	Signature	Date	FMD Dist Supervisor	Signature	

CORRECTIVE ACTION PLAN ACCEPTED
Forest Cert Specialist: Dennis Nezich
Date 10-15-10

Actual Completion Date (mm/dd/yyyy):
Responsible Manager:
Date:

Verified by:			Closed by:		
Responsible Mgr Supervisor	Signature	Date	FMD FC Specialist	Signature	Date

Follow Up Comments

Michigan Department of Natural Resources and Environment - Forest Management Division

2010 INTERNAL AUDIT

NON CONFORMANCE REPORT

Unit Name Grayling FMU	Site location Grayling Office	Non Conformance Report Number 72-2010-02

Lead Auditor Jim Ferris	Team Member(s) Kerry Fitzpatrick, Bob Burnham, Steve Milford	
Date (mm/dd/yyyy) 07/28/2010	Work Instruction or Standard and Clause Number 8.1 DNRE Staff Training for State Forest Management	
☐Major ☒Minor	Other Documents (if applicable)	Responsible Manager(s) (Person identified by the internal audit team who implements the corrective action): WLD – Mio Habitat Biologist

Requirement of Audited Standard/ Work Instruction:

Work Instruction 8.1 item 2.c states that "Employees shall inform training officer of completion of all required training and of any additional training completed . . . . " Item 3.c list examples of recordable training, which includes webinars and brown bag lunch sessions.

Observed Nonconformity:

Training officers from WLD and FMD identified staff not reporting training as their biggest problem with training records. WLD habitat biologist stated that she did not report all her training. She reported that a brown bag lunch webinar on invasive species management and GDSE training were not listed on the training record.

Root Cause Analysis (Describe the cause of the problem): Prepared by and date: Elaine Carlson 09/01/10

Division training officers keep track of required training and that scheduled directly through the employee's supervisor and Lansing office. Often, the type of training that has not been recorded is that where supervisory permission is not required, training that may occur in a short planning window and/or that which is of a short duration. It is uncommon for this employee to review training records so that knowledge of any shortcomings would not likely be detected. This audit was a reminder that all training should be reported in a timely manner.

Corrective Action – (To be completed by the Unit and relevant Divisions): Prepared by and date: Elaine Carlson 10-15-10

My training record will be reviewed to ensure it is up to date. The WLD Training Officer will be informed of completion of all required training and of any additional training completed, with the exception of department or division sponsored training in which there was a sign-in sheet (which should be reported to the Training Officer by the trainer).

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Proposed Completion Date (mm/dd/yyyy): June 1, 2011

Responsible Manager (RM): Elaine Carlson, Wildlife Biologist

RM Signature *Elaine Carlson* Date 10/15/10

Susan Thiel		10-14-2010	Dayle Garlock 10-15-10		
FMD Unit Manager	Signature	Date	FMD Dist Supervisor	Signature	

CORRECTIVE ACTION PLAN ACCEPTED

Forest Cert Specialist: Dennis Nezich

Date 10-15-10

Actual Completion Date (mm/dd/yyyy):

Responsible Manager:

Date:

Verified by:			Closed by:		
Responsible Mgr Supervisor	Signature	Date	FMD FC Specialist	Signature	Date

Follow Up Comments

Michigan Department of Natural Resources and Environment - Forest Management Division

2010 INTERNAL AUDIT
NON CONFORMANCE REPORT

Unit Name Grayling FMU	Site location North Conner's Marsh Oak Was Alive When Cruised Camp Shawano Block	Non Conformance Report Number 72-2010-03

Lead Auditor Jim Ferris	Team Member(s) Kerry Fitzpatrick, Bob Burnham, Steve Milford	
Date (mm/dd/yyyy) 07/28/2010	Work Instruction or Standard and Clause Number 1.2 Mgmt Review Process for Continual Improvement	
☐Major ☒Minor	Other Documents (if applicable) N/A	Responsible Manager(s) (Person identified by the internal audit team who implements the corrective action): FMD Forest Health, Inventory, and Monitoring Unit Leader

Requirement of Audited Standard/ Work Instruction:
Management Review Reports, Section 3. Implementing Improvements: Division chiefs will ensure changes and improvements approved by the Statewide Council are implemented via written communication to employees.

