

Farm and Health Plan Guidance - Poultry

* It is not compulsory to use this template to produce your farm and health plan. However, the Certified Animal Welfare Approved by AGW standards require a farm and health plan for livestock enterprises. If you do not wish to use this template it should provide the basic structure for any other farm or health plan submitted.
* This document should be reviewed and updated whenever changes are made or at least annually.
* If a block or section is not applicable to your operation, please mark the block or section N/A and place a comment in the block describing the reason it does not apply.
* While developing your plan it is recommended that you seek input from a veterinarian or qualified expert to assist you.

Contents

[I. General Information of Farm 3](#_Toc44428395)

[A. Contact information 3](#_Toc44428396)

[B. Sites (ex. outlying or subsidiary farms) 3](#_Toc44428397)

[C. Personnel 4](#_Toc44428398)

[II. Range and Forage Area Management 5](#_Toc44428399)

[III. Laying, Breeder and Meat Bird Management 7](#_Toc44428400)

[A. Breed and Source 7](#_Toc44428401)

[B. Shelter/Roost 9](#_Toc44428402)

[C. Hatching and Brooding 13](#_Toc44428403)

[D. Laying Cycles 15](#_Toc44428404)

[E. Physical alteration 15](#_Toc44428405)

[F. Water and Feed 16](#_Toc44428406)

[IV. Removal of Animals from Approved Farm 19](#_Toc44428407)

[A. Showing animals 19](#_Toc44428408)

[B. Breeding animals 19](#_Toc44428409)

[C. Grazing animals 20](#_Toc44428410)

[V. Breed Stock Sales 21](#_Toc44428411)

[VI. Exclusion from Range and Forage Area 22](#_Toc44428412)

[A. General information 22](#_Toc44428413)

[B. Snow-covered range and forage area and sacrifice range and forage area 23](#_Toc44428414)

[C. Housing/Roost 24](#_Toc44428415)

[VII. Flock Health 30](#_Toc44428416)

[A. Temporary Close Confinement 30](#_Toc44428417)

[B. Antibiotics 30](#_Toc44428418)

[C. Vaccination Policy 30](#_Toc44428419)

[D. Parasites 31](#_Toc44428420)

[E. Injury to Birds 34](#_Toc44428421)

[F. Lameness 35](#_Toc44428422)

[VIII. Health Management 36](#_Toc44428423)

[A. Biosecurity 36](#_Toc44428424)

[B. Predator and rodent control 38](#_Toc44428425)

[C. Mortality and Culling/Euthanasia 40](#_Toc44428426)

[IX. Emergency Information 42](#_Toc44428427)

[A. Emergency Numbers 42](#_Toc44428428)

[B. Potential Emergency Scenarios 42](#_Toc44428429)

[X. Transport 44](#_Toc44428430)

[XI. Slaughter 50](#_Toc44428431)

[Chicks, Poults, Ducklings and Goslings Record for Movements 51](#_Toc44428432)

|  |  |
| --- | --- |
| I. General Information of Farm | |
| A. Contact information | |
| Name and title of person completing form |  |
| AGW Farm ID (if known) |  |
| Mailing address | |
| Primary Farm location (if different from mailing) | |

## B. Sites (ex. outlying or subsidiary farms)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of Farm/Ranch Sites | Address | Distance from home Farm/Ranch | Type of operation/use (ex. pasture/breeding/finishing) | Size/Acres |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

## C. Personnel

|  |  |
| --- | --- |
| Number of staff employed |  |
| Staff titles (Manager, supervisor, laborer, field staff, etc.) | |
| Please detail any training given to new employees | |
|  | |
| Please detail any ongoing training provided to employees | |
|  | |

