Pest Detection / CAPS Survey Work Plan Template - Fiscal Year 20XX

To assist in the development of the program work plan/proposal, we have prepared the following outline as a guide. The work plan/proposal should describe, in detail, the activities to be conducted by the parties to the agreement. Involvement by other parties in the program or project, which is incidental to the agreement, should only be discussed as indicated in III.B.10.

The work plan for a cooperative agreement discusses the roles and responsibilities of the parties to the agreement (those signing) and the interaction between them as well as their resource contributions.

Major topics outlined (I, II, III, IV, V, VI and VII) should be included in each program work plan/proposal. It is not intended to be all inclusive, but to serve as a reference for items which should be discussed in development of the program narrative.

A lead in paragraph should be included to identify the cooperating parties, the agreement number, and the overall purpose of the initiative as illustrated in the next paragraph.

**As a reminder the work plans should include input by the ADODR (Authorized Departmental Officer's Designated Representative) and be reviewed and approved by the ADODR before they are submitted to the Field Operations (FO) SharePoint site.

Note: *Black italicized text are prompting questions or statements and should remain in the final work plan.*

Note: *Red italicized notes or prompts in the text are to be deleted when finalizing a work plan.*

Note: Non-italicized text remains in the work plan.

Pest Detection/CAPS Survey Work Plan - Fiscal Year 20XX

Cooperator:				
State:				
Project:				
Project funding source:	Pest Detection/CAPS Survey			
Project Coordinator:				
Agreement Number				
Contact Information:	**Address:**			
	Phone:		**Fax:**	
	Email Address:			

This Work Plan reflects a cooperative relationship between the *(insert name of organization)* (the Cooperator) and the United States Department of Agriculture (USDA), Animal and Plant Health Inspection Service (APHIS), Plant Protection and Quarantine (PPQ). It outlines the mission-related goals, objectives, and anticipated accomplishments as well as the approach for conducting a *(insert description of programs, e.g., Small Grains Commodity Survey or Exotic Nematode Survey)* and the related roles and responsibilities of the parties [e.g., APHIS role(s) and Cooperator role(s)] as negotiated.

I) OBJECTIVES AND NEED FOR ASSISTANCE

What relevant need or problem within the cooperator's mission area requires a solution in carrying out a public purpose of support or stimulation authorized by a law of the United States? How does the need or problem align with the mission area and strategic goals of APHIS? This section includes a narrative on how financial assistance will facilitate the cooperator in carrying out a public purpose of support or stimulation authorized by a law of the U.S.

II) RESULTS OR BENEFITS EXPECTED

The Cooperator seeks to conduct a program which is expected to result in:
What results or benefits will be derived from the cooperative effort? Use of bulleted Statements is acceptable.

III) APPROACH

What is the plan of action or approach to the work? For combined survey work plans please include a separate paragraph for each survey detailing survey type, targets, and number of locations?

Describe the activities to be performed under this work plan. The activities must be within the scope of the Notice of Cooperative Agreement Award and consistent with the terms and

*conditions therein. Provide a description for **each survey** for which funding is to be expended. The narrative is to include any information or data that will be shared with APHIS. See the example of a combined survey work plan if this work plan is to contain multiple surveys.*

This section should outline roles and responsibilities that are 1) those of the cooperator, and 2), those of APHIS in terms of work to be performed, expected accomplishments by each party, and resources to be contributed by each. If specific program protocols, action plans, or uniform rules or other program guidelines must be followed, mention them in this section wherever they apply.

The following sections will assist in the preparation of a succinct proposal that provides APHIS with the information required to determine the appropriateness of a cooperative agreement. These items are to be included in the work plan as applicable.