Observed Nonconformity:
Interviews with FMD and WLD staff and field observations in oak stands indicated that oak regeneration is likely being limited at least in part by deer herbivory. This issue was addressed in previous Management Review Reports (2008, 2009, 2010) by formation of a Cervid Herbivory Team. The Cervid Herbivory Team has been inactive and their recommendation to conduct statewide risk modeling as a means to identify additional data needs has not been implemented. Our observations support the previous finding that deer herbivory is affecting desirable forest regeneration in the Grayling FMU and that recommendations from the Cervid Herbivory Team be implemented.

Root Cause Analysis (Describe the cause of the problem): Prepared by and date: Ronald Murray 9/7/10

The Cervid Herbivory Team did a broad literature review and found highly confusing and conflicting recommendations from the body of research that was available. However, the team did agree that a risk rating process could be undertaken that could identify areas at high risk for problems from deer herbivory vs. those with little risk. Follow-up monitoring of these ratings could provide needed information to develop more refined models and guide forest management operations.

To accomplish that task, it would be necessary to assemble a cross section of managers and research experts familiar with conditions in the field across the state. Two years ago when this decision was made, services of a key facilitator form the USDA-FS, FHTET was needed to guide this effort. Funding issues and lack of available time from that individual has impeded the implementation of this step in the program both in Michigan and several other states over the past two years.

Corrective Action – (To be completed by the Unit and relevant Divisions): Prepared by and date: Ronald Murray 9/7/10

In response to that need, the USDA-FS, FHTET has recently created a program that can be used by knowledgeable state-level staff with minimal additional training from FHTET. This training can usually be accomplished over the phone in consultation with the FHTET facilitator. The logical FMD staff person to serve as a state-level facilitator is Roger Mech of the FMD Forest Health Program. He is a leader in the development of the Forest Health Risk Map nationally and has interacted with the FHTET facilitator in this effort to a considerable degree. Extension of his knowledge to development of a cervid herbivory risk map is logical.

The FMD Forest Health Program plans to provide that service to the Cervid Herbivory Team in 2011 to again move this process along to the next logical step. Commitment from FMD and WLD management to allow the assembling of the expertise needed to accomplish this task is also needed and will be sought for the 2011 FY.

Proposed Completion Date (mm/dd/yyyy): 9/30//2011

Responsible Manager (RM): Ron Murray, Unit Leader

RM Signature *Ronald Murray, Unit Leader* Date 9/7/10

Susan Thiel		10-14-2010	Dayle Garlock 10-15-10	
FMD Unit Manager	Signature	Date	FMD Dist Supervisor	Signature

CORRECTIVE ACTION PLAN ACCEPTED Forest Cert Specialist: Dennis Nezich Date 10-15-10					
Actual Completion Date (mm/dd/yyyy): Responsible Manager: Date:					
Verified by:			Closed by:		
Responsible Mgr Supervisor	Signature	Date	FMD FC Specialist	Signature	Date
Follow Up Comments					

Michigan Department of Natural Resources and Environment - Forest Management Division

2010 INTERNAL AUDIT
NON CONFORMANCE REPORT

Unit Name	Site location	Non Conformance Report Number
Grayling	Pull Sites, Compartment 280 & 282	72-2010-04

Lead Auditor	Team Member(s)
Jim Ferris	Burnham, Fitzpatrick & Milford

Date (mm/dd/yyyy)	Work Instruction or Standard and Clause Number
7/28/2010	3.1 Forest Operations

☐Major X Minor	Other Documents (if applicable)	Responsible Manager(s) (Person identified by the internal audit team who implements the corrective action): Lake Huron Basin Fisheries Biologist, Ausable

Requirement of Audited Standard/ Work Instruction:
Operations Review: "Completion of operations will also be documented in a form available to the approving divisions (the Forest Treatment Completion Report may be used for this purpose).

Observed Nonconformity:
FTP F72-596 Activity was completed in 2008 and yet no FTP Completion Report was prepared.