# II. Range and Forage Area Management

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Range and forage area accessibility and land management | | | | | |
| Do all stock have range and forage area access? | Yes |  | No | |  |
| If not, why not? |  | | | | |
| At what age do stock have range and forage area access? |  | | | | |
| What is the stocking density of birds on range and forage area? |  | | | | |
| Average rainfall |  | | | | |
| Soil type |  | | | | |
| Is soil tested at least every 3 years? | Yes |  | | No |  |
| Are any manures/fertilizers bought in from  off-farm sources? | Yes |  | | No |  |
| If yes, what is bought in? |  | | | | |
| Is the need for bought in manures/fertilizers justified by soil testing and crop nutritional need? | Yes |  | | No |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Is the pasture or forage nutritional content tested? | Yes |  | No |  |
| Types of vegetation (varieties of grasses, etc.) | | | | |
|  | | | | |
| Percentage vegetation cover (average) |  | | | |
| Detail range and forage area management techniques below (e.g. rotations, reseeding, nutrient load, etc.) | | | | |
|  | | | | |
| Detail how any manure, compost or litter is disposed of or spread | | | | |
|  | | | | |

|  |
| --- |
| Detail how run off is avoided/managed |
|  |

III. Laying, Breeder and Meat Bird Management (address for each species to be Animal Welfare Approved certified)

|  |
| --- |
| A. Breed and Source |
| Type(s) of bird kept (chickens, turkeys, ducks, geese and whether layers and/or breeders or meat birds) |
|  |
|  |
| Times of daily inspection of birds/how often are birds checked each day |
|  |

|  |
| --- |
| Breed/breeds of birds used |
|  |
| Reason for breed choice, suitability of breed for farm or system |
|  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Source of birds | | | | |
| Do you own or manage parent/breeder birds? | Yes |  | No |  |
| Are your chicks/pullets/poults, ducklings or goslings bought in? | Yes |  | No |  |
| If the chicks/pullets/poults, ducklings or goslings are bought in, please state at what age |  | | | |
| Name and address of source of chicks/pullets/poults, ducklings or goslings |  | | | |

|  |  |
| --- | --- |
| Production (please give separate numbers for each species and bird type – layer, breeder or meat birds) | |
| Total number of birds on farm at any one time |  |
| Maximum flock or colony size |  |
| Number of females to each male bird (layers/breeders) |  |
| Number and age of meat birds produced for sale |  |
| Average age of birds at slaughter |  |
| Average live weight of birds at slaughter |  |
| Number and age of young birds intended to be layers produced for sale |  |
| Number of hatching eggs produced for sale |  |
| Number of table eggs produced for sale |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| B. Shelter/Roost (Please give information for each species and bird type – layer, breeder, and meat birds.) | | | | |
|  | | | | |
| Type of shelter/roost used for birds with pasture access and description of how it is utilized (Mobile, Stationary, Roost. For a house/shelter to be considered only as a roost, birds must have access to sufficient perches for all to roost, must be let out at first light and have unobstructed access to the ranging and foraging area during daylight hours. Roosts may be used only for Chicken, Turkey, and Muscovy Duck breeder flocks and layers.) | | | | |
|  | | | | |
| Is the shelter/roost capable of providing thermal comfort to birds if the temperature drops below 55°F (13°C) at any time of the day or night for more than 7 days in a row? | Yes |  | No |  |

|  |
| --- |
| If no, how is bird thermal comfort maintained? |
|  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| If birds are shut into shelter at night, at what time are they shut in? |  | | | |
| If birds are shut in at night, at what time are they left out in the morning? |  | | | |
| Number of birds per shelter/roost |  | | | |
| Number of doors/popholes per shelter/roost-dimensions of doors/popholes ex. height and width |  | | | |
| Total area available per mobile or stationary shelter not used as roost (sq. ft.) |  | | | |
| Stocking density per mobile or stationary shelter not used as roost (sq. ft. per bird) |  | | | |
| Are perches provided for the birds? (Chicken, Turkey, and Muscovy Duck breeder flocks and layers only) | Yes |  | No |  |

|  |  |
| --- | --- |
| If yes, at would age are perches provided? |  |
| How much perch space is provided per bird (inches) per shelter/roost? |  |
| What are perches made of (metal, wood, plastic)? | |
|  | |
| What is the layout of the perches (vertical ladder, diagonal, horizontal)? | |
|  | |
| What type of flooring is used in mobile shelter/roost? | |
|  | |

