

MINUTES OF MEETING **7th JA-BHCV SUBGROUP MEETING (VIRTUAL)**

Date : 06 February 2024 (Tuesday) 4:00pm to 6:00pm (MYT)

<p><u>Attendance:</u></p> <p><u>Subgroup members (JA)</u></p> <ol style="list-style-type: none"> 1. Marcus Colchester (FPP) 2. Silvia Irawan (Kaleka) 3. Rob Nicholls (Musim Mas) 4. Sander van den Ende (SIPEF) <p><u>Subgroup members (BHCV)</u></p> <ol style="list-style-type: none"> 5. Michelle Desilets (Orangutan Land Trust) 6. Lim Sian Choo (Bumitama) 7. Eleanor Spencer (Zoological Society London) <p><u>RSPO Secretariat</u></p> <ol style="list-style-type: none"> 8. Daniel Liew 9. Lydia Tan 10. Francisco Naranjo <p><u>Invitees</u></p> <ol style="list-style-type: none"> 11. Neville Kemp (HCVN) 12. Rifat Aldina (HCVN) 	<p><u>Absent with Apologies</u></p> <ol style="list-style-type: none"> 1. Lee Kuan Chun (P&G) 2. Max Donysius (WWF Malaysia)
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Agenda

7th JA-BHCV subgroup meeting
Date - 06 February 2024, Tuesday
Venue - Video-conferencing

Item	Time (MYT)	Duration (minutes)	Agenda	P.I.C
1 - Subgroup admin matters	1600 - 1605	5	1.1 - Opening and admin matters	Daniel
2 - HCVN Jurisdictional HCV-HCS tool	1605 - 1620	15	2.1 - Proposed process flow (Jan24) - jurisdictional HCV-HCS tool	
	1620 - 1720	60	2.2 - Discussion - applicability, technical challenges	
	1720 - 1725	5	2.3 - Decision to proceed ?	
3 - Others	1725 - 1730	5	3.1 - Any other business	

Minutes of Meeting:

Item	Description	Action
1	<p>Opening and admin matters</p> <p>The meeting started at 4:03 pm Malaysian time. The Secretariat explained that the meeting is to try get consensus from members for consultant to continue development of the jurisdictional HCV-HCS tool.</p> <p>The Secretariat ran through the RSPO anti-trust guidelines and Chatham House Rules. With there being no conflict of interests declared by members, the meeting continued.</p> <p>The Secretariat shared the minutes of the 5th meeting in October 2023, which was revised based on member's feedback to avoid confusion regarding the proposed process flow. The revised minutes was adopted by subgroup members.</p> <p>The minutes of the 6th meeting in November 2023 was also shared with members and was adopted without any further feedback and comment.</p> <p>The Secretariat introduced the interim person overseeing the work of JA, after the recent departure of unit head. Subgroup members were also informed that the Secretariat has appointed the current head of IMEL unit, as the new Standards Director as of February 2024.</p>	
2.1	<p>Proposed process flow (Jan24 draft)</p> <p>The Secretariat recapped concerns raised regarding the Nov23 draft of the process flow :</p> <ul style="list-style-type: none"> • The complexity of the proposed process flow • The practicality in terms of time and costs, especially for smallholders. The concerns also touched on financing of the assessment process, whether it should be the responsibility of the government unit or private sector. • The product of applying the manual and how it fit into the RSPO processes. <p>The Secretariat has prepared a revised process flow (Jan24) based on the above feedback, summarised as follows :</p> <p>JE to conduct jurisdictional screening for HCV1-6 and HCS Based on quality evaluated screening data, JE to conduct targeted field validation of HCV1-6 and HCS. If JE lacks the resources and / or is unable to field-validate at jurisdictional level all HCVs and HCS, then it should at least focus on HCV1-3 and HCS. Field validation for HCV4-6 would then be conducted at management unit level, but it would not yet be the jurisdictional map.</p>	