Scientific Name	Common Name	Survey Method	Trap	Lure
Survey 1 (See Guidance for Selecting Survey Names)				
Pest 1				
Pest 2				
Pest 3				
"				
"				
Survey 2				
Pest 1				
Pest 2				
Pest 3				
"				
"				
Etc…				

Definitions for table:
***Scientific Name** = name of target species*
***Common Name** = name of target species*
***Survey Method** = For Priority Pests, select an Approved Method (visual, sample, or trap). For pests without an Approved Method, select visual, sample, or trap as appropriate to the pest's biology.*
***Trap** = For Priority Pests, select an approved trap (use exact name from Approved Methods for Pest Surveillance page for this pest, ex. "Multi-funnel Trap, 12 Funnel, Wet"). If pest is not a priority pest, select a trap from the NAPIS Trap Dictionary.*
***Lure** = For Priority Pests, select an approved lure (use exact name from Approved Methods for Pest Surveillance page for this pest, ex. "Helicoverpa armigera Lure"). If pest is not a priority pest, select a lure from the NAPIS Lure Dictionary.*

Survey 1: *Include a short paragraph describing the survey. See Example of a Combined Survey Work Plan. Include this paragraph even if this work plan is for one survey.*

Survey 2: *Include a short paragraph describing the survey. See Example of a Combined Survey Work Plan.*

Survey 3: *Include a short paragraph describing the survey. See Example of a Combined Survey Work Plan.*

A. **The Cooperator Will: (***Tip: If a combined work plan, use bullet points for each survey if there are differences between/among the surveys. See the combined survey example.)*

1. **By function, what work is to be accomplished?**
   Cite program standards, action plans, or other program guidelines as a standard for conducting the particular functions for this program, as applicable.

2. **What is the quantitative projection of accomplishments to be achieved?**

   a. *By activity or function, what are the anticipated accomplishments by month, quarter, or other specified intervals?*

   b. *What criteria will be used to evaluate the project? What are the anticipated results and successes?*

3. **What numbers and types of personnel will be needed and what will they be doing?**

4. **What equipment will be needed to perform the work?** *Include major items of equipment with a value of $5,000 or more.*
   a. *What equipment will be provided by the cooperator?*

   b. *What equipment will be requested from APHIS on loan?*

   c. *What equipment will be purchased in whole or in part with APHIS funds?*

   d. *How will the equipment be used?*

   e. *What is the proposed method of disposition of the equipment upon termination of the agreement/project?*

5. **Identify information technology equipment, e.g., computers, and their ancillary components.** *All information technology supplies (e.g., small items of equipment, connectivity through air cards or high speed internet access, GPS units, radios for emergency operations etc.) should be specifically identified.*

6. **What supplies will be needed to perform the work?** I*dentify individual supplies with a cumulative (e.g. 4 microscopes at $1500 each) value of $5,000 or more as a separate item.*
   a. *What supplies will be provided by the Cooperator?*

   b. *What supplies will be requested from APHIS (list supplies)?*

   c. *What supplies will be purchased in whole or in part with APHIS funds?*

   d. *How will the supplies be used?*
   e. *What is the proposed method of disposition of the supplies with a cumulative value over $5,000 upon termination of the agreement/project?*

7. **What procurements will be made in support of the funded project and what is the method of procurement (e.g., lease, purchase)?**
   Cooperator procurements shall be in accordance with OMB Circulars A-102 or A110, as applicable.

8. **What are the travel needs for the project?**
   a. *Is there any local travel to daily work sites? Indicate rates and total costs in the Financial Plan.*

   b. *What extended or overnight travel will be performed (number of trips, their purpose, and approximate dates)? Indicate rates and total cost in the Financial Plan.*

9. **Reports**:

   All Reports will be completed in ezFedGrants. Reports include:

   a. Narrative accomplishment reports in the frequency and time frame specified on the Agreement Award Face Sheet.

   b. Federal Financial Reports, SF-425, in the frequency and time frame specified on the Agreement Award Face Sheet.

10. **Are there any <u>other</u> contributing parties who will be working on the project?**
    a. *If so, list other participating institutions/agencies who will work on the project.*

    b. *Describe the nature of their effort.*

B. APHIS Will:

1. **Outline the Agency's (USDA APHIS PPQ) substantial involvement.**
   a. *Include any significant Agency collaboration and participation*
   Examples: input and oversight in the development and execution of the survey to ensure it meets national program goals and APHIS mission needs within the state; work with the cooperator to maximize all applicable protocols and provide technical assistance; participate in the design or direction of activities to develop the regulatory plan; participate in the analysis or storage of data as needed; general oversight; funds as available to assist the cooperator.