|  |
| --- |
| What type of litter/bedding is used? (Bedding is required only in stationary shelter) |
|  |
| How is litter/bedding managed to keep it dry and friable |
|  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Raised areas (chickens and/or turkeys-meat birds) | | | | |
| Are raised areas provided for the birds? | Yes |  | No |  |
| If yes, at what age are raised areas provided? |  | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Nest boxes (complete for each species of bird if farm has laying or breeding flock) | | | | |
| How many nest boxes are provided for what flock size (e.g. 20 boxes for 100 birds)? |  | | | |
| Do nest boxes have a rail or perch in front of them? | Yes |  | No |  |
| Are nest boxes designed for groups or individuals? | Groups |  | Individual |  |
| What size are nest boxes? |  | | | |
| Is litter/bedding provided in nest boxes? | Yes |  | No |  |
| If yes, please detail litter/bedding provided | | | | |
|  | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| C. Hatching and Brooding | | | | |
| **Mechanical Hatching** | | | | |
| If mechanical hatching is carried out on farm, please detail the maximum capacity of the incubator and hatcher and the temperature and humidity settings on these | | | | |
|  | | | | |
| Are there monitors and/or alarms in your hatchery? | Yes |  | No |  |
| Do you have back up power? | Yes |  | No |  |
| How frequently do you test your back-up power source? |  | | | |
| For an average hatch please state | Number of eggs set |  | Number of eggs hatched |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Natural Brooding** | | | | |
| Does natural brooding take place on your farm? | Yes |  | No |  |
| If yes, is a hen or goose removed from ranging and foraging areas during the brooding period? | Yes |  | No |  |
| Is a hen or goose and her newly hatched chicks, poults, ducklings or goslings kept off ranging and foraging area? | Yes |  | No |  |
| If so, for how long? |  | | | |
| How much space is provided in the house/pen while hen or goose and her newly hatched chicks, poults, ducklings or goslings are kept off ranging and foraging area? |  | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Brooding** | | | | |
| If brooding is carried out on farm, how do you maintain chick/poult/duckling or gosling comfort during brooding (e.g. temperature)? | | | | |
|  | | | | |
| Are there monitors and/or alarms in your brooding area? | Yes |  | No |  |
| Do you have back up power? | Yes |  | No |  |
| How frequently do you test your back-up power source? |  | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Lighting** | | | | |
| Do you have a lighting program? | Yes |  | No |  |
| If yes, describe your lighting program? (age of birds, times of light and darkness, etc) | | | | |
|  | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| D. Laying Cycles | | | | |
| How many laying cycles do birds go through prior to disposal of the flock? |  | | | |
| Is meat from layers sold? | Yes |  | No |  |
| If yes, at what age are layers slaughtered? |  | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| E. Physical alteration | | | | |
| Do birds have any physical alterations carried out, such as beak tipping, pinioning, de-clawing, wattle or comb removal, etc.? | Yes |  | No |  |
| If so, please state what operation(s) are carried out |  | | | |
| If so, what age is this carried out? |  | | | |
| Please detail how birds are physically altered and why this is needed | | | | |
|  | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Identification  Licence no.:  Date completed: | | | | |
| Are birds individually identified in any way? | Yes |  | No |  |
| If yes, please state identification method used and reason for use |  | | | |

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| --- |
| F. Water and Feed (please give information for each bird type) |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Water** | | | | |
| Is drinking water supply constant (e.g. connected to a mains supply)? | Yes |  | No |  |
| If no, please detail how drinking water is provided to the birds and how often this is done | | | | |
|  | | | | |
| If waterfowl are kept on farm is water for behavioral needs separate from drinking water? | Yes |  | No |  |
| Can waterfowl swim in water without their feet touching the bottom? | Yes |  | No |  |
| Can waterfowl dip their heads in water? | Yes |  | No |  |
| Please detail how water is provided for behavioral needs | | | | |
|  | | | | |
| Please detail how water for both drinking and water for behavioral needs is kept clean. | | | | |
|  | | | | |