<p>2.2 Discussion – applicability, technical challenges</p>	<p>To a question by member, the Secretariat explained that JE should conduct the field validation of all HCV1-6 and HCS, if they have the resources and commitment to do so. If they don't, then field validation should be allowed at management unit level to not delay any development plan that individual members of the JE might have.</p> <p>The Secretariat also emphasised that in the above scenario, the certification that results would remain at management unit level until the JE is able to provide maps of HCV4-6 at a jurisdictional level.</p> <p>The Secretariat presented the diagram of the process where all HCVs and HCS assessment is conducted by JE at jurisdictional level. It also highlighted that the involvement of the proposed process stops when field validated HCVs and HCS maps have been quality evaluated. Subsequent processes leading to jurisdictional certification should be under the government units and JE.</p> <p>Diagram for the other scenario where the assessment process is divided between JE and management unit as discussed above was also presented to the members. For this, a member pointed out that individual members of the JE who wish to proceed with management unit assessment of HCV4-6 would need to be RSPO member first before doing so.</p> <p>Although not an ideal scenario, the Secretariat pointed out that there are still costs and time saving, albeit somewhat limited, by having HCV1-3 assessment conducted at jurisdictional level.</p> <p>Once the JE has worked out the financing and resources issues, it should provide the jurisdictional connectivity of management unit maps and proceed with jurisdictional certification as originally intended.</p> <p>A member voiced concern regarding possibility of sacrificing proper HCV assessment in the proposed tool, while recognising the need for a different way of doing things when the scale is jurisdictional. The Secretariat added that field work would still be required and assessment would not be entirely based on maps.</p> <p>Regarding the two different scenarios of HCV-HCS assessments, it was pointed out that maintaining comparable quality between the two methods is very important.</p> <p>The consultant pointed out that “full assessment” is not a prescribed approach to doing survey in the field but is rather trying to answer the question if enough has been done to properly document where HCVs and HCS are. He added that the HCV-HCS priority setting process by way of secondary data (maps) for a jurisdiction is similar to a scoping process at concession level.</p>	<p>Secretariat to update the diagram.</p>
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<p>The proposed tool does not rule out full assessment, which is still needed for areas with high priority (high risks and high probability). But for areas with lower priority and / or good quality data, lower level of effort in participatory field validation work by relevant experts is acceptable.</p> <p>The screening process which give us the priority levels of areas within a jurisdiction helps with the decision on where time and resources should be invested in. Wall-to-wall assessment of the entire jurisdiction would take too long and risks losing the HCVs and HCS by the time assessment is completed. Screening and subsequent field validation help jurisdictions to act fast to get monitoring and management in place to protect the forests and biodiversity.</p> <p>A member mentioned that the HCV-HCS assessment is a big challenge to independent smallholders and would like to see how the rapid assessment tool that is currently being applied by smallholders can be integrated into the development of the jurisdictional HCV-HCS tool. Another challenge is how the HCV-HCS information is communicated down by the JE to the many smallholders of a jurisdiction.</p> <p>While members were generally agreeable that screening is a good idea in identifying where to focus efforts in field validation, there were questions asked about how screening data quality is decided and who pays for the screening exercise.</p> <p>The consultant explained that it has been included in the draft how quality evaluation for screening data is to be conducted – the timing, implementer and format. The consultant preferred midterm / milestone format, with their direct involvement either in the actual process or at least in the training of implementer. And on-site format is preferred, meaning with consultants in the field with the JE so that they understand how screening can be useful for the jurisdiction.</p> <p>As for the second level of quality assurance for the field validated HCV-HCS data, the consultant pointed out that it is not part of the current project.</p> <p>Regarding the point of deciding “good enough” quality of the screening data, the consultant proposed that it should be HCVN and HCSA and other options of implementer like technical experts from HCVN/HCSA, JE personnel trained by HCVN etc. Also included in the proposal is a data quality assessment which documents the data collection process.</p> <p>The Secretariat added that the jurisdictional screening work should be contracted by the JE and how JE finances the work is beyond the scope of this project.</p> <p>A member brought up the need to incentivise growers and smallholders to join the JE. The Secretariat explained that while the ideal scenario is where JE would develop a jurisdictional map covering all HCVs and HCS, but some JEs could be constrained by resources. In that case, the manual is proposing that JE should at least provide jurisdictional data for HCV1-3 and HCS that</p>	
