[Insert farm name here]

Farm Plan

[insert address here]

[insert phone number here]

[insert email/website here]

Created: [*insert date farm plan created here*]

Updated: [*insert date farm plan updated created here*]

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# Instructions for Using This Farm Plan

This template is designed to help you get started with creating your operation’s Farm Plan but is not intended to be exhaustive or restrictive in anyway – please feel free to use it as is, modify to meet your needs, add to it, or pull out pieces/sections to supplement an existing farm plan. The template includes all of the areas listed as requirements in Standard 7.1.1, so completing this document will ensure that you meet those requirements.

## Tips for Completing the Template

Here are a few tips for filling this in:

* Any highlighted portions need to be replaced with your farm-specific information and/or protocols.
* Items that are **red and bolded** are your cue that these will also need to be adjusted to reflect what your farm does.
* If a section is not be applicable to your operation, it can simply be deleted. For example, if you are a finishing operation, the Breeding and Lambing section would not apply and can be deleted.

# Farm Overview

## Farm Summary

[Insert description of the farm (e.g., history, where it’s located, stage of production raised, breed raised, typical climate conditions etc.)]

## Farm Contacts

|  |  |  |  |
| --- | --- | --- | --- |
| Farm manger | Name | Phone | Email |
| [insert info here] | [insert info here] | [insert info here] |
| Employees | Name | Phone | Position |
| [insert info here] | [insert info here] | [insert info here] |
| [insert info here] | [insert info here] | [insert info here] |
| [insert info here] | [insert info here] | [insert info here] |

## Locations

|  |  |  |  |
| --- | --- | --- | --- |
| Sites | Address | Size*in acres/hectares* | Location used for:*e.g., breeding, summer pasture* |
| Home Farm | [insert info here] | [insert info here] | [insert info here] |
| [insert site name] | [insert info here] | [insert info here] | [insert info here] |
| [insert site name] | [insert info here] | [insert info here] | [insert info here] |
| [insert site name] | [insert info here] | [insert info here] | [insert info here] |
| [insert site name] | [insert info here] | [insert info here] | [insert info here] |

**Attach a map of your sites, if available.**

# Animal Inventory

## Breeding Stock Inventory

**Delete this section is your farm does not have breeding animals.**

|  |  |  |
| --- | --- | --- |
| Category  | Number of sheep | Inventory as of: |
| Ewes | [insert sheep numbers] | [insert date] |
| Rams | [insert sheep numbers] | [insert date] |
| Ewe lambs *(replacements)* | [insert sheep numbers] | [insert date] |
| Ram lambs *(replacements)* | [insert sheep numbers] | [insert date] |

## Market Lamb Inventory

|  |  |  |  |
| --- | --- | --- | --- |
|  | Spring lambs | Fall lambs |  Inventory as of: |
| Target lambing % | [insert target lambing %] | [insert target lambing %] |  |
| Number of market lambs *(Actual # of lambs, if available)* | [insert lamb numbers] | [insert lamb numbers] | [insert date] |

# Farm Programs, Identification, and Segregation Protocols

## Farm Programs

Our farm participates in [insert any programs the farm participates in (e.g. organic certified, G.A.P., ABF, grass-fed, seedstock program, 4-H)].

## Animal Identification

Ewes and ewe lambs are identified by [insert method (e.g. red ear tag, pen number)].

Rams and ram lambs are identified by [insert method (e.g. red ear tag, pen number)].

Market lambs are identified by [insert method (e.g. red ear tag, pen number)].

## Segregation Protocol

**Copy and paste the statement below if segregation protocols differ across farm programs.**

If market lambs do not meet the [insert farm program] program requirements, we [insert method (e.g. remove the red ear tag)] to ensure they are identified as fall out animals.