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| --- |
| **Details of bird rations** (detail type and amounts of feed provided for each bird type) |
| Stage of life (e.g. starter) and feed provided |
|  |
| Stage of life (e.g. grower) and feed provided |
|  |
| Stage of life (e.g. layer/breeder or finisher for meat birds) and feed provided |
|  |

# IV. Removal of Animals from Approved Farm

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| A. Showing animals | | | | |
| Do you show animals? | Yes |  | No |  |
| If yes, please describe in detail covering the following areas: How many shows do you take your animals to in a calendar year? How long are the animals at the show? How many animals do you take? Travel time to shows? Please describe how you maintain animal health and welfare, transport, biosecurity and continued compliance with the Animal Welfare Approved standards while animals are removed from the approved farm. | | | | |
|  | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| B. Breeding animals | | | | | |
| Do you remove animals from your farm for breeding? | Yes |  | No |  |
| If yes, please describe in detail how you maintain animal health and welfare, transport, biosecurity and continued compliance with the Animal Welfare Approved standards while animals are removed from the approved farm. | | | | |
|  | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| C. Grazing animals | | | | |
| Do you remove animals from your farm for grazing acreage which is not owned by you and for which you do not have management control? | Yes |  | No |  |
| If yes, please describe in detail: number of animals sent off-site, length of stay and how you maintain animal health and welfare, transport, biosecurity and continued compliance with the Animal Welfare Approved standards while animals are removed from the approved farm. | | | | |
|  | | | | |

# V. Breed Stock Sales

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Do you sell breed stock? | Yes |  | No |  |
| If yes, please describe in detail covering the three following areas: overall breeding aims, protocol for selecting and matching sires and dams, and the criteria used to assess whether animals are suitable to be marketed as breeding stock. | | | | |
|  | | | | |

# VI. Exclusion from Range and Forage Area

This section must be completed if birds are removed from range and forage areas and housed OR if weather conditions (temperature, wind, snow, etc.) cause birds to choose not to leave housing OR if birds retain access to range and forage areas where vegetation cover cannot be maintained (sacrifice range and forage area) OR if birds remain outside on range and forage areas that are covered by snow to a depth where birds cannot access vegetation.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| A. General information | | | | |
| Do birds have access to range and forage area (growing green vegetation) all year round? | Yes |  | No |  |
| If no, please give reasons why access to growing green vegetation is not possible all year round | | | | |
|  | | | | |
| If you choose to remove your birds from range and forage area or restrict them to sacrifice range and forage areas for any reasons stated above, please state why birds are removed from range and forage areas or restricted to sacrifice range and forage areas and state the trigger(s) for this to take place. [Note: it is not acceptable to simply give a date as a trigger for removal from range and forage area. Triggers should relate to conditions that will affect animal welfare, but please indicate roughly the time of year removal from range and forage area will occur, if known.] | | | | |
|  | | | | |

|  |
| --- |
| Please state trigger(s) for allowing birds back onto range and forage areas. [See note above. As well as trigger(s), please indicate roughly the time of year animals will be allowed back onto range and forage area, if known.] |
|  |

|  |  |
| --- | --- |
| B. Snow-covered range and forage area and sacrifice range and forage area | |
| If animals retain access to range and forage area year around but range and forage areas are likely to be snow covered such that animals cannot access any vegetation for more than 28 days OR if birds retain access to range and forage areas but vegetative cover cannot be maintained: | |
| Please state approximate times of year when range and forage areas may be snow covered |  |
| Please state average depth of snow at this time |  |
| Please state approximate times of year when sacrifice range and forage areas may be used. |  |
| What vegetative material is provided to the birds and how is it provided? (e.g. snow covered pastures scraped, vegetation spread on sacrifice range and forage area, etc.) | |
|  | |
| How is water provided to birds when on snow covered range and forage areas OR sacrifice range and forage areas? | |
|  | |
| How is feed provided to birds when on snow cover range and forage areas OR sacrifice range and forage areas? | |
|  | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| C. Housing/Roost (Please give information for each species and bird type – layer, breeder, and meat birds.) | | | | |
|  | | | | |
| Type of housing/roost used for birds when they do not have access to range and forage area and description of how it is utilized (Mobile, Stationary, Roost. For a house/shelter to be considered only as a roost, birds must have access to sufficient perches for all to roost, must be let out at first light and have unobstructed access to area outside the roost during daylight hours. Roosts may be used only for Chicken, Turkey, and Muscovy Duck breeder flocks and layers.) | | | | |
|  | | | | |
| Is the housing/roost capable of providing thermal comfort to birds if the temperature drops below 55°F (13°C) at any time of the day or night for more than 7 days in a row? | Yes |  | No |  |