Root Cause Analysis (Describe the cause of the problem): Prepared by and date: Dave Borgeson, 10/13/2010

Lack of timely follow-through, and lack of a process to ensure timely follow-through after projects are completed, resulted in the delay.

Corrective Action – (To be completed by the Unit and relevant Divisions): Prepared by and date: Dave Borgeson, Northern Lake Huron Unit Manager, Oct 13, 2010

The completion report for this FTP will be prepared by Steve Sendek, and a copy will be sent to the FMD Unit Manager. Future completion reports will be routinely prepared within two months of project completion, with a spreadsheet prepared so status of all FTPs may be tracked to prevent oversight.

Proposed Completion Date (mm/dd/yyyy): 11/12/10

Responsible Manager (RM): Steven Sendek, Fisheries Biologist

Responsible Manager (RM): David Borgeson

RM Signature *David J. Borgeson* Date **10/13/2010**

Susan Thiel		10-14-2010	Dayle Garlock 10-15-10		
FMD Unit Manager	Signature	Date	FMD Dist Supervisor	Signature	

CORRECTIVE ACTION PLAN ACCEPTED

Forest Cert Specialist: Dennis Nezich

Date 10-15-10

Actual Completion Date (mm/dd/yyyy):

Responsible Manager:

Date:

Verified by:			Closed by:		
Responsible Mgr Supervisor	Signature	Date	FMD FC Specialist	Signature	Date

Follow Up Comments

Michigan Department of Natural Resources and Environment - Forest Management Division

2010 INTERNAL AUDIT
NON CONFORMANCE REPORT

Unit Name	Site location	Non Conformance Report Number 72-2010-05
Grayling	Pull Site, Compartment 282	

Lead Auditor	Team Member(s)
Jim Ferris	Burnham, Fitzpatrick & Milford

Date (mm/dd/yyyy)	Work Instruction or Standard and Clause Number
7/28/2010	3.1 Forest Operations

☐Major X Minor	Other Documents (if applicable)	Responsible Manager(s) (Person identified by the internal audit team who implements the corrective action): Mio WLD Habitat Biologist

Requirement of Audited Standard/ Work Instruction:
Operations Review & Intrusive Activities Review and Approval Process. Operations Review: "FMFM, Fisheries and Wildlife Divisions will review and approve all intrusive operations performed or permitted by any DNR division on State Forest lands at appropriate level(s) , and these approvals will be documented. Completion of operations will also be documented in a form available to the approving divisions (the Forest Treatment Completion Report may be used for this purpose).

Observed Nonconformity:
Pull Site in Compartment 282 stands 401 and 402, stands were recently managed for opening maintenance with no current FTP or completion report. (Original FTP was generated by FD in 2002 and only covers pull site and restoration.)

Root Cause Analysis (Describe the cause of the problem): Prepared by and date: Elaine Carlson 09/01/10

Openings maintenance work is performed on an annual basis and is discussed within the compartment review process. However, FTPs are not being generated and circulated for all of our opening maintenance sites, especially those worked out of year of entry.

Corrective Action – (To be completed by the Unit and relevant Divisions): Prepared by and date: Susan Thiel 8/19/10

FTPs for all new WLD projects will be prepared and circulated for appropriate approvals. The Wildlife Biologist and Wildlife Technician will work with the FMD Unit Manager to identify areas that are lacking FTPs and get these FTPs prepared.

Proposed Completion Date (mm/dd/yyyy): Immediate for new projects, by March 1, 2011 for past projects.