# Animal Health and Husbandry Calendar

Below is an overview of our farm’s animal health plan and routine husbandry practice calendar.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Month | Health Plan*e.g., vaccinations, parasite control, or other prevention programs* | Given to:*e.g., lambs, ewe-lambs, ewes, rams* | Husbandry Practices*e.g., breeding dates, lambing dates, castration, tail-docking etc,* | Other Routine Practices*e.g., shearing, crutching/dagging, disbudding, etc.* |
| January | [insert info here] | [insert info here] | [insert info here] | [insert info here] |
| February  |  |  |  |  |
| March |  |  |  |  |
| April  |  |  |  |  |
| May |  |  |  |  |
| June |  |  |  |  |
| July |  |  |  |  |
| August  |  |  |  |  |
| September |  |  |  |  |
| October |  |  |  |  |
| November |  |  |  |  |
| December |  |  |  |  |

# Flock Observations

Sheep are observed as follows. **The sites listed here should match those in the Farm Overview: Locations section.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Month | Home Farm | [insert site name] | [insert site name] | [insert site name] | [insert site name] |
| January | [e.g. once a day, once a week, etc.] | [e.g. once a day, once a week, etc.] | [e.g. once a day, once a week, etc.] | [e.g. once a day, once a week, etc.] | [e.g. once a day, once a week, etc.] |
| February  |  |  |  |  |  |
| March |  |  |  |  |  |
| April  |  |  |  |  |  |
| May |  |  |  |  |  |
| June |  |  |  |  |  |
| July |  |  |  |  |  |
| August  |  |  |  |  |  |
| September |  |  |  |  |  |
| October |  |  |  |  |  |
| November |  |  |  |  |  |
| December |  |  |  |  |  |

# Feeding Plan Calendar

Sheep are managed with the following feeding plan.

|  |  |  |
| --- | --- | --- |
| Month | Category | Notes |
| Ewe | Rams | Ewe lambs *(replacements)* | Ram lambs *(replacements)* | Market lambs |
| January | [insert type of pasture, feed/forage, feeding times, etc.] | [insert type of pasture, feed/forage, feeding times, etc.] | [insert type of pasture, feed/forage, feeding times, etc.] | [insert type of pasture, feed/forage, feeding times, etc.] | [insert type of pasture, feed/forage, feeding times, etc.] | [insert info here, if necessary] |
| February  |  |  |  |  |  |  |
| March |  |  |  |  |  |  |
| April  |  |  |  |  |  |  |
| May |  |  |  |  |  |  |
| June |  |  |  |  |  |  |
| July |  |  |  |  |  |  |
| August  |  |  |  |  |  |  |
| September |  |  |  |  |  |  |
| October |  |  |  |  |  |  |
| November |  |  |  |  |  |  |
| December |  |  |  |  |  |  |

# Water, Vitamins, and Minerals

## Water Availability

**The sites listed here should match those in the Farm Overview: Locations section.**

|  |  |
| --- | --- |
| Sites | Sheep have access to water through:*e.g., troughs, hydrants, streams, ponds* |
| Home Farm | [insert info here] |
| [insert site name] | [insert info here] |
| [insert site name] | [insert info here] |
| [insert site name] | [insert info here] |
| [insert site name] | [insert info here] |

In case our farm needs an alternative water supply, we [insert plan (e.g., we would move all sheep to the home farm, or we would truck in water, or we have a reserve water tank, etc.)].

## Vitamins and Minerals

**Delete whichever statement is not applicable to your farm.**

Our pastures are not vitamin/mineral deficient.

OR

Our pastures are deficient in [insert vitamin/minerals]; sheep are supplemented with [describe your vitamin/mineral supplement program].

# Health Challenges

## Health Risks

On our farm, sheep are at risk of [insert diseases, parasites, and other health problems that are common challenges for your farm].

## Veterinarian Information

|  |  |  |  |
| --- | --- | --- | --- |
| Veterinarian name | [insert info here] | Clinic name | [insert info here] |
| Phone number | [insert info here] | Clinic address | [insert info here] |

## Medication Storage

Medications and treatments are kept [describe where these substances are stored].

# Care of Sick and Injured Sheep

If a sick or injured animal is found, we use the following protocols.