|  |
| --- |
| If no, how is bird thermal comfort maintained? |
|  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| If birds are shut into house/roost at night, at what time are they shut in? |  | | | |
| If birds are shut into house/roost at night, at what time are they left out in the morning? |  | | | |
| Number of birds per house/roost |  | | | |
| Number of doors/popholes per house/roost-dimensions of doors/popholes ex. height and width |  | | | |
| Total area available per mobile or stationary house (when not used as a roost) (sq. ft.) |  | | | |
| Stocking density per mobile or stationary house (when not used as a roost) (sq. ft. per bird) |  | | | |
| Total area available outside mobile or stationary housing, if any (sq. ft.) |  | | | |
| Are perches provided for the birds? (Chicken, Turkey, and Muscovy Duck breeder flocks and layers only) | Yes |  | No |  |

|  |  |
| --- | --- |
| If yes, at what age are perches provided? |  |
| How much perch space is house/roost designed to provide? (inches per bird) |  |
| What are perches made of (metal, wood, plastic)? | |
|  | |
| What is the layout of the perches (vertical ladder, diagonal, horizontal)? | |
|  | |
| What type of flooring is used in mobile/roost housing? | |
|  | |
| What type of litter/bedding is used? (Bedding is required only in stationary houses) | |
|  | |
| How is litter/bedding managed to keep it dry and friable | |
|  | |
| Please detail any time that birds may be excluded from range and forage area and confined in the house and the reason (e.g. shut in at night for protection from predators OR excluded from range and forage area when snow is on the ground or temperatures are extremely low) | |
|  | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Raised areas (meat chickens and/or meat turkeys) | | | | |
| Are raised areas provided for the birds? | Yes |  | No |  |
| If yes, at what age are raised areas provided? |  | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Nest boxes (complete for each species of bird for which farm has laying or breeding flock) | | | | |
| How many nest boxes are provided for what flock size (e.g. 20 boxes for 100 birds)? |  | | | |
| Do nest boxes have a rail or perch in front of them? | Yes |  | No |  |
| Are nest boxes designed for groups or individuals? | Groups |  | Individual |  |
| What size are nest boxes? |  | | | |
| Is litter/bedding provided in nest boxes? | Yes |  | No |  |
| If yes, please detail litter/bedding provided | | | | |
|  | | | | |

|  |
| --- |
| Water and Feed (please give information for each bird species and type) |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Water | | | | |
| Is drinking water supply constant (e.g. connected to a mains supply)? | Yes |  | No |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| If no, please detail how drinking water is provided to the birds and how often this is done | | | | |
|  | | | | |
| If waterfowl are kept on farm is water for behavioral needs separate from drinking water? | Yes |  | No |  |
| Please detail how water is provided for behavioral needs | | | | |
|  | | | | |
| Please detail how water for both drinking and water for behavioral needs is kept clean. | | | | |
|  | | | | |
| Feed | | | | |
| How is feed provided? | | | | |
|  | | | | |