Responsible Manager (RM): Elaine Carlson, Wildlife Biologist and George Kerschenheiter, Wildlife Technician

RM Signature *Elaine Carlson* Date 10-15-10

Susan Thiel		10-14-2010	Dayle Garlock 10-15-10	
FMD Unit Manager	Signature	Date	FMD Dist Supervisor	Signature

CORRECTIVE ACTION PLAN ACCEPTED

Forest Cert Specialist: Dennis Nezich

Date 10-15-10

Actual Completion Date (mm/dd/yyyy):

Responsible Manager:

Date:

Verified by:			Closed by:		
Responsible Mgr Supervisor	Signature	Date	FMD FC Specialist	Signature	Date

Follow Up Comments

Michigan Department of Natural Resources and Environment - Forest Management Division

2010 INTERNAL AUDIT
NON CONFORMANCE REPORT

Unit Name	Site location	Non Conformance Report Number 72-2010-06
Grayling	Hill Country Mix Sale 72-019-09-01	

Lead Auditor	Team Member(s)
James Ferris	Steve Milford, Bob Burnham, Kerry Fitzpatrick
Date (mm/dd/yyyy) 07/28/2010	Work Instruction or Standard and Clause Number 7.1 Timber Sale Preparation and Administration Procedures
☐Major ☒Minor	Other Documents (if applicable) / Responsible Manager(s) (Person identified by the internal audit team who implements the corrective action): Grayling FMD Unit Manager

Requirement of Audited Standard/ Work Instruction:
WI 7.1 states, "DNRE encourages safe working conditions and safety training for contractors and stumpage purchasers within the scope of our legal responsibility and authority. "

Observed Nonconformity:
Loggers were not wearing hardhats while working outside of the equipment.

Root Cause Analysis (Describe the cause of the problem): Prepared by and date: Susan Thiel 8/19/10

Loggers were seen not wearing safety gear at all times while outside of equipment. Staff advise loggers of the safety requirements at the pre-sale conference and have reported if they see a minor violation, the operator immediately remedies it (typically has hard hat off and puts it back on). Staff have reported some confusion about the ability to enforce safety gear requirements for operators who do not have employees (partnerships) or are subcontractors, as we have been advised they are not governed by MIOSHA regulations.

Corrective Action – (To be completed by the Unit and relevant Divisions): Prepared by and date: 8/19/10

PPE safety gear requirements will be enforced for all timber sale contractors and their employees and staff will follow documentation and reporting guidelines as outlined by the work instruction. We will seek clarification on how PPE requirements apply to partnerships and subcontractors and operators who are not governed by MIOSHA safety standards. Once clarification is provided, we will enforce per the clarification and work instructions.

Proposed Completion Date (mm/dd/yyyy): September 8, 2010 – Unit meeting date for reinforcement. Clarification will take longer.

Responsible Manager (RM): Susan Thiel

RM Signature *Susan J Thiel* Date 8/19/10

Susan Thiel	10-14-2010	Dayle Garlock 10-15-10	
FMD Unit Manager	Signature Date	FMD Dist Supervisor	Signature

CORRECTIVE ACTION PLAN ACCEPTED

Forest Cert Specialist: Dennis Nezich

Date 10-15-10

Actual Completion Date (mm/dd/yyyy):

Responsible Manager:

Date:

Verified by:		Closed by:	
Responsible Mgr Supervisor	Signature Date	FMD FC Specialist	Signature Date

Follow Up Comments

Michigan Department of Natural Resources and Environment - Forest Management Division

2010 INTERNAL AUDIT
NON CONFORMANCE REPORT

Unit Name	Site location	Non Conformance Report Number 72-2010-07
Grayling	Multiple	

Lead Auditor	Team Member(s)
James Ferris	Steve Milford, Bob Burnham, Kerry Fitzpatrick

Date (mm/dd/yyyy)	Work Instruction or Standard and Clause Number
07/28/2010	7.1 Timber Sale Preparation and Administration Procedures

☐Major ☒Minor	Other Documents (if applicable)	Responsible Manager(s) (Person identified by the internal audit team who implements the corrective action): FMD and WLD Field Coordinators.

Requirement of Audited Standard/ Work Instruction:
Timber Sale Contract Inspection Process. Personal protective equipment must be properly used by all personnel, including DNRE staff on State timber sales with open contracts after any on-the -ground work has started.

Observed Nonconformity:
Staff was observed wearing improper footwear, no eye protection, and no hardhats on active logging sites. Staff involved included district and unit staff from FMD and WLD.

Root Cause Analysis (Describe the cause of the problem): Prepared by and date: Susan Thiel 8/19/10

Lack of concern over following policy. All staff involved should have been aware of the need for wearing safety equipment on open sale sites.