**Example:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| ***Lameness*** |  |  If **a *sheep has a limp, a head bob, and shortened strides, but is still able to keep up with the flock*** | 🡪 | I will treat | 🡪 | Sheep will be treated with ***hoof trimming and topical spray*** |
|  |  |  |  |  |
| If ***a sheep walks with an obvious limp and is no longer able to keep up with the flock*** | 🡪 | I will segregate sheep from the flock | 🡪 | Sheep will return to the flock when ***the sheep is able to walk normally, bearing weight equally on all 4 legs*** |
|  |  |  |  |  |
| If ***a sheep is unable to walk or bear weight on 1 or more legs*** | 🡪 | I will euthanize | 🡪 | Sheep are euthanized by ***penetrating captive bolt*** |
|  |  |  |  |  |
| If ***lameness is affecting more than 5% of the flock*** | 🡪 | I will call my veterinarian |  |  |

**Copy and paste the table below and completed it for each type of health risk on your operation.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| [insert types of diseases/ illnesses/ injuries here] |  |  If [insert what conditions that will lead to a treatment] | 🡪 | I will treat | 🡪 | Sheep will be treated with [insert treatment] |
|  |  |  |  |  |
| If [insert what conditions that will lead to segregation] | 🡪 | I will segregate sheep from the flock | 🡪 | Sheep will return to the flock when [describe when segregation is no longer needed] |
|  |  |  |  |  |
| If [insert what conditions that will lead to euthanasia] | 🡪 | I will euthanize | 🡪 | Sheep are euthanized by [insert euthanasia method] |
|  |  |  |  |  |
| If [insert what conditions that will lead to calling your vet] | 🡪 | I will call my veterinarian |  |  |

# Handling

## Handling tools

Our farm moves sheep using [insert handling tools used on your operation].

## Squeeze chute/cradles

Our farm has [insert type of handling facilities (e.g., squeeze chute, cradles, etc.)] at [insert sites]. They are used for [insert what type of procedures your squeeze chutes/cradles are used for].

It is our farm’s policy to only restrain sheep in chutes for [insert how long sheep are restrained for].

## Holding pens

During processing, sheep kept in holding pens are provided with [insert provisions for sheep in holding pens (e.g., feed, water, bedding, shade, etc.)].

## Working dogs/horses

**Delete this section if working dogs/horses are not applicable to your farm.**

Our farm uses [dogs or horses] to move sheep [insert when they are used]. They are trained and controlled by [insert who handles dogs/horses].

# Breeding and Lambing

**Delete this section if it is not applicable to your farm.**

## Breeding Program

Our farm using [natural breeding/artificial insemination, both]. Our breeding protocol includes [insert protocol here. For natural breeding, include how you decide which ewes/rams to use, when rams are exposed to ewes, target lambing dates, and if/when rams are used for clean-up. For artificial insemination, include insemination protocols, include how you decide which ewes/semen to use, target lambing dates, and if/when rams are used for clean-up.]

## Lamb Processing

Our farm raises a [spring, fall, or spring and fall] lamb crop. The lambing dates can be found on our healthy and husbandry calendar.

### Castration

Lambs are castrated at an average age of [insert age] weeks, using [insert castration method (e.g., rubber rings/bands, scalpel, bloodless clamp/burdizzo)].

### Tail docking

Lambs are tail docked at an average age of [insert age] weeks, using [insert tail docking method (e.g., rubber rings/bands, scalpel, cauterizing blade, bloodless clamp/burdizzo)].

### Weaning

Lambs are weaned at an average age of [insert age] weeks, by [insert weaning method (e.g., fence line weaning, gradual removal of ewes from a group].

## Orphaned Lambs

We manage orphaned lambs by [describe how you manage orphaned lambed (e.g., graphing them onto another ewe, raising orphaned lambs in groups with self-feeders, etc.)].

# Housing

**Delete this section if sheep do not have access to housing on your farm.**

Sheep have access to housing during [insert when sheep have access to housing {e.g., at finishing, at lambing, etc.)].