# VII. Flock Health

|  |
| --- |
| A. Temporary Close Confinement |
| Please describe in the block below any temporary close confinement or tying up (tethering), which may be required for vaccination, weighing, feeding, milking, marking or veterinary procedures. |
|  |

|  |
| --- |
| B. Antibiotics |
| Please give examples of times when antibiotics might be used |
|  |
| Please detail the procedure for identifying/separating a bird or flock that has been treated with antibiotics |
|  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| C. Vaccination Policy | | | | | | | |
| Do you vaccinate for any of the following/are your birds vaccinated for any of the following? | | | | | | | |
| Mareks | | Yes |  | | No | |  |
| Newcastle Disease | | Yes |  | | No | |  |
| Infectious bronchitis | | Yes |  | | No | |  |
| Salmonella | | Yes |  | | No | |  |
| Mycoplasma | | Yes |  | | No | |  |
| Egg drop syndrome | | Yes |  | | No | |  |
| Avian Rhinotracheitis | | Yes |  | | No | |  |
| Gumboro | | Yes |  | | No | |  |
| Riemerella Anatipestifer | | Yes |  | | No | |  |
| Duck virus enteritis | | Yes |  | | No | |  |
| Duck virus hepatitis | | Yes |  | | No | |  |
| Coccidiosis | | Yes |  | | No | |  |
| Others (Please state) | | | | | | | |
|  | | | | | | | |
| If you vaccinate, list the products used: | | | | | | | |
|  | | | | | | | |
| If you do not typically vaccinate, would you vaccinate if disease pressure existed? | Yes |  | | No | |  | |

## D. Parasites

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Fecal Testing** | | | | |
| Is fecal testing performed? | Yes |  | No |  |
| If yes, when is fecal testing performed? (ex. annually, when the presence of parasites is suspected, etc.) | | | | |
|  | | | | |

|  |
| --- |
| **Ectoparasites** (for example: lice, red mite, flies) |
|  |
| Please state the type of parasites found |
|  |
| Treatment |
| Please state treatments used |
|  |
| Prevention |
| Please state prevention measures adopted |
|  |

|  |
| --- |
| **Internal Parasites** |
|  |
| Please state the type of parasites found (e.g. round worm, tape worm) |
|  |

|  |
| --- |
| Treatment |
| Please state treatments used for each group of birds |
|  |
| Prevention |
| Please state prevention measures adopted |
|  |

|  |
| --- |
| **Coccidiosis** |
|  |
| Treatment |
| Please state treatments used |
|  |
| Prevention |
| Please state prevention measures adopted |
|  |

|  |
| --- |
| E. Injury to Birds |
| Detail any injuries found on birds on farm |
|  |

|  |
| --- |
| Please state treatments used and any preventative measures undertaken |
|  |

|  |
| --- |
| F. Lameness |

|  |
| --- |
| What are the main causes of lameness in the flock? |
|  |
| Treatments used |
|  |
| Prevention measures |
|  |

# VIII. Health Management

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| A. Biosecurity | | | | |
|  |  |  |  |  |
| Do you have a biosecurity policy in place? | Yes |  | No |  |
| Are there disinfectant points prior to entering livestock areas? | Yes |  | No |  |
| Do you restrict employees from keeping their own livestock? | Yes |  | No |  |
| Are vehicles entering property (feed trucks, repair persons’ vehicles, etc.) disinfected? | Yes |  | No |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Please detail companies who regularly send vehicles to your property (e.g. Farmers Milling Co. weekly delivery, etc.) | | | | |
|  | | | | |
| Is this a closed flock? | Yes |  | No |  |
| Do you have isolation facilities for new or sick animals? | Yes |  | No |  |
| Do you have any biosecurity routines for bought in stock? | Yes |  | No |  |

|  |
| --- |
| Please detail the biosecurity routines below |
|  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Do you have shared borders with other livestock farms? | Yes |  | No |  |
| If yes, what measures are in place to prevent the risk of disease transfer between flocks? | | | | |
|  | | | | |
| Do you allow visitors onto your farm? | Yes |  | No |  |
| Do you keep a record of visitors? | Yes |  | No |  |

|  |
| --- |
| If you allow visitors, what measures do you require they take to prevent introduction of disease into your flock? |
|  |

|  |
| --- |
| B. Predator and rodent control |
|  |
| Please state the type of predators and rodents found |
|  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Controls | | | | |
| Do you use Livestock Guardian Dogs in your operation? Ex. Great Pyrenees | Yes |  | No |  |
| Do you use Livestock Guardian Animals in your operation? Ex. Donkey | Yes |  | No |  |
| Do you use Herding Dogs in your operation? Ex. Border Collie | Yes |  | No |  |
| If yes to any of the above, please describe in detail the following areas: Number of Guardian Dogs and/or Guardian Animals and/or Herding Dogs you have. Selection Criteria, Training Procedure, Health and Animal Management, Food, Water and Shelter. | | | | |
|  | | | | |