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	<p>could be used in conjunction with HCV4-6 data at concession level, should growers decide proceed first with management unit certification.</p> <p>There are other issues that need to be addressed by the proposed manual, such as how it relates to the New Planting Procedures (NPP), or how the NPP would need to be revised to accommodate this jurisdictional process.</p> <p>The Secretariat asked if the proposed manual would give options to jurisdictions to apply one of the two scenarios as depicted in the diagrams i.e. (i) <u>JE covers HCV1-6 and HCS</u> or (ii) <u>HCV1-3 and HCS at jurisdictional level and HCV4-6 at management unit level</u>. HCVN acknowledged that all jurisdictions are different and confirmed that options would be written into the proposed manual.</p> <p>In scenario (i), a member felt that the targeted field validation as indicated in the diagram is not ground level full assessment and does not give sufficient assurance that production could be allowed. The consultant explained that the targeted field validation is indeed proper ground work where it is needed. The resulting maps are not indicative but proper rigorous HCV maps.</p> <p>The consultant added that the focus of the work, instead of activities, should be on results i.e. on what is required to make decision. He added that field validation does not mean just checking. In areas of high priority, full assessment would be required.</p> <p>However, there are areas in the jurisdiction with lower priority that does not require the rigor of a full assessment where a simplified approach (like the one for independent smallholders), rapid HCV-HCS assessment, consultation etc should be allowed.</p> <p>Another aspect to be included after developing the HCV-HCS maps is the management and monitoring recommendations which forms an integral part of the HCV Approach.</p> <p>The consultant further emphasised that the assessment results must meet a certain standard such as the ALS. Where risks are lower, the level of effort in getting results up to that standards should be lower, as compared to areas where risks are high.</p> <p>A member shared that he is still not convinced that full assessment could be performed at jurisdictional level nor that it would be sufficiently rigorous to prevent conflict palm oil. To this, the consultant clarified that targeted field validation does not mean high level nor based on sampling and reiterated that the level of work required for assessment is dependent on the priority level.</p>	
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2.3	<p>Decision to proceed ?</p> <p>5 of the 7 subgroup members present in the meeting have provisionally agreed to let HCVN to continue detailed drafting of the manual. It was also made clear that questions raised during today's and previous meetings (effort of full assessment, NPP etc) must be addressed by in the manual and further discussed when the detailed draft is ready.</p> <p>For members who still need further clarifications, separate sessions would be arranged for direct discussions with the consultant, interested members and the Secretariat.</p> <p>The meeting ended at 6:08 pm MYT.</p> <p><u>Additional note on the decision process</u></p> <p>A separate discussion was held on 14 Feb to address remaining concerns that some members still have regarding decision to continue development of the 2nd draft.</p> <p>Summary of the discussion is as follow :</p> <ul style="list-style-type: none"> i. The assessment of low risk areas within jurisdiction, whether it is by way of targeted validation or existing management unit level full assessment, is to be further discussed and agreed upon by the JA-BHCV subgroup when the second draft is submitted by HCVN. ii. The emphasis of the tool should be on the quality of the results (maps) and not so much on process (whether full assessment has been done or not) iii. Despite JE being the main implementer of jurisdictional HCV-HCS assessment, the manual should stress the importance of getting growers' involvement in the process. iv. The possibility of creating a double standard situation between management unit and jurisdictional level processes needs to be explicitly discussed and addressed. v. HCV assessment should identify all 6 HCVs. <p>With the above, consensus has been obtained from all members who were present in the subgroup meeting on 06 Feb.</p> <p>Two members who were absent during the subgroup meeting on 06 Feb provided their agreement for the development to continue via email on 23 and 27 Feb, respectively.</p>	