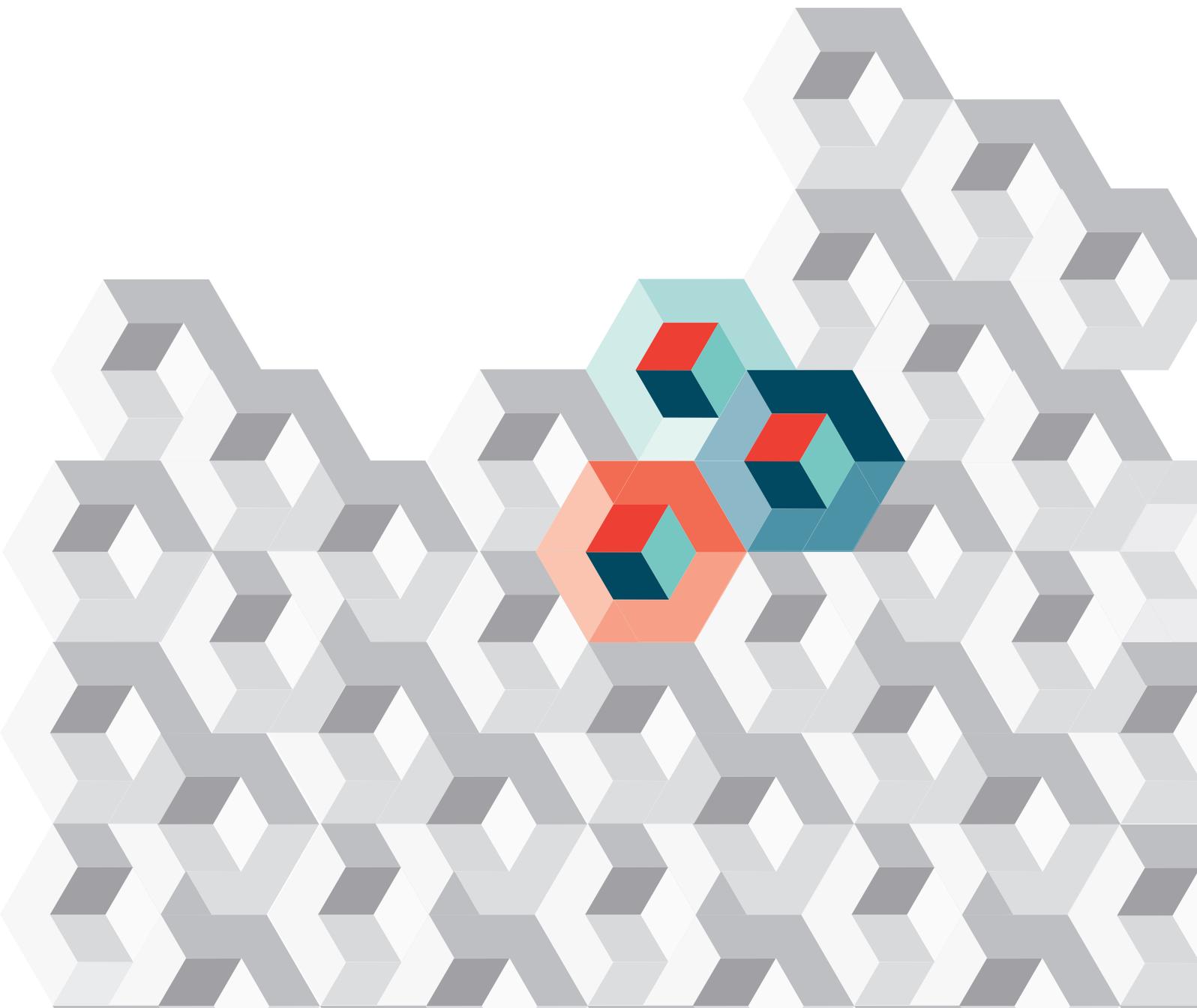


HCV Assessment

Manual



This HCV Assessment Manual was prepared by Proforest for the HCV Resource Network Assessor Licensing Scheme. For enquiries and feedback on the use of this manual and supporting documents please contact:

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For manual updates and information on the HCV Resource Network HCV Assessor Licensing Scheme visit:

<https://www.hcvnetwork.org/als/>

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Who is this manual for?

HCV Resource Network licensed assessors

This manual is intended to serve as a reference document for licensed assessors during all steps of a High Conservation Value (HCV) assessment (see [Figure 1](#)) and is designed to be used along with other supporting documents (see [Table 1](#)).

The [HCV Assessment Manual](#), along with the [HCV Report Template](#) aim to ensure that HCV assessment reports are well-structured and of a consistent format. This will facilitate evaluation of reports by peer reviewers and the Quality Panel of the Assessor Licensing Scheme (ALS). Additionally, other interested parties (organisations which commission HCV assessments and other interested stakeholders) should find HCV reports and public summaries to be clearly presented and more consistent in structure and content.

How to use this manual

This manual guides the HCV assessor through the different recommendations and requirements for the execution of an HCV assessment as part of the ALS. The content of this manual and supporting documents are aligned with the evaluation criteria of the ALS Quality Panel. [Figure 1](#) provides a schematic overview of the HCV assessment process and serves as a guiding structure for the manual.

The following icons are used throughout the manual to remind assessors when desk-based study, field work, and stakeholder consultation is likely to be needed.

Desk-based study

This icon illustrates that the activity can likely be accomplished remotely. This can include research, reading, analysis and communication (email, phone, etc.).



Field work

This icon illustrates the need for field visits and collection of field-based information. This is relevant for the scoping study and during field studies in the HCV identification step of the assessment phase.



Stakeholder consultation

This icon illustrates the need for various levels of stakeholder consultation that are needed throughout the assessment process, from the initial information exchange to the final HCV designation step.



Supporting documents

The following documents are designed for use with the HCV Assessment Manual. Check the **ALS website** (<http://www.hcvnetwork.org/als>) regularly for current versions of all documents. Licensed assessors will also be informed of any changes and updates to these documents via email.

Document title	Recommended or Required
Terms and Conditions	Required: all licensed assessors must agree to the Terms and Conditions which include details on confidentiality and conduct
Common Guidance for HCV Identification and Common Guidance for HCV Management and Monitoring	Recommended: Read, use and reference Common Guidance for HCV Identification (https://www.hcvnetwork.org/resources/cg-identification-sep-2014-english) Common Guidance for HCV Management and Monitoring (https://www.hcvnetwork.org/resources/cg-management-and-monitoring-2014-english)
Planning checklist	Recommended for use
Information needs checklist	Recommended for use
HCV Assessment Manual	Required: The manual (present document) outlines both guidance and compulsory information and must be used as a reference document by licensed assessors
Public summary template	Required: Public summary report must be submitted with the final HCV assessment report
Peer review template	Required: Peer review reports must follow this template and be done for all Tier 1 HCV assessments
HCV assessment report template	Required: Assessors must use this template for all HCV assessment reports submitted to the ALS ¹
Cover sheet for non-standard HCV assessment reports	This form is only Required if the assessment report is submitted in a format other than the standard HCVRN report format. See the cover sheet for details on when this can be accepted.

Table 1 Supporting documents for use with the HCV Assessment Manual

¹ In some cases, different formats may be used for the HCV assessment report, but this must be approved by the HCVRN.

HCV definitions and their interpretation

As a licensed assessor, you agree to abide by the HCV Resource Network (HCVRN) Charter and the policies and procedures of the Assessor Licensing Scheme (ALS). It is therefore fundamental that all licensed assessors share a common understanding of the HCV definitions, their interpretation in practice and the overall HCV approach. In order for HCV assessments to be consistent and comparable across commodities and regions, everyone needs to use the same HCV definitions. The HCVRN's globally valid definitions are those of the FSC Principles & Criteria (P&C) v.5, 2012. While these brief definitions express intents, the language often needs national or regional interpretation. A number of countries have developed, or are in the process of developing national toolkits where the HCV definitions are interpreted and explained in ways that make it easier to identify, manage and monitor HCVs in the national context. However, some of these toolkits predate the latest revision of the HCV definitions (2012) and, while this in itself does not make them any less valuable and useful, assessors should always cross-check and ensure that their assessments reflect the updated definitions adopted by the HCV Resource Network.