|  |
| --- |
| Please state any other methods used to control predators and rodents. |
|  |

|  |
| --- |
| C. Mortality and Culling/Euthanasia |

|  |  |  |
| --- | --- | --- |
| Average mortality level |  | |
| Number or percent died |  | |
| Causes of bird mortality | | |
|  | | |
| Prevention measures implemented | | |
|  | | |
| Number or percent culled | |  |
| Reasons for culling/euthanizing birds | | |
|  | | |
| Method of culling/euthanizing birds | | |
|  | | |

# IX. Emergency Information

|  |
| --- |
| Emergency procedures |
| |  |  |  |  | | --- | --- | --- | --- | | A. Emergency Numbers | |  |  | | Owner’s (or Manager’s) cell/mobile phone number |  |  |  | | Veterinarian |  |  |  | | Fire |  |  |  | | Electric company/electric repairs |  |  |  | | Gas company |  |  |  | | Feed company |  |  |  | |

## B. Potential Emergency Scenarios

|  |  |
| --- | --- |
| Potential emergency scenarios – e.g. fire, flood, power failure, etc. (please complete a box below for each one) | |
| Scenario | Fire |
| Actions | |
|  | |
| Scenario | Electricity failure |
| Actions | |
|  | |
| Scenario | Flood |
| Actions | |
|  | |

|  |  |
| --- | --- |
| Scenario | Other (please note) |
| Actions | |
|  | |

# X. Transport

|  |  |
| --- | --- |
| Transport and handling for day olds | |
| Source hatchery name, address and contact numbers |  |
| What type of container are fresh hatched chicks, poults, ducklings or goslings transported in? |  |
| How many chicks, poults, ducklings or goslings are transported per container? |  |
| Is the container marked as containing live birds? |  |
| How long does transport take from hatchery to placement on your farm? |  |

|  |  |
| --- | --- |
| Indicate the method used to record movement of chicks, poults, ducklings or goslings. (Check appropriate box) | |
| Chick, Poult, Duckling or Gosling Record for Movement Form is used (See below on last 2 pages of template). |  |
| All the information required on the Chick, Poult, Duckling or Gosling Record for Movement Form is recorded in another manner and kept in the farm records. |  |

|  |  |
| --- | --- |
| Transport and handling for pullets | |
| Source name and address and contact numbers |  |
| What type and size of container are pullets transported in? |  |
| What age are pullets when transported on or off the farm? |  |
| How many pullets, or what weight of pullets, are transported per sq. ft. of container? |  |
| How long does transport take from pullet rearing site to placement on your farm? |  |

|  |  |
| --- | --- |
| Transport and handling for adult breeder birds | |
| Source name and address and contact numbers |  |
| What type and size of container are breeders transported in? |  |
| What age are breeders transported on or off the farm? |  |
| How many breeders, or what weight of breeder, are transported per sq. ft. of container? |  |

|  |  |  |  |
| --- | --- | --- | --- |
| All transported birds | | | |
| Who transports birds? | | | |
| Farms own staff/trailer |  | Courier/Trucker |  |
| Postal service |  | By air |  |

|  |  |
| --- | --- |
| If the Postal Service is involved in transport of your birds at any time in their lives please answer the following questions | |
| What Post Office are your birds delivered to and how far is this from your farm? |  |
| Does the Post Office inform you that your birds are there/on the way? |  |
| How much notice does the Post Office give you that birds are ready for collection? |  |
| Do you tell the Post Office when you order/expect birds? |  |
| What mortality have you had from birds delivered by the Post Office? |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Moving poultry houses or pens | | | | |
| Do you move poultry houses or pens during the lifetime of the flock? | Yes |  | No |  |
| If yes, describe your procedure and how you ensure the safety of the birds while you move their house or pen |  | | | |