## Access to Outdoors

When sheep are housed, they have daily access to the outdoors when [insert when sheep are given access to the outdoors (e.g., at all times, from January to March, when temperatures reach below freezing, etc)].

## Flooring and Bedding

Flooring inside housing is made up of [insert flooring material (e.g., dirt, concrete, slatted floors, etc.)].

Inside housing, we sheep are bedded with [insert bedding material (e.g., straw, wood shavings, etc.)]. Bedding is maintained by [describe how bedding is maintained, including how frequently it is cleaned out/replenished] so that all sheep have a dry place to lie.

## Enrichments

Whenever we take lambs off of pasture, we give them enrichments to jump on. Enrichments include [insert type of enrichments provided for lambs (e.g., hay bales, man-made platforms, etc)].

## Air Quality

**Delete this section if sheep do not have access to housing on your farm.**

When sheep have access to housing, air quality we assess air quality daily, using [insert method used for air quality assessments (e.g., sensory evaluation, ammonia meter, dusk meter)].

**Delete the following if you do not use sensory evaluation to assess air quality.**

We use the following table when assessing air quality using sensory evaluation.



# Rodent and Predator Control

## Rodent Control

**Delete this section if rodents are not a problem on your farm.**

Our farm excludes rodents by [insert exclusion practices (e.g., checking storage areas for holes and sealing, mowing around outside of barns)].

If exclusion is ineffective, our farm controls rodents by [insert control practices (e.g., by placing bait stations in the feed storage areas)].

### Pest Control Storage

Pest control and other toxic substances are kept [describe where these substances are stored].

## Predator Control

**Delete this section if predators are not a problem on your farm.**

Our farm excludes predators by [insert exclusion practices (e.g., using fencing, flagging, guardian animals)].

If exclusion is ineffective, our farm controls predators by [insert control practices (e.g., by firearm with a skilled shooter)].

# Environmental Management

## Pasture Management

[Describe how pastures are managed throughout the year (e.g., pastures are rotated and rested every 6 months)]

## Management During Adverse Weather

Based on our location, there are occasions when adverse weather impacts the farm. In those instances, this is our plan:

|  |  |
| --- | --- |
| Adverse weather condition*e.g., large fluctuations in temperature,* *excessive humidity, freezing rain, blizzard*  | We manage sheep during that time by: |
| [insert info here] | [insert info here] |
| [insert info here] | [insert info here] |
| [insert info here] | [insert info here] |

# Emergency Procedures and Contacts

## Emergency Procedures

|  |  |  |  |
| --- | --- | --- | --- |
| **Scenario**  | **Phone number** | **Contact name** | **Procedure to follow** |
| Fire | [insert phone number] | [insert contact name] | [insert procedure] |
| Flood | [insert phone number] | [insert contact name] | [insert procedure] |
| Power failure  | [insert phone number] | [insert contact name] | [insert procedure] |
| Water shut off / water lines freeze  | [insert phone number] | [insert contact name] | [insert procedure] |
| Other: \_\_\_\_\_\_\_\_ | [insert phone number] | [insert contact name] | [insert procedure] |

## Important Contact Information

|  |  |  |
| --- | --- | --- |
| **Organization** | **Phone number** | **Contact name/notes** |
| Police Department | [insert phone number] | [insert info here] |
| Fire Department  | [insert phone number] | [insert info here] |
| Rescue/Ambulance | [insert phone number] | [insert info here] |
| Hospital/Clinic | [insert phone number] | [insert info here] |
| Transport Company | [insert phone number] | [insert info here] |
| Poison Control Center | [insert phone number] | [insert info here] |
| Extension Personnel | [insert phone number] | [insert info here] |
| Flock Veterinarian | [insert phone number] | [insert info here] |
| State Veterinarian | [insert phone number] | [insert info here] |
| Electric Company | [insert phone number] | [insert info here] |
| Water Company | [insert phone number] | [insert info here] |
| Natural Gas/Propane Supplier | [insert phone number] | [insert info here] |
| Other: \_\_\_\_\_\_\_\_\_\_\_\_\_ | [insert phone number] | [insert info here] |