   b. *Project oversight and performance management*
   *Responsibility for the management, control, direction or performance of the project is <u>**shared**</u> by the assisting agency and the recipient. Examples: participating or assisting in the design or direction of activities, selection of contractor staff or trainees, collection and/or analysis, reviewing and approving each stage of a project.*

   c. *Provide the equipment requested by the cooperator in 4.b. & c.*
   d. *Provide the supplies requested by the cooperator in 6.b. & c.*

IV) GEOGRAPHIC LOCATION OF PROJECT

A. *Is the project statewide or in specific counties? (List the names of ALL counties and tribal areas that apply [denote counties for each separate survey if this is a bundled survey work plan]).*

B. *What type of terrain will be involved in the project? (e.g., cropland, rangeland, woodland)*

C. *Are there any unusual geographic features which may have an impact on the project? List all that apply.*

V) DATA COLLECTION AND MAINTENANCE

Each State is responsible for entering complete, accurate, and timely pest survey data that was obtained using the Approved Methods for Pest Surveillance. The National Agricultural Pest Information System (NAPIS) is the final repository for all Pest Detection and Cooperative Agricultural Pest Survey (CAPS) survey results. As such, all data generated from all Pest Detection/CAPS surveys will be entered into NAPIS at https://napis.ceris.purdue.edu. In addition:

- First record for the State and/or County will be entered within **48 hours** of confirmation of identification by a qualified identifier.
- All other required records, both positive and negative survey data, must be entered **within two weeks** of confirmation.
- All records are to be entered into the NAPIS database no later than the date that the final Accomplishment Report is due, otherwise a justification must be provided in the Accomplishment Report. If results have not been returned from an identifier or diagnostic lab by the time the Accomplishment Report is due, please notify the ADODR and the National Operations Manager for Pest Detection.

All survey data performed by federal personnel in conjunction with this agreement should be properly arranged and formatted for NAPIS data entry and provided to the State Survey Coordinator for entry into NAPIS.

VI) TAXONOMIC SUPPORT

Definitions:

- *Preliminary identification – sorting, screening, and preliminary identification of samples. Suspect positives will be submitted for confirmatory identification.*
- *Confirmatory identification – confirming pest identifications that are preliminarily made by a federal or state official or competent private entity of domestic samples.*
    - *Confirmatory identification will be provided separately and should not be captured here.*

Choose A or B.

- *If you do not need taxonomic assistance for preliminary identification, list the person(s) or institution who will perform the identification/diagnostics, and do not check B.*
- *If you need assistance, check B. Do not list requests for confirmatory identification here.*

A. Person(s) or Institution that will screen/identify targets (Name & Contact Information) and level of screening/identification.

It is your responsibility to confirm that an identifier or institution that you have used previously is available to provide taxonomic support for the proposed targets each year.

OR

B. ☐ Request for taxonomic support.

*If you need assistance in finding an identifier or institution to provide preliminary identification for a target **(Priority Pests only)** you may reach out to the National Operations Manager for Pest Detection.*

For other pest programs, reach out to the respective National Operations Manager.

There is no guarantee that taxonomic assistance will be available for all targets.

It is your responsibility to confirm taxonomic assistance arrangements before work plans are submitted.

VII) SURVEY SUMMARY FORM

A Survey Summary Form must be completed to summarize all Pest Detection/CAPS surveys **funded by the Pest Detection line item.** If surveys are combined into one work plan, each individual survey still needs to be entered separately into the Survey Summary Form.

The Survey Summary Form will be completed online on the CAPS Resource & Collaboration site. The online Survey Summary Form must be completed when the work plans are submitted to the SPHD's office. No work plans will be reviewed or approved without a completed Survey Summary Form. States are strongly encouraged to list State contributions to the survey effort on the Survey Summary Form and the Financial Plan whenever possible (note that the figures listed in these two forms must equal each other). This information will assist the Pest Detection Program answer requests and questions from the Agency, Department, and Congress, and prepare future budget requests. ***Please contact the National Operations Manager for Pest Detection if you have any questions.***

If surveys are combined into one work plan, each individual survey still needs to be entered separately into the Survey Summary Form. This is important for CAPS and Pest Detection reporting purposes, as well as for populating My Surveys in NAPIS and the Accountability Report.

VIII) SIGNATURES

ROAR	**Date**	**ADODR**	**Date**