|  |  |
| --- | --- |
| Emergency transport | |
| If you had to transport a bird or birds in an emergency – for example, to a vet for diagnosis and treatment – what kind of vehicle, container or trailer would you use to move the bird? |  |
| How far would you have to travel to take a bird to see a vet? |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Transport and handling at end of lay | | | | | | |
| Pullets and breeders | | | | | | |
| For birds older than day old, is water withdrawn prior to catching? | | Yes | |  | No |  |
| If yes, how long before catching is water withdrawn? | |  | | | | |
| Is feed withdrawn prior to catching? | | Yes | |  | No |  |
| If yes, how long before catching is feed withdrawn? | |  | | | | |
| Who carries out catching? | | Farm staff | |  | Hired catchers |  |
| How are birds caught (e.g. double leg catching, held round body, etc.)? | |  | | | | |
| To where are birds transported? | |  | | | | |
| Who owns the birds when transported at end of lay? | | |  | | | |
| Who transports birds? | | | | | | |
| Farms own staff/trailer |  | Trucker | | |  | |
| Maximum travel length to slaughter or new owner | | | | | | |
| Time |  | Miles | | |  | |
| Stocking density in crates | | | | | | |
|  | | | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Transport and handling when taking birds to slaughter | | | | | |
| Birds Slaughtered at End of Lay and Meat Birds | | | | | |
| Who catches birds prior to transport? | | | | | |
| Farms own staff |  | External catching team | |  | |
| Describe how and when birds are caught | | | | | |
|  | | | | | |
| Is water withdrawn prior to catching? | | Yes |  | No |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| If yes, how long before catching is water withdrawn? | |  | | | | |
| Is feed withdrawn prior to catching? | | Yes | |  | No |  |
| If yes, how long before catching is feed withdrawn? | |  | | | | |
| How long is the total feed withdrawal up to point of slaughter? | |  | | | | |
| Who owns the birds when transported to slaughter? | | |  | | | |
| Who transports birds to slaughter? | | |  | | | |
| Farms own staff/trailer |  | Trucker | | |  | |
| Maximum travel length to slaughter | | | | | | |
| Time |  | Miles | | |  | |
| Stocking density in crates | | | | | | |
|  | | | | | | |

# XI. Slaughter

|  |  |
| --- | --- |
| At the end of the life of the flock where do birds go for slaughter? (Please provide name and address) |  |
| Method of stunning (e.g. hand- held stunner, water bath) | |
|  | |

Date plan completed: ­­­­­­­­

Date plan due for review:

# Chicks, Poults, Ducklings and Goslings Record for Movements

This form must be completed for every batch of chicks, poults, ducklings   
or goslings that is moved OR all the information required on this form must be recorded in another manner, and kept in the farm records for each batch of chicks, poults, ducklings or goslings moved.

|  |  |
| --- | --- |
| MOVEMENT RECORD | |
| Farm name |  |
| Source of birds (hatchery, etc.) with address and contact details |  |
| Date birds ordered |  |
| Number and type of birds ordered |  |
| Proposed date of movement |  |
| CALL TO HATCHERY PRE-MOVEMENT | |
| Date of call |  |
| Contact person |  |
| Proposed date and time of dispatch |  |
| Confirmation that birds will at all times be transported in temperature-controlled and air-controlled vehicles |  |
| Proposed methods of delivery (including vehicle types for the whole journey, e.g. truck, then airplane, then car) |  |
| Points of transfer including address (e.g. hatchery takes birds to My Local Airport at 1000 Airport Drive, My Town, My State) |  |

|  |  |
| --- | --- |
| ACTUAL MOVEMENT | |
| Date birds arrived |  |
| Time birds arrived |  |
| Number of birds arrived total |  |
| Number of birds arrived dead |  |
| Number of birds arrived sick or injured |  |
| Number of healthy, live birds |  |
| Times and places of transfer of birds (e.g. hatchery arrived at airport at 11.00am flight to next airport arrival at 3.00pm) |  |
| Any differences or delays from the originally proposed route |  |