An HCV is a biological, ecological, social or cultural value of outstanding significance or critical importance. The six categories of HCVs are:

Box 1: HCV definitions from FSC P&C v5, 2012 and HCV Resource Network 2013

HCV 2 Landscape-level ecosystems and mosaics

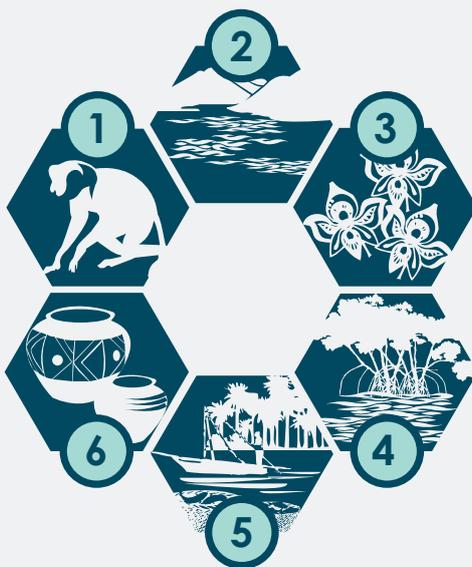
Large landscape-level ecosystems and ecosystem mosaics that are significant at global, regional or national levels, and that contain viable populations of the great majority of the naturally occurring species in natural patterns of distribution and abundance.

HCV 1 Species diversity

Concentrations of biological diversity including endemic species, and rare, threatened or endangered species (RTE), that are significant at global, regional or national levels.

HCV 6 Cultural values

Sites, resources, habitats and landscapes of global or national cultural, archaeological or historical significance, and/or of critical cultural, ecological, economic or religious/sacred importance for the traditional cultures of local communities or indigenous peoples, identified through engagement with these local communities or indigenous peoples.



HCV 3 Ecosystems and habitats

Rare, threatened, or endangered ecosystems (RTE), habitats or refugia.

HCV 4 Ecosystem services

Basic ecosystem services in critical situations, including protection of water catchments and control of erosion of vulnerable soils and slopes.

HCV 5 Community needs

Sites and resources fundamental for satisfying the basic necessities of local communities or indigenous peoples (for livelihoods, health, nutrition, water, etc.), identified through engagement with these communities or indigenous peoples.

The HCV assessment process

The HCV assessment process is divided into a pre-assessment phase and an assessment phase. In the pre-assessment phase, emphasis is placed on preliminary information gathering, planning and preparation to enable you to more efficiently and effectively carry out the assessment phase which includes detailed HCV assessment field work and analysis. Figure 1 illustrates the different steps and main activities involved in the HCV assessment process.

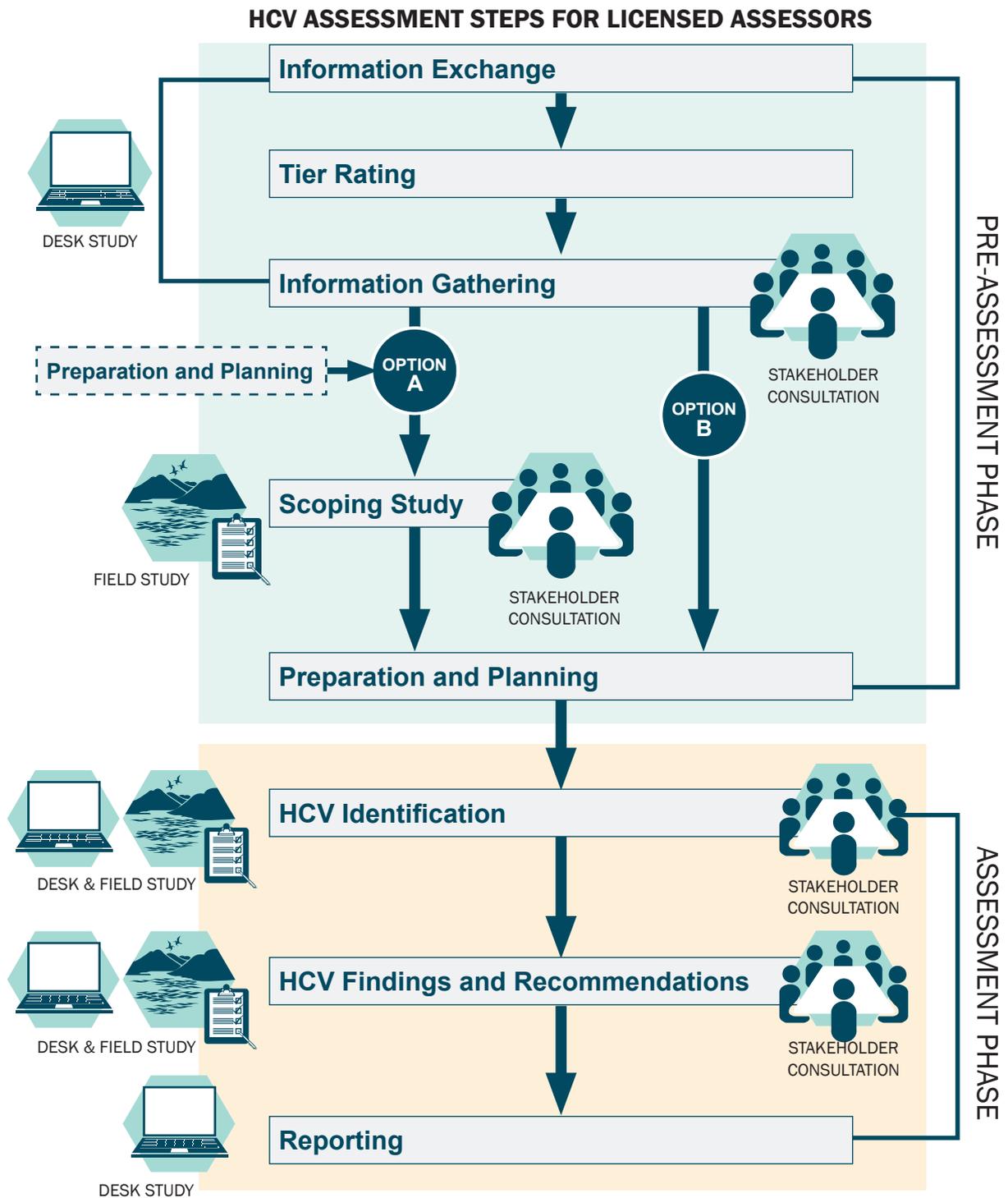
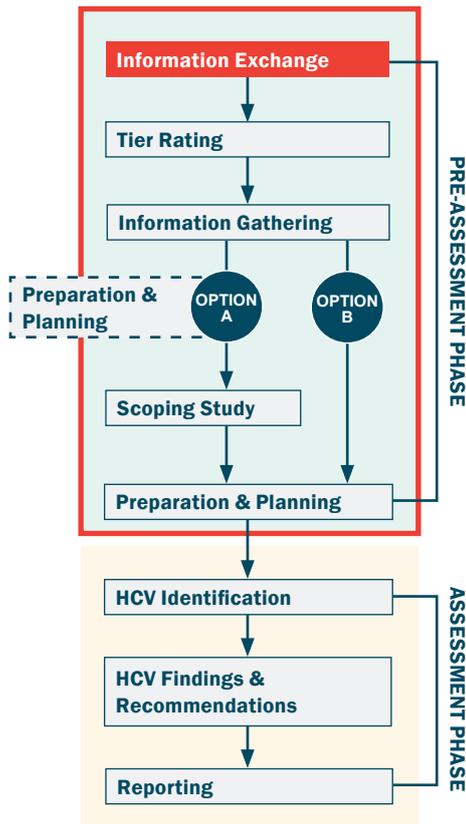


Figure 1: Illustration of the different steps of the HCV assessment process, divided into the pre-assessment and assessment phases. See text for an explanation of different steps and icons.

Pre-assessment phase

The pre-assessment phase is meant to prepare the assessment team for the full HCV assessment. It is a time for gathering information, identifying resources and data gaps, thoroughly preparing for field work and identifying stakeholders, to name some of the most important tasks. The pre-assessment phase helps assessors gain a clearer understanding of the situation and the potential HCVs present as well as to identify sources of data that can contribute to the identification of HCVs. Knowing what HCVs are likely to be present leads to decisions on what skills and experience are needed in an HCV assessment team, what supporting data is needed and who should be consulted during the assessment. HCV assessments must cover all six HCV categories or adequately justify why an HCV category is excluded from the assessment. **The pre-assessment phase begins with the initial request from the Organisation² commissioning the HCV assessment, and continues up to the point when the assessment team is ready to begin the full HCV assessment.**



You will see from Figure 1 that stakeholder consultation runs throughout the assessment process and is not necessarily a distinct step. The purpose of consultation during the early phase of the assessment is to inform stakeholders of the purpose of the assessment, gather information on the social and environmental situation in the assessment area, and identify concerns and recommendations regarding the assessment and potential HCVs. The assessor should start to compile a list of concerns relative to the site, operations, and the Organisation. This will help to prepare a shorter list of key issues, which can be investigated during the HCV assessment. Because documentation is required in the HCV assessment report, it is useful to begin documenting stakeholder consultation from the beginning (see Section 1.8.1 for details).

1.1 Information exchange

The first steps of the HCV assessment consist of desk-based activities that can generally be accomplished remotely. It can involve emails, phone calls, internet searches and literature review. This step can take anywhere from a few days to a few weeks depending on the information available and the assessor's level of familiarity with the country or assessment site. If there is abundant recent and reliable data available in the pre-assessment phase, it may be possible to conduct an HCV assessment with much less field time than when data is deficient.

1.1.1 Information request

When an HCV assessor is contacted with a request for an HCV assessment, they should start by compiling information on the following:

- What is known about the Organisation requesting the HCV assessment? (geographic scope of operations, reputation, existing commitments regarding environmental and social issues, target of any campaigns from NGOs and civil society?, etc.)

² We use Organisation (capital "o") to denote the organisation that has commissioned the HCV assessment.

Document ID	HCVRN_ALS_004
Date	23/09/2014

- Where is the assessment site located? (geographic coordinates, maps already available?)
- Area (ha) of planned operations (e.g. concession, plantation or management unit - MU)
- Current land cover / land use
- What is the intended future or current project or development? (e.g. forestry, plantation agriculture)
- What is the reason for the HCV assessment? (e.g. partial compliance for a certification scheme, company policy)
- Does the Organisation already have a permit to explore and/or operate? (permit boundaries – with geographic coordinates)
- Has the Organisation already begun communication with potentially affected stakeholders? (i.e. have the first stages of a process to seek Free Prior and Informed Consent, FPIC, begun?)

1.1.2 Communication with the Organisation

As a licensed assessor, it is important to ensure that the Organisation commissioning the HCV assessment has a clear understanding of the following:

- The purpose of the HCVRN ALS
- What it means to be an HCVRN licensed assessor (provisionally or fully-licensed)
- What it means if the assessment qualifies as Tier 1 vs. Tier 2
- That a public summary of the HCV report must be prepared and made available upon request

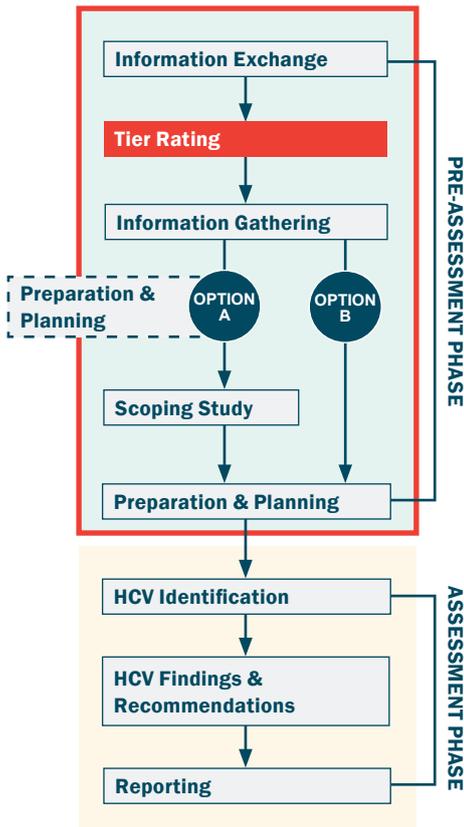
It may be useful to share the [ALS Briefing for Companies](#) with the Organisation.

Box 2: Complementary safeguards to be used with the HCV concept

In most cases, an HCV assessment can proceed in a given site, but there may be cases where doing an assessment would be contradictory to the HCVRN Charter.

For instance, land for forestry and agricultural development may be allocated with varying degrees of coordinated land use planning and due diligence. What this means in practice is that some governments may allocate concessions which could pose serious threats to biodiversity, habitats and/or local people. If it is clearly indicated from initial desk-based screening and/or a scoping study that an area is inappropriate for development, the HCV assessor should recommend against proceeding with the project and decline to conduct the full HCV assessment.

If the HCV assessment is being commissioned as part of a multi-stakeholder certification scheme (e.g. FSC, RSPO), it is assumed that the company will seek to respect all Principles and Criteria (P&C) in the standard. This would include requirements on legality, human rights and transparency.



1.2 Tier rating

One of the main objectives of the HCVRN ALS is to improve the quality of HCV assessment reports. In line with this, the ALS requires peer reviews in all cases where the HCV assessment is taking place under conditions of potentially higher risks and impacts to HCVs. **The process for determining whether or not your report will require a peer review is called Tier Rating.** There are two tiers in the system: Tier 1 and Tier 2. Tier 1 projects are those taking place in a context of potentially higher impact and risk, whereas Tier 2 projects can be considered a more “standard” level of impact and risk.

All licensed assessors (both provisional and full) are required to conduct a tier rating which considers various aspects of the scale, intensity and risk of the project or development requiring an HCV assessment. It should be possible to perform the tier rating during the desk-based information exchange step of the pre-assessment phase. However, it is possible that the tier rating could change based on something learned during a scoping study. **The key point is to ensure that a precautionary approach is taken to tier rating that does not underestimate potential impacts or risks that may be associated with the project or development.**

The tier rating must be reported to the HCVRN and will determine the fee associated with evaluation of the final assessment report. Tier 1 assessments incur a higher fee because the Quality Panel will need to read through the peer review report and confirmation letter and follow up when necessary, thus requiring more time per HCV assessment report for evaluation. For Tier 1, the assessor must engage a peer reviewer, from the list of approved peer reviewers on the ALS website, to conduct the required peer review. The peer review report and sign-off letter must be submitted to the Quality Panel as part of the evaluation process.

Responding “yes” to one or more of the following conditions in Table 2 qualifies the assessment as Tier 1.

Indicators of potential risks and impacts		Key questions: If the answer to one or more of the following is YES: The assessment is considered Tier 1 and a peer review is required
SCALE		
Scale of project: the overall area (ha) affected by production activities.	Will the operation cover or affect more than 50,000 ha	
INTENSITY		
Conversion of natural ecosystem or habitat: a change from the natural ecosystem or habitat composition and structure to forestry plantation, agriculture or other land cover/ land use.	Is conversion of more than 500 ha of natural ecosystem or habitat planned? Note: if more than one area is to be converted in the same region, consider the total area.	
RISK		
Experience level of HCV assessor: while an assessor holds a provisional licence, a peer review is required as an additional means of quality assurance.	Does the lead HCV assessor hold a provisional licence?	
Threats to biodiversity: production activities that may disturb or damage a national or international priority biodiversity area (e.g. protected areas, key biodiversity areas, intact forest landscapes).	Does the project area contain, border or overlap with any priority biodiversity areas?	
Local and indigenous people: populations of people that overlap and/or use resources in the project area.	Are there local or indigenous peoples living in or using the area that have claims to land, water and or natural resources in the project area?	
Within certification schemes, it is assumed that the various Principles and Criteria cover key issues for responsible production. HCV assessments are not meant to be used in isolation from other safeguards (e.g. legality). If used outside of a widely recognised certification scheme , there is a higher risk that complementary safeguards may be lacking.	Is the HCV assessment taking place <i>outside</i> of a recognised certification scheme?	

Table 2 Tier rating for HCV assessments. If any one of the following conditions is present, the assessment qualifies as Tier 1 and therefore requires a peer review.



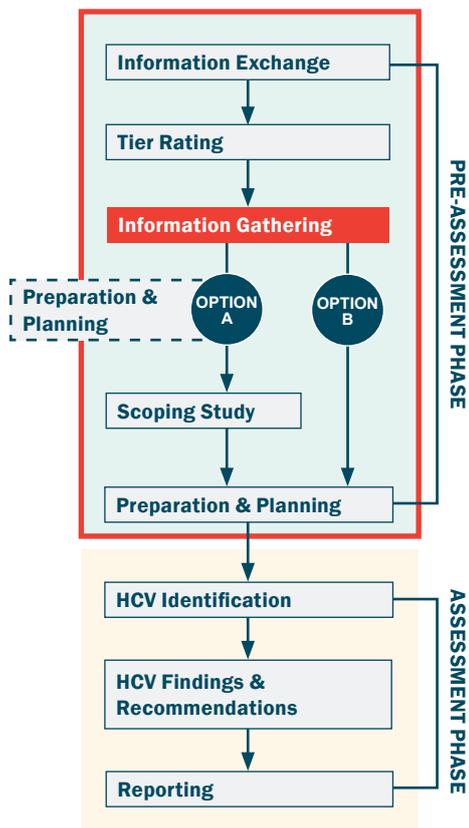
1.3 Information gathering

Desk-based work will now continue with more information gathering. The assessor must take stock of existing information and identify what gaps need to be filled during the scoping study (if applicable) and the HCV assessment. It will be useful to consult the **Information Needs Checklist** at this stage and to find out what information is available for the site, for instance:

- Has an Environmental and Social Impact Assessment (ESIA) already been conducted?
- Have any other studies already been conducted in the area? (by the Organisation or others, e.g. NGOs or researchers)
- Does the site overlap or border with protected areas or conservation priority areas?
- Are there local people living in the site and using natural resources there?
- What is the wider landscape context?

Based on the available information, is there a high likelihood (or even certainty) of HCVs being present?

A review of relevant data and regional guidance will be necessary, and consultation with national institutions, NGOs and experts may be needed. A preliminary judgement should be made on data quality and reliability, and then any gaps in the data should be filled during the full assessment either by further data collection (by the assessment team and/or specially commissioned studies) or consultation. Where uncertainty persists, assessors must use the precautionary approach.



Box 3: Precautionary Approach

The precautionary approach means that when there is a threat of severe or irreversible damage to the environment or a threat to human welfare, responsible parties need to take explicit and effective measures to prevent the damage and risks, even when the scientific information is incomplete or inconclusive, and when the vulnerability and sensitivity of values are uncertain. In the context of HCV identification, this means that when there are reasonable indications that an HCV is present, the assessor should assume that it is present (from FSC, based on Principle 15 of Rio Declaration on Environment and Development, 1992).

If an HCV assessment uncovers credible evidence that an HCV may exist (e.g. the suspected presence of a number of threatened species, as revealed by species distribution maps, expert opinion or anecdotal evidence provided by credible witnesses), the precautionary approach requires the assumption to be made that the value is actually present, until and unless further evidence can conclusively demonstrate its absence.

1.4 Key types of information



1.4.1 Biodiversity and environment context

Landscape level data needs to be gathered to determine potential biodiversity and ecosystem values, in order to place the site of interest within a national, regional or even global context. Some information pertaining to the occurrence of protected or rare species or ecosystems may be available remotely at this stage and can complement this analysis. Information may include land cover and ecosystem maps, lists of rare, threatened or endangered (RTE) species and species distributions, conservation priority maps, protected area information, and studies carried out in and around the area. Refer to the **Common Guidance for HCV Identification** for more recommendations on information sources. The assessor should identify reliable sources who need to be consulted about biodiversity and environmental values (e.g. flora and fauna specialists, ecologists, environmental NGOs).



1.4.2 Social context

Similarly, information on the human context should also be gathered during this early step. Useful sources of information include population census data, socioeconomic reports and social impact assessments (if available). See the **Common Guidance for HCV Identification** for more recommendations.

The assessor should identify people who need to be consulted about social values (e.g. different groups of local people, holders of specialist knowledge such as healers, and social NGOs). It is important to note that **participatory mapping is required whenever local people live in, and/or use resources in, the assessment area** (i.e. people have claims to land and resources within the HCV assessment area). Participatory mapping will take place later during the assessment phase, but it is important to begin engaging with local people at an early stage to gain their consent for mapping and to agree on a schedule and approach for the mapping activities.



1.4.3 What are the information gaps?

By using the **Common Guidance for HCV Identification** and the **Information Needs Checklist**, you can identify the main information gaps which must be addressed during the rest of the assessment. Information gaps will inform team composition and the requirements for field studies and consultations. Where the information available is insufficient to make informed decisions about the presence or absence of HCVs, further studies may be advisable, but if resources are not available for field studies, assessors (and managers) should use the precautionary approach (**Box 3**) to protect areas where HCVs are likely to exist.

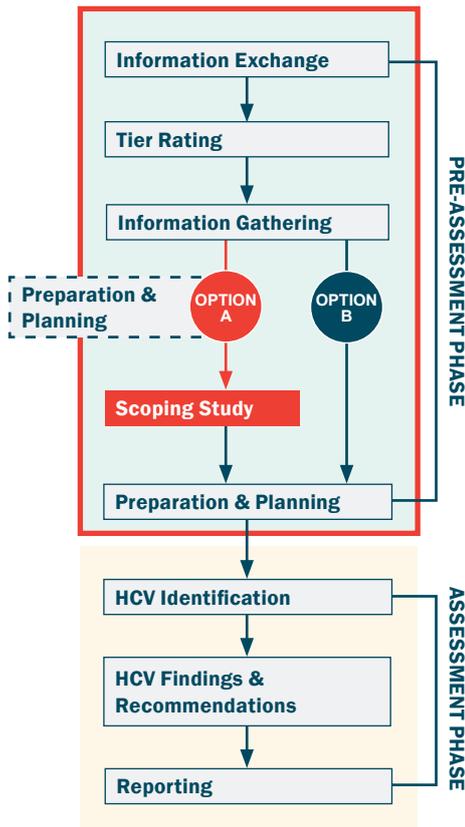


Figure 1 option A

1.5 Scoping study

A scoping study is a field exercise, the main objectives of which are to:

- begin verifying some of the information gathered during the desk-based work
- identify key issues that should be covered during the assessment phase
- make contact with stakeholders and local community representatives and plan for participatory work such as mapping
- determine the expertise required in the HCV assessment team and meet potential team members or consultants; this is especially important if social experts are needed (e.g. people who speak local languages, are familiar with the social context and are trusted by local people).

A scoping study can be conducted by one HCV expert (e.g. the lead assessor) with the help of other experts who could provide local knowledge and support. Additionally, logistical support should be sought from the Organisation when possible. A scoping study can generally be conducted in just a few days (three to five days) depending on the size and complexity of the assessment site. Depending on the location therefore, a scoping study can take about a week in total.

1.5.1 When is a scoping study required?

After the information gathering step, you will need to determine if a scoping study is necessary. A scoping study will always allow for better planning of the full assessment, both in terms of logistics and engagement of local stakeholders. However, a scoping study is not always feasible or absolutely necessary.

A scoping study is required (Figure 1 option A) if:

- The project is categorized as Tier 1 based on the initial desk-based screening
- Or, if the project is categorized as Tier 2, but:
 - The assessor is unfamiliar with the project site and does not have contacts for forming the full assessment team and/or
 - There is very little information available about the site in terms of maps, reports and studies and therefore a field visit is necessary

If a scoping study is required, it should be carefully planned in order to make the most of the time in the field. The following activities should be planned during the scoping study:

- Discussion with Organisation representatives
- Meet with a selection of relevant local and national stakeholders to introduce the purpose of the HCV assessment – this will set a good standard for later consultation at the time of the full assessment, and will enhance the level of transparency
- Obtain maps and studies that were not available during online



- research or through email
- Visit to site (e.g. MU, future plantation area) of the HCV assessment
 - Hold discussions with a sample of local communities potentially impacted by the planned operations
 - Do a transect or reconnaissance walk through part of the assessment area to characterise major vegetation classes and land forms

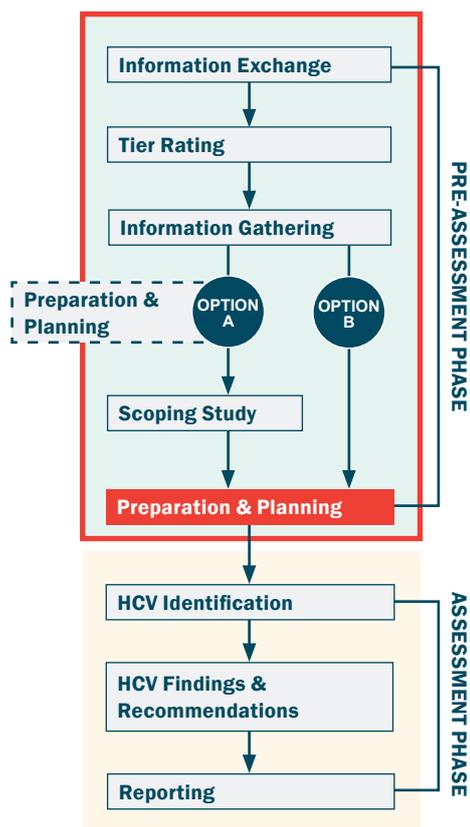
1.6 Preparation and planning

Preparation and planning are crucial to a well-executed HCV assessment. Assessors should refer to the **Planning Checklist** and consider all the relevant topics. A few of the checklist topics are discussed in more detail below:

1.6.1 Assessment calendar

The timing of the assessment will depend on a number of factors including:

- **Urgency of the assessment** – The Organisation may be keen for the assessment to be completed as soon as possible. This is especially true where an assessment is required in advance of any operations beginning. While efforts should be made to respond, time demands by the Organisation should not be allowed to undermine the quality of the team, the data, the consultation or the report.
- **Availability of team members** – it is often necessary to organise dates around the availability of the team leader or key team members.
- **Methods** – the choice of methods and the sampling intensity will affect the duration of the assessment.
- **Seasons** – it is important to consider factors such as the weather, as this can affect access to the site. If seasonal movements of species is important, field visits should be conducted in different seasons if possible. If time constraints do not allow adequate coverage of different seasons, this should be followed up in monitoring recommendations.
- **Terrain** – e.g. habitat assessment in hilly areas takes much longer than in floodplains, due to variety of habitats and difficulty of access.
- **Sociocultural considerations** – if possible avoid carrying out work around a major national holiday or religious events and be aware of any local traditions.



1.6.2 Forming the assessment team

The HCV assessment team should have sufficient skills and experience to assess all six HCV categories and to communicate appropriately with a range of stakeholders. See **Annex 1** for guidance on HCV Assessment Team terms of reference. The team leader must be a licensed assessor, possessing a good understanding of the HCV approach and assessment process. Depending on the assessment context, there may be a need for knowledge and expertise in e.g. botany,

ecology, hydrology, participatory mapping and socio-economics (including an understanding of local culture and language). It is also important to include expertise in landscape level conservation and GIS mapping – this is because maps are a key output of the assessment. Other team members, besides the leader, may also be licensed assessors, but this is not compulsory. HCVRN recognises that it may not always be feasible to assemble such teams of experts, especially in cases where human and financial resources are constrained. However, in this case, the assessor must invoke the precautionary approach (see Box 3) and recommend conservation of all potential HCV areas.

The main role of an HCV assessment team is to analyse all the available data (desk and field) and information from consultees and, based on this, identify:

- What HCVs are present and where
- What conditions are necessary to maintain those HCVs (e.g. habitat requirements of a certain species)
- The main threats to the HCVs
- What management and monitoring options may be used to maintain and/or enhance HCVs

The lead HCV assessor has overall responsibility for the assessment. The role requires:

- Identification of qualified HCV assessment team members
- Planning of field activities, consultation and surveys
- Overall coordination and oversight of the assessment
- Compilation, writing and delivery of the HCV report
- Coordination of peer review (if required)
- Submission of required documents and fees to HCVRN ALS
- Response to requests for public summaries

HCV assessment team members need to have sufficient competence within their specific subject area to contribute to the assessment as required, and the willingness and ability to work as a team under the direction of the lead assessor. **Good communication amongst assessment team members, land managers and other relevant stakeholders is necessary to ensure that the purpose of the HCV assessment is clear, and that access to key people and data can be secured.** HCV assessments require considerable time in data analysis and discussion, and team members need to have regular meetings to exchange information.

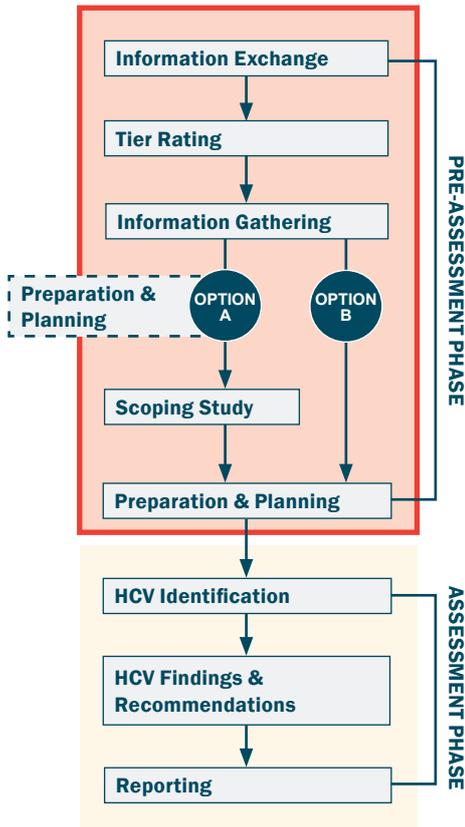
1.6.3 Methods and survey design

The lead assessor needs to coordinate the preparation of methods for collecting and analysing relevant data to support HCV identification. Data collection methods should be adapted to the site characteristics

and the information needs. The lead assessor has the responsibility of reviewing the final methods and ensuring their robustness, feasibility and adequacy. Planning work must be done in advance of fieldwork, and consideration should be given to who will be involved in the process (team members or separate specialists) and when it will be undertaken. Data collection activities must be included in the calendar and budget for the full assessment.

1.7 Closing the pre-assessment phase

By the end of the pre-assessment phase, the team should be ready to launch into the full HCV assessment. This means that, for example, the following should have been completed or prepared:



Box 4: Checklist for use at the end of the pre-assessment phase

- Desk-based background study
- Scoping study (if applicable)
- Assessment team is formed and ready
- Assessment calendar has been communicated to team members, Organisation, relevant experts and stakeholders
- All necessary logistical preparations (and budgetary implications) have been considered – **Planning Checklist**
- Methods and survey designs
- Basemaps are prepared and distributed to team members
- Stakeholders have been identified and contacted as relevant



Assessment phase

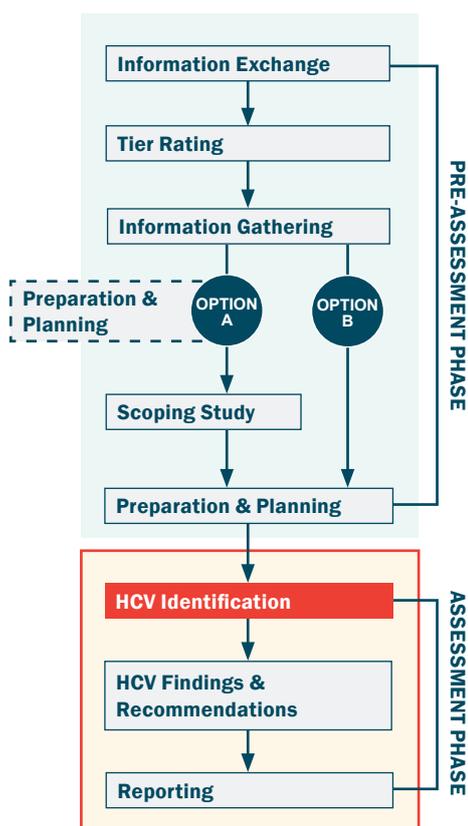
The findings from the pre-assessment phase, including scoping study results (where applicable) serve as a foundation for the rest of the data collection, analysis and consultation that will follow during the assessment phase.

1.8 HCV Identification

The identification step is likely to consist of field data collection, analysis, participatory mapping, consultation and regular assessment team discussions. The presence or absence of all six categories of HCVs must always be assessed in a way that is consistent with HCVRN guidance. If one or more HCVs are not addressed, there must be adequate justification for this (e.g. the HCV is absent beyond reasonable doubt).

The outcome of this step will be:

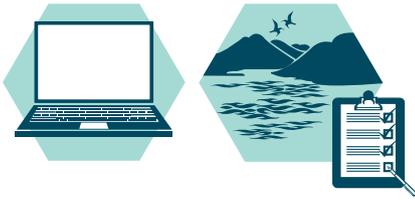
- A clear description for each of the six HCV categories that includes a decision on its presence, potential presence or absence.
- Justification of the decision why an HCV is present, potentially present or absent. This must include reference to supporting primary and secondary data, stakeholder consultation, etc. It is insufficient simply to declare “potential presence” of an HCV without providing an evaluation of the likelihood of presence and the limitations of current knowledge. If a value is deemed potentially present, the precautionary approach should be used, otherwise a detailed outline of what needs to be done to identify the HCV for certain is required.
- Map(s) of HCV locations. It is important that maps show the extent of each HCV both inside and outside the assessment area, where the HCV extends into the surrounding area.



Box 5: Reference documents for HCV assessments

In addition to the HCV Assessment Manual, it is recommended that you consult:

- HCVRN Common Guidance for HCV Identification
- HCVRN Common Guidance for HCV Management and Monitoring
- National HCV interpretation or toolkit if available: If a national HCV interpretation exists for the country where you are working, this should always be consulted and used for assessing potential HCVs. However, keep in mind that some HCV national interpretations are rather general, in draft form, have not been field tested and may be using outdated HCV definitions. The global HCV guidance and definitions take precedence over national interpretations. It is the responsibility of the assessor to obtain relevant toolkits; most national interpretations should be available on the HCV Resource Network website (<http://www.hcvnetwork.org/resources/global-hcv-toolkits>).
- Additional guidance or requirements of different standards: Different certification schemes may have different requirements with regards to HCV assessments and compliance. It is the responsibility of the assessor to be aware of how HCV is used in the standard and any special requirements.



1.9 HCV findings and recommendations

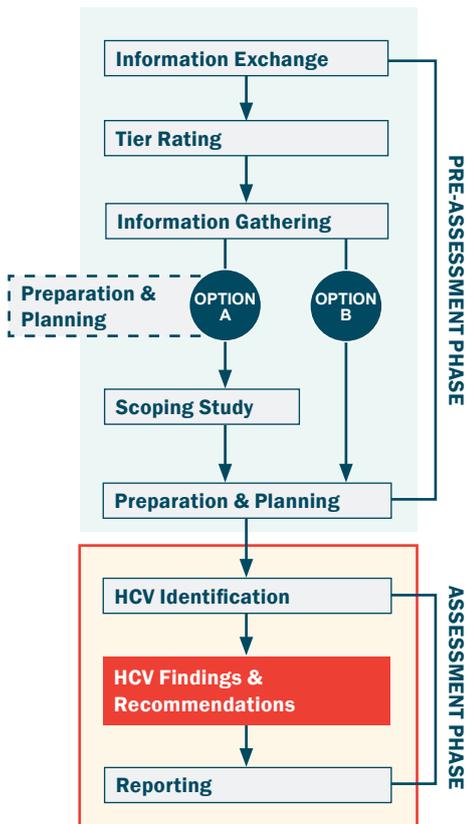
1.9.1 Project information and site description

- Description of the assessment area (name, location, size/area, nature of the development (e.g. forestry concession, oil palm plantation)), scale and intensity of operations;
- Map showing location of the HCV assessment area (management unit, plantation, concession, etc.) in the country.

1.9.2 Wider landscape

The key social and biological features of the wider landscape³ must be clearly described, including, but not limited to, information on:

- Boundaries of assessment landscape
- Land use surrounding the assessment area (e.g. settlements, forestry, agriculture, infrastructure)
- Demographic and socioeconomic context
- Presence and condition of protected areas in the landscape (does the assessment area provide a vital supporting function to a protected area?)
- Key Biodiversity Areas⁴ in the landscape
- Relevant national or regional land use plan
- Major landforms, watersheds and rivers
- History of land use and development trends, including future plans (e.g. spatial planning maps of the MU and surrounding landscape, development initiatives and existing/proposed commercial exploitation and production licences)
- Physical features (e.g. geology, climate (rainfall, temperature), soil types, topography)
- Biodiversity characteristics (e.g., biogeographic zone, known features of biodiversity concern, major ecosystems, land cover, biophysical data, etc.)
- Occurrence of known populations of species of global concern and migration corridors in the landscape
- Ecosystem services (e.g. hydrology, erosion risk, etc.)
- Social and cultural values (names and locations of settlements, population and ethnicity, socio-economic context infrastructure, migration trends, etc.)



³ The wider landscape refers to the area surrounding the immediate assessment area (e.g. management unit or plantation), it is not of a specified size, but the assessor must determine what is relevant to consider. For more explanation on the importance of the landscape context see Common Guidance for the Identification of High Conservation Values

⁴ https://www.iucn.org/about/union/secretariat/offices/iucnmed/iucn_med_programme/species/key_biodiversity_areas/



genetic flow between populations. Many relatively small conversions can lead to a deterioration of landscape level conservation values.

1.9.3 National and/or regional context

It is useful to provide an overview of the national or relevant regional context in which the HCV assessment was conducted. Region may refer to subnational or international areas. For instance, it may be useful to consider the subnational level for very large countries, or it may be useful to refer to larger (e.g. biogeographic) regions which cover multiple countries (e.g. the Congo Basin) depending on what scale is most relevant for understanding the significance of the HCVs identified.

1.9.4 Assessing HCV 1-6

For detailed guidance on HCV identification including explanations of definitions, recommendations for methods and sources of information and case study examples, see **Common Guidance for HCV Identification**. The assessment process should lead to decisions on the presence or absence of values, their location, status and condition, and when possible, provide information on areas of habitat, key resources and critical locations which are important in supporting the values.

For all HCV decisions, the assessor should comment on the limitations of current knowledge and any areas of uncertainty concerning the findings.

1.9.5 Preparing maps of HCVs and HCV areas

Maps are a key outcome of the HCV assessment and it is vital that they are clearly presented. Maps must be appropriately scaled, clear and legible, and include a title, date, draft or version number (if appropriate), GPS coordinates, scale bar and legend. It must be clearly stated whether maps are final versions (i.e. ready for active HCV management to begin) or draft versions (e.g. maps of areas where more studies are required before deciding on HCV area boundaries or community use areas which may change after negotiation processes with local people). It must also be clear which maps were used during consultations. The source of maps should also be clearly stated (e.g. government offices, Landsat, etc.). In cases where map scales would need to cover very large areas (e.g. > 1 million ha), assessors may insert hyperlinks in their reports to more user-friendly maps available online.

Box 6: Summary of required information for maps

- Title
- Date
- Version number (if applicable)
- Scale
- Legend
- GPS coordinates
- It must be clearly stated whether maps are final versions (i.e. ready for active HCV management to begin) or draft versions (e.g. maps of areas where more studies are required before deciding on HCV area boundaries or community use areas which may change after negotiation processes with local people).
- Source of information (e.g. government offices, Landsat, etc.).



1.9.6 Stakeholder consultation: Assessment phase

During the full assessment consultation is used to:

- Gather information on the social and environmental situation in the assessment area, to contribute to the HCV identification and decision making process
- Eliminate gaps in data, where information is held by stakeholders
- Provide information on potential impacts of operations on HCVs
- Identify possible approaches for avoiding, mitigating or compensating for negative impacts of operations
- Gather different perspectives and recommendations on threats and management options
- Ensure the transparency of the assessment process and the credibility of the decisions taken.

After initial HCV assessment findings are available, the preliminary designations should be shared with concerned stakeholders to obtain their views and any recommendations. The stakeholder consultation is an opportunity to discuss the HCVs identified, potential threats to the HCVs and management recommendations. Ideally, the stakeholder consultation will result in a general consensus on HCV designations, but if this is not the case, the assessor must make the final decisions with strong justifications and be guided by the precautionary approach. It is helpful to have a draft HCV map(s) for the discussion with stakeholders.

Where HCVs 1, 2, 3 or 4 are present then it is important to consult with environmental NGOs and other parties concerned with conservation of biodiversity. Where HCVs 4, 5 or 6 are present, there should always be consultation with the affected communities. In all cases the consultation process and any agreements or decisions made should be documented. The assessment report must describe the approach (methods) used for stakeholder consultation, when consultation was undertaken during the course of the assessment and provide summary outcomes of consultations, including how (where applicable) inputs were incorporated into the final report.

Detailed documentation must be kept of all consultations, including:

- Date
- Stakeholder details
 - title or role
 - organisation or social group (e.g. farmers, elders, companies, government, village administration, etc.)
 - method of consultation - i.e. the type of interaction: group meeting, individual meeting, phone call, etc. as well as description of information that was shared with the individual/ audience and mode of presentation (e.g. written, visual presentation).

- summary of key concerns/recommendations
- assessment team response

From this detailed documentation, a summary table of stakeholder consultation outcomes must be presented in the body of the assessment report (see [HCV Assessment Report Template](#)).

Before including stakeholder names and their concerns or recommendations in the final report, it is necessary to confirm that you have understood their concerns and recommendations and that you have their permission to list their names; this can be done for example by asking people to approve your written notes via email. However, in cases where people wish to remain anonymous, this must be respected. Assessors can include stakeholder opinions, concerns and recommendations whilst respecting their anonymity. It is also useful to include a brief description of the assessment team response or how stakeholder concerns were addressed and/or incorporated into the final HCV results and recommendations.

Name	Title/role	Organisation/ social group	Key concerns & recommendations / assessment team response
Jane Smith	Biologist	University ABC	<p>How will the project manager ensure that the habitat of the endangered bird will not be fragmented by their operations?</p> <p>Ensure that important nesting sites are included in the conservation areas during spatial planning.</p> <p>This was included in the management recommendations.</p>

Table 3 Example of how to present the summary table of stakeholders consulted and their key concerns and recommendations

1.9.7 Threat assessment

Understanding threats to HCVs is a critical step in making management recommendations to maintain and/or enhance the values. The HCV assessor is expected to conduct a threat assessment for the HCVs identified during the assessment. There are several methods available for threat assessment, and a sample is provided in Table 4⁵. Though these threat assessment approaches come mainly from a biodiversity conservation context, they are still useful and can be adapted for use with HCVs in production landscapes.

⁵ The HCV Resource Network does not endorse a certain approach over others.

Threat assessment method or approach	Scope and context
<p>IUCN Threats Classification Scheme – A comprehensive and widely used approach for classifying the type of direct threats to species. It was jointly developed by the IUCN, WWF, TNC, ZSL, WCS and Birdlife in order to have a single unified classification system and builds on many of the approaches listed below. The current version can be found here: http://www.iucnredlist.org/technical-documents/classification-schemes/threats-classification-scheme (Salafsky <i>et al.</i> 2008).</p>	<p>This scheme covers only direct threats to threatened species, but is applicable to habitats and ecosystems. It does not provide guidance on how to prioritise threats. Resources discussing definitions of direct threats and stresses are referenced here.</p>
<p>Rapid Assessment and Prioritisation of Protected Area Management – Broad methodology for testing the effectiveness of a protected area (PA), but includes a threat (future) and pressure (past or present threat) prioritisation scheme based on their extent, impact and permanence (Ervin 2003).</p>	<p>Assessment of overall PA management, including threat prioritisation.</p>
<p>Threat Reduction Assessment – A broad strategy developed to assess the effectiveness of conservation and development projects. It describes ultimate (indirect) and proximate threats (direct), and it also separates threats as either internal or external to the project.</p>	<p>Threat assessment for combined conservation and development projects.</p>
<p>ZSL threat monitoring protocol – The only protocol listed here that was developed specifically for use in a production context. It is intended for use by managers that are responsible for managing and monitoring HCVs, but provides useful advice for assessors. For example, threats are defined according to their state and intensity (ZSL 2013).</p>	<p>Monitoring threats to HCV areas in oil palm concessions.</p>
<p>Environmental Risk Assessment (ERA) – A simple tool to assess the environmental impacts of smaller-scale forestry operations (e.g. community forests and SLIMFs⁶). This tool is designed to minimise costs for low risk situations, where there are no reasons to expect that operations cause unacceptable environmental damage. The tool is not HCV-specific, but covers aspects pertinent to HCVs, such as threatened species (Synnott and Wenban-Smith 2009).</p>	<p>Risk assessment for FSC -certified forests</p>

Table 4 Threat assessment approaches that can be used in the context of HCV management.

6 Small or low-intensity managed forests.



Threats to HCVs can have internal sources, from the land manager's own operations (e.g. road building, habitat fragmentation, poor harvesting practice, pollution, conversion etc.), or external sources (e.g. encroachment, illegal logging and hunting, armed conflict, poor governance, land zoning plans incompatible with conservation). Threats can also be direct such as vegetation clearance or hunting, or they may be indirect such as increased migration to the project area which places pressure on the natural resource base. Understanding threats to HCVs is a critical step in making management recommendations to protect and/or enhance the values. The assessor should recommend management options for these threats and consult with experts and stakeholders on their feasibility.

1.9.8 Management and monitoring recommendations

For each HCV, management recommendations need to be presented, aimed at maintaining or enhancing the value. However, the assessor is not expected to present detailed management objectives and targets. Assessors should bear in mind that more than one HCV may be covered by the same management recommendation. Management recommendations also need to consider threat management or mitigation options.

Management recommendations must be linked to maps and descriptions of HCV management areas. Maps should be presented following HCVRN guidance (see Section 1.9.5).

The overarching purpose of HCV monitoring is to determine whether HCVs are being maintained over time. At the point of the assessment, monitoring options, even if fairly general, need to be presented for each HCV. However, assessors are not expected, as part of the ALS, to provide the Organisation commissioning the assessment with a full HCV management and monitoring plan. Assessors may choose to provide these additional services outside of the ALS⁷. Only management (and general monitoring) recommendations must be included in the HCV assessment report submitted to the HCVRN.