Corrective Action – (To be completed by the Unit and relevant Divisions): Prepared by and date: William O'Neill, 10/14/10

Field Coordinators for Wildlife and Forest Management Divisions will send an email message to all employees involved in the Grayling Audit, reinforcing the importance of wearing <u>all required protective gear</u> when visiting open timber sales.

Proposed Completion Date (mm/dd/yyyy): 10/20/10

Responsible Manager (RM): Susan Thiel & William O'Neill

RM Signature *Susan J Thiel* Date 10/14/10

Susan Thiel		10-14-2010	Dayle Garlock		10-15-10
FMD Unit Manager	Signature	Date	FMD Dist Supervisor	Signature	

CORRECTIVE ACTION PLAN ACCEPTED

Forest Cert Specialist: Dennis Nezich

Date 10-15-10

Actual Completion Date (mm/dd/yyyy):

Responsible Manager:

Date:

Verified by:			Closed by:		
Responsible Mgr Supervisor	Signature	Date	FMD FC Specialist	Signature	Date

Follow Up Comments

Michigan Department of Natural Resources and Environment - Forest Management Division

2010 INTERNAL AUDIT
NON CONFORMANCE REPORT

Unit Name	Site location	Non Conformance Report Number 72-2010-08
Grayling	Multiple	

Lead Auditor	Team Member(s)
James Ferris	Steve Milford, Bob Burnham, Kerry Fitzpatrick

Date (mm/dd/yyyy)	Work Instruction or Standard and Clause Number
07/28/2010	7.2 Legal Compliance and Administration of Contracts

	Other Documents (if applicable)	Responsible Manager(s) (Person identified by the internal audit team who implements the corrective action):
☐Major ☒Minor		Mineral and Land Management Section Manager.

Requirement of Audited Standard/ Work Instruction:
Legal Requirements-Illegal activities are to be reported by employees who observe them to the local unit manager at the earliest possible opportunity.

Observed Nonconformity:
Staff are aware of memorials on state land that are not being reported or addressed.

Root Cause Analysis (Describe the cause of the problem): Prepared by and date: Thomas Wellman 10/14/10

Memorials on state land have been increasing in frequency. Memorials are typically not a safety concern and are typically low in the priority of trespasses needing resolution.

Corrective Action – (To be completed by the Unit and relevant Divisions): Prepared by and date: Thomas Wellman 10/14/10

Current trespass procedure calls for them to be entered into the trespass database and where needed, notification to the Trespass Specialist. These sites are prioritized and responded to on a priority basis. Frequently these may be controversial to remove due to the sensitive nature of them. Press releases have been developed to educate the public and staff of the concerns posed by memorials and alternate methods whereby individuals may receive recognition for donations made to DNRE programs. Any memorials found to cause a safety issue are removed in a timely fashion. Major trespasses are followed up on using established policy and procedures.

Proposed Completion Date (10/1/10)

Responsible Manager (RM): Thomas Wellman

RM Signature Date 10/14/2010

Susan Thiel		10-14-2010	Dayle Garlock 10-15-10		
FMD Unit Manager	Signature	Date	FMD Dist Supervisor	Signature	

CORRECTIVE ACTION PLAN ACCEPTED

Forest Cert Specialist: Dennis Nezich

Date 10-15-10

Actual Completion Date (mm/dd/yyyy):

Responsible Manager:

Date:

Verified by:			Closed by:		
Responsible Mgr Supervisor	Signature	Date	FMD FC Specialist	Signature	Date

Follow Up Comments

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 FMD 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 FMD District Supervisor with copy to FC Specialist and Lead Auditor.
5. The FMD District Supervisor will review, support, and date the NCRs. The FMD 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, FMD Management Team, FMD District Supervisors, all FMU Managers, and representatives from other Divisions, as identified by the FCIT Division representatives.
8. Corrective Actions will be cleared via notification by the responsible manager that corrective actions are complete and via verification by the responsible manager's supervisor.
9. The forest certification specialist shall track open NCRs to confirm that all are followed through to completion.