HCV	Threats	Management recommendations	Monitoring recommendations
HCV 1: Blandings turtle in Canadian timber concession	One of the main threats to Blanding's turtle comes from road building, which causes habitat loss and fragmentation and direct turtle mortality from vehicle collision.	<ul style="list-style-type: none"> No timber harvest or road construction within 30 m of nesting areas Harvest in other areas controlled based on time of year and distance from sensitive HCV areas (turtle habitat) 	<ul style="list-style-type: none"> Annual species population surveys (e.g. individuals) Habitat quality surveys Regular monitoring patrols to maintain HCV area boundaries

Table 5 Example of how to present HCV management and monitoring recommendations in a summary table

⁷ See Common Guidance for HCV Management and Monitoring.

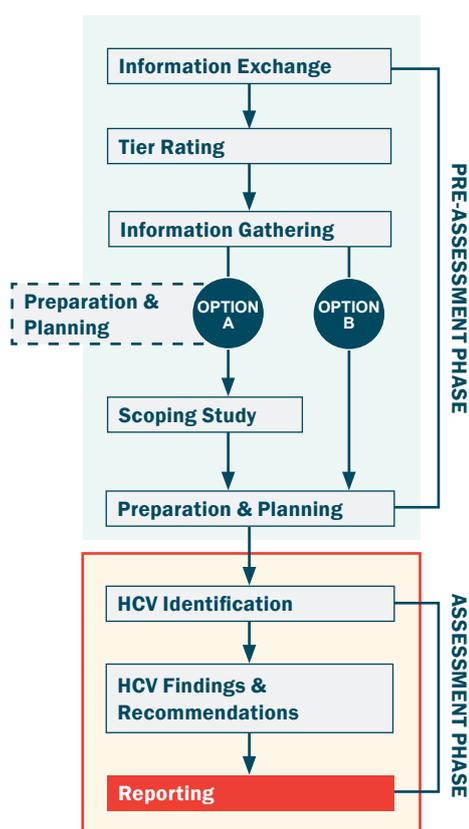


1.10 Reporting

The final step of the HCV assessment process is the preparation of the assessment report. The assessment report needs to use the **HCV Assessment Report Template**. The assessor must refrain from any form of plagiarism in the production of the HCV assessment report, ensuring that all references and data sources are properly credited, and that assessment reports are the original work of the licensed assessor. If you wish to use an alternative report format for the HCV assessment report, you must first seek permission from the HCVRN Secretariat.

Peer review

Once the assessment report is complete, it must be sent for a peer review (if applicable). Because peer reviews are designed to improve the quality of assessment reports by providing constructive feedback, it is strongly recommended that the assessor have the HCV assessment report peer reviewed BEFORE submitting it to the Organisation commissioning the assessment⁸. Peer reviews are required for all Tier 1 assessments (see Section 1.2). It is the responsibility of the lead assessor to engage a peer reviewer from the approved list of HCVRN peer reviewers. Peer reviewers are expected to adhere to a code of conduct and to produce a peer review using the **Peer Review Report Template**. Once the peer reviewer has completed the peer review report, you will have the opportunity to read the peer review report and to amend your HCV assessment report based on their recommendations. If revisions were requested, then the revised report must be re-submitted to the peer reviewer to obtain a **Sign-off Letter** stating that you have indeed addressed the peer reviewers concerns. If you have a dispute regarding a peer reviewer's adherence to ALS procedures and templates for peer reviewers you may contact the HCVRN Secretariat.



1.10.1 Public summary

Once the assessment report has been “approved” by a peer reviewer, the licensed assessor must prepare a public summary using the **Public Summary Template**. Public summaries are a requirement of the ALS and must be submitted along with HCV assessment reports. The public summary can also be used as an executive summary for senior managers of the Organisation commissioning the assessment or others who do not require the full report. The HCVRN does not require a separate executive summary.

Public summary titles will be listed on the HCVRN Website, but the assessor must provide a copy of the summary upon request by stakeholders and other interested parties.

Public summaries should contain all the information which relates to the identification of HCVs and which is relevant to the public understanding of decisions on HCVs. The summary report may exclude: commercially sensitive information which is not relevant to HCV identification or management, and sensitive information which could be misused (e.g. nesting sites of rare species, burial sites at risk from grave robbers etc.).

⁸ However, it is useful to present draft findings and recommendations to the Organisation whilst compiling the first draft of the report – for early feedback into the reporting process.

Some certification standards make specific requirements about public review processes for HCV assessments, and these should be followed where applicable – in addition to HCVRN requirements.

1.10.2 Submitting your report

Once you have finalized all the reporting requirements, you are ready to submit the assessment report and supporting documents, along with a report evaluation fee, to the HCVRN ALS. The final report submitted to ALS must be the same report (i.e. version) that is submitted to the Organisation.

Required documents

The following set of documents, using the HCVRN ALS templates, are required and must be uploaded upon completion of the HCV assessment:

In all cases:

- HCV Assessment Report (PDF < 20 MB)
- Public Summary (PDF < 8MB)

If applicable:

- Peer review report (PDF <16 MB)
- Peer review sign-off letter (PDF <2 MB)
- Cover sheet for non-standard HCV assessment report (if approved) (PDF < 2MB)

Once all documents have been uploaded, the report evaluation fee (Tier 1 or Tier 2) must be paid.

References

Ervin, J. 2003. WWF: Rapid assessment and prioritization of protected area management (RAPPAM) methodology. WWF, Gland, Switzerland.

Salafsky, N. *et al.* 2008. A standard lexicon for biodiversity conservation: unified classifications of threats and actions. *Conservation Biology* 22: 897–911.

Synnott, T and M. Wenban-Smith. 2009. Environmental Risk Assessment for FSC certification in the Selva Maya (Maya Forest). Supported by the ICCO.

Zrust, M., L. D'arcy, L. Sadikin, A. Suhada, E. Hermawan, L. Leonald, Rudiyanto, S. Wahyudi, R. Amin, O. Needham and D. Priatna. 2013. HCV Threat Monitoring Protocol. Zoological Society of London, Indonesia. http://www.sustainablepalmoil.org/files/2013/05/Threat_Monitoring_Protocol_FINAL-VERSION.pdf

Annexes

Annex 1: Terms of reference for HCV assessment team

This is meant as a general guide to the kind of expertise necessary for most HCV assessments. All team members should meet the general requirements and where specified, the additional specialist requirements as listed:

General requirements

- Applied conservation/social training and/or practical field experience
- Appropriate background in one of the fields required for HCV assessment
- Local experience within the country or at least region is recommended
- Understanding of the 6 HCV categories, how they relate to each other, and how they relate to other principles in the standard being followed (e.g. FSC, RSPO standards, as applicable)
- Ability to relate the findings of HCV identification to management and monitoring recommendations

Team leader

Lead assessors must possess a provisional or full HCVRN ALS license and:

- Demonstrate understanding of the HCVs and HCV experience
- Have an appropriate background in applied conservation (ecological or social experience)
- Demonstrate ability to synthesise a variety of data from desk research and field assessments
- Have an ability to reach workable consensus on management decisions (ability to understand the impact of management decisions on HCVs and for various stakeholders)
- It is desirable, but not an absolute requirement, that the leader has local experience within the country of the assessment

Team leaders can also have specialised discipline knowledge and could therefore have overlapping qualities with the experts in the next column.

Social experts

Anthropology, social impact, community livelihoods, etc.

- Knowledge and practical field experience within the local context compulsory
- Be able to speak fluently in one or more relevant local languages
- Knowledge of and practical experience in the use and application of participatory mapping methods and social science methods
- Understanding of GIS is ideal

Biodiversity/ecology experts

Botany, forest ecology, hydrology, species experts, landscape ecology, etc.

- Practical experience in applied conservation biology
- Understanding of landscape conservation approach
- Some specialisation in ecology of important species groups is useful
- Knowledge of and practical experience in the use and application of relevant ecological survey methods
- Understanding of GIS is ideal

GIS expert

- Ability to apply GIS techniques to conservation biology and community land use issues
- Ability to incorporate results in real time and advise the team on GIS